



Planning Division Application Form Part 1

Community Development Department ~ 21810 Copley Drive ~ Diamond Bar, CA 91765 ~ (909) 839-7030 ~ www.DiamondBarCA.gov

GENERAL REQUIREMENTS (Print or Type)

Name of Proposed Project:	Case # _____
Location of Project:	FPL # _____
Legal Description of Project (Assessor's Parcel No.):	Deposit /Fee _____
	Receipt # _____
	Date _____
	By _____

Applicant's Name:	Phone Number:
	Fax Number:

Address: _____

Legal Owner's Name (if different from above):	Phone Number:
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Address: _____

Diamond Bar Municipal Code Section 22.44.040 states an application fee must accompany this application. The application fee is either a flat fee or a deposit plus payment of the City's processing costs computed on an hourly basis. If it is a deposit, the applicant shall pay any processing costs that exceed the amount of the deposit prior to issuance of the permit; if processing costs are less than the deposit, a refund will be paid.

Type of Review Requested (Please Check All Applicable Boxes)

- | | | |
|----------------------------|------------------------------|------------------|
| Administrative Review | General Plan Amendment | Subdivision |
| Annexation | Minor Conditional Use Permit | Tree Permit |
| Comprehensive Sign Program | Minor Variance | Variance |
| Conditional Use Permit | Planned Unit Development | Zone Change |
| Development Review | Plot Plan | Zoning Clearance |
| Development Agreement | Preliminary Review | Other: _____ |
| Development Code Amendment | Specific Plan Amendment | _____ |

Project Description

Detailed Description of Proposed Project (Attach Additional Sheets if Necessary)

Owner Certification

I certify that I am presently the legal owner of the above-described property. Further, I acknowledge the filing of this application and certify that all of the above information is true and correct. (If the undersigned is different from the legal property owner, a letter of authorization must accompany the form.)

Owner		Applicant	
Date:	Signature:	Date:	Signature:
Print Name and Title:		Print Name and Title:	



**Planning Division
Application Form
Part 2**

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GENERAL REQUIREMENTS (Print or Type)

Project Location:	Staff Use Only Case No. Concurrent Case No.
Applicant:	
Contact Person:	

Address:

Phone Number:	Fax:	E-Mail Address:
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Additional Contact Person: (Please specify name, company, title)

Address:

Phone Number:	Fax:	E-Mail Address:
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Legal Property Owner:

Address:

Phone Number:	Fax:	E-Mail Address:
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Architect:

Address:

Phone Number:	Fax:	E-Mail Address:
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Engineer:

Address:

Phone Number:	Fax:	E-Mail Address:
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Landscape Architect:

Address:

Phone Number:	Fax:	E-Mail Address:
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