



COMMUNITY DEVELOPMENT DEPARTMENT PLANNING DIVISION

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DEVELOPMENT PERMIT APPLICATION & AGREEMENT TO PAY FEES

Please type or clearly print information in ink. Please provide all three project contacts (OK to note "Same as #__" if one person serves multiple roles), and ensure that **both Signature sections** are filled out.

TYPE OF APPLICATION	FEE DEPOSIT	TYPE OF APPLICATION	FEE DEPOSIT
<input type="checkbox"/> Use Permit		<input type="checkbox"/> General Plan Amendment	
<input type="checkbox"/> Architectural Control		<input type="checkbox"/> Zoning Ordinance Text Amendment	
<input type="checkbox"/> Variance		<input type="checkbox"/> Zoning Map Amendment (Rezoning)	
<input type="checkbox"/> Minor Subdivision (Tentative Parcel Map)		<input type="checkbox"/> Environmental Review	
<input type="checkbox"/> Major Subdivision (Tentative Subdivision Map)		<input type="checkbox"/> Other:	
<input type="checkbox"/> Conditional Development Permit		TOTAL FEES (Deposits are nonrefundable.)	
PROJECT ADDRESS/LOCATION		APN (ASSESSOR'S PARCEL NUMBER)	
1) PROJECT REPRESENTATIVE LEGAL NAME (primary day-to-day contact)		MAILING ADDRESS	
EMAIL	PHONE	FAX	
Check one: <input type="checkbox"/> Property Owner <input type="checkbox"/> Lessee <input type="checkbox"/> Agent of Owner <input type="checkbox"/> Other:			
2) APPLICANT LEGAL NAME (person who acknowledges project cost liability and rights to application materials)		MAILING ADDRESS	
EMAIL	PHONE	FAX	
Check one: <input type="checkbox"/> Property Owner <input type="checkbox"/> Lessee <input type="checkbox"/> Agent of Owner <input type="checkbox"/> Other:			
<p>I (We) hereby agree to pay all personnel and related direct and indirect costs for the review and processing of application(s) for the subject project, at such time as requested by the Community Development Director. Direct costs include, but are not limited to, review of project application(s) for completeness by all applicable City Departments; telephone or written communication with applicant/property owner/architect, engineer, neighbors, interested parties, etc.; preparation of staff reports; and attendance by staff at public hearings. I (we) also hereby agree to pay all costs for preparing any required environmental document in compliance with the California Environmental Quality Act.</p> <p>Deposits paid at the time of application are estimates of the minimum amount of staff time required to process an application. The City will send periodic invoices for the amount in excess of the deposit. Payments are due and payable within 30 days of the invoice. Failure to pay in a timely manner will result in the City stopping all work on the project. The applicant and the property owner will be responsible for the amount due. Unpaid accounts submitted for outside collection will be assessed a collection fee recovery charge of 25% to cover attorney's fees and costs of collection.</p> <p>Furthermore, I (we) hereby agree to hold the City harmless from all costs and expenses, including attorney's fees, incurred by the City, including but not limited to, all cost in the City's defense of its actions in any proceeding brought in any State or Federal Court challenging the City's actions with respect to my (our) project.</p> <p>I (we) hereby certify that the information stated on forms, plans, and other materials submitted herewith in support of the application is true and correct to the best of my (our) knowledge. It is my (our) responsibility to inform the City of Menlo Park, through the assigned project planner, of any changes to information represented in these submittals. I (we) either own the architectural copyright for the project plans or have obtained the architect/designer's consent, and hereby authorize the City to post project plans and other application materials on the City web site and transmit them electronically to interested parties.</p>			
Date: _____		Signature*: _____	Printed Name: _____
<small>*Photocopies or facsimiles not acceptable</small>			

3) PROPERTY OWNER LEGAL NAME		MAILING ADDRESS	
EMAIL	PHONE	FAX	
I (We) have read this application form and hereby consent to the submittal of the subject application.			
Date: _____		Signature*: 	Printed Name: _____
<i>*Photocopies or facsimiles not acceptable</i>			
FOR STAFF USE			City Date Stamp
Accepted By	Tidemark No.		
Staff Comments			

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