



City of Reedley

Community Development Department
1733 Ninth Street
Reedley, CA 93654
(559) 637-4200
FAX 637-2139

Rezone Submittal Requirements

Please use this information sheet as a checklist to assemble materials required for your Rezone application and bring it with you when you submit your application. If you have any questions about any item requested or if you wish to obtain information on processing schedules, please call the Community Development Department at (559) 637-4200. Ext. 286. The following items must be submitted in order to process your application. If your plans are not legible, or do not contain the required information listed below, your application will not be accepted as complete for processing and/or may extend the length of time needed to review this project.

-
- Completed Master Application Form
 - Environmental Assessment Form
 - Application Fee (Rezone and Environmental Assessment)
 - Preliminary Title Report and/or Supporting Deed Document (prepared with 60 days of submittal).
 - Letter of Owner Authorization (If the Owner is not the Applicant)
 - Legal Description for the Proposed Rezone Boundary
 - Assessor's Parcel Map (Three copies; 11" X 17"; boundary outlined or hatched)
 - Staff consultation: Based on project scope additional information and/or planning studies may be required:
 - Traffic Impact Study
 - Air Quality Analysis
 - Historic Resources Inventory
 - Market Analysis
 - Other: _____
 - Submit a CD containing all of the above requested documents in a PDF format.

Operational Statement must include the following:

- Project Site Address
- Assessor's Parcel Number (APN)
- Acreage to be rezoned
- General Plan land use designation
- Describe existing and proposed General Plan land use designation
- Describe existing and proposed zone district designation.
- Is existing zone district designation consistent with the proposed planned land use (See General Plan 2030 Update, Table 2.3 - Planned Land Use and Zone District Consistency Matrix, Page 28)
- Describe how this proposed zone district designation is complementary to the surrounding setting.
- Describe how this proposed zone district designation helps to implement the General Plan 2030 goals and objectives.
- Describe any contact or discussion you have had with your surrounding neighbors or other potentially impacted by this proposal.

I verify that I am submitting all the required materials on this checklist and I acknowledge that failure to comply with these requirements may result in my application not being accepted and/or may extend the length of time needed to review the project.

Applicant's Signature

Date

(____)

Applicant's Phone #

Applicant's E-mail Address



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General Plan Amendment Submittal Requirements

Please use this information sheet as a checklist to assemble materials required for your General Plan Amendment application and bring it with you when you submit your application. If you have any questions about any item requested or if you wish to obtain information on processing schedules, please call the Community Development Department at (559) 637-4200. Ext. 286. The following items must be submitted in order to process your application. If your plans are not legible, or do not contain the required information listed below, your application will not be accepted as complete for processing and/or may extend the length of time needed to review this project.

-
- Completed Master Application Form
 - Environmental Assessment Form
 - Application Fee (Plan Amendment and Environmental Assessment)
 - Preliminary Title Report and/or Supporting Deed Document (prepared with 60 days of submittal).
 - Letter of Owner Authorization
 - Exhibits (clearly depicting subject and all adjacent properties)
 - Three copies (11"x17")
 - Staff consultation: Based on project scope additional information and/or planning studies may be required:
 - Traffic Impact Study
 - Air Quality Analysis
 - Historic Resources Inventory
 - Market Analysis
 - Other: _____
 - Submit a CD containing all of the above requested documents in a PDF format.

Operational Statement must include the following:

- Project Site Address
- Assessor's Parcel Number (APN)
- Acreage to be amended
- Describe any existing development on the property
- Describe existing and proposed General Plan land use designation
- Is existing zone district designation consistent with the proposed planned land use (See General Plan 2030 Update, Table 2.3 - Planned Land Use and Zone District Consistency Matrix, Page 28)
- Describe how this proposed planned land use designation is complementary to the surrounding setting.
- Describe how this proposed planned land use designation helps to implement the General Plan 2030 goals and objectives.

Plan Amendment Application Requirements

- Describe any contact or discussion you have had with your surrounding neighbors or other potentially impacted by this proposal.

Exhibits must include the following:

- Sheet size of 11" X 17"
- Title Block, including date of preparation
- North Arrow
- Depict existing structures
- Vicinity map depicting four major streets (1/2 square mile)
- General Notes:
 - Name of Land Owners
 - Site Address and Assessor's Parcel Number (APN)
 - Existing and proposed land use designation
 - Existing and proposed (if applicable) zone district designation

I verify that I am submitting all the required materials on this checklist and I acknowledge that failure to comply with these requirements may result in my application not being accepted and/or may extend the length of time needed to review the project.

Applicant's Signature

Date

(____)

Applicant's Phone #

Applicant's E-mail Address



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MASTER APPLICATION FORM #: _____

Check all that apply:

<input type="checkbox"/> Plan Amendment	<input type="checkbox"/> Tentative Subdivision Map	<input type="checkbox"/> Conditional Use Permit	<input type="checkbox"/> CUP Amendment
<input type="checkbox"/> Rezone	<input type="checkbox"/> Tentative Parcel Map	<input type="checkbox"/> Site Plan Review	<input type="checkbox"/> SPR Amendment
<input type="checkbox"/> Text Amendment	<input type="checkbox"/> Lot Line Adjustment	<input type="checkbox"/> Administrative Review	<input type="checkbox"/> Minor Deviation
<input type="checkbox"/> Annexation	<input type="checkbox"/> Voluntary Merger	<input type="checkbox"/> Variance	<input type="checkbox"/>

Project Name: _____

Project Address: _____ APN: _____

Project Description (attach additional pages if necessary):

Zoning Designation: _____ General Plan Designation: _____

List all previously approved and/or pending entitlement, associated with this project/site (provide application number(s)). _____

Please read carefully before signing or filing.

Submission of this application does not imply approval of this permit by the Community Development Department. Application approval will become null and void if it is determined that approval was based on omissions or inaccurate information submitted by the applicant. Application approval is based upon the "Required Findings", pursuant to the Reedley Municipal Code, Title 10, Zoning Regulations.

Primary Contact, check all that apply: Applicant Owner Agent/Representative

Applicant _____

Applicant Address _____

City _____ State _____ Zip _____ Day Phone _____ E-mail Address _____

Property Owner _____

Property Owner Address _____

City _____ State _____ Zip _____ Day Phone _____ E-mail Address _____

Agent/Representative _____

Agent/Representative Address _____

City _____ State _____ Zip _____ Day Phone _____ E-mail Address _____

APPLICANT: I verify that I am submitting all the required materials on this checklist and I acknowledge that failure to comply with these requirements may result in my application not being accepted and/or may extend the length of time needed to review this project.

 Signed Date



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Operational Statement Template

Our goal is to facilitate an accurate and complete description of your project in order to avoid unnecessary delays in gathering additional information. This is your opportunity to communicate in detail the important characteristics of your project/property that should be to consider when your project is reviewed for completeness. Please use this template as a guide to explaining the scope of your project.

This template will assist you, various City departments and outside agencies, in their review, crafting of comments and conditions. If you have any questions about the requested information or need help completing any portions of this form please call the Community Development Department at (559) 637-4200 ext. 286. This form must be completed and submitted in order to process your application. If this operational statement is not submitted or incomplete, your application will not be accepted for processing.

1. Project Description: _____ application is being submitted by _____ on behalf of _____ and pertains to _____ acres of property located at _____.

2. Operational Narrative: (Describe your proposed operational/development in detail, including information such as name of business, product or service, anticipated traffic and deliveries, and special events, required equipment, on-site storage, demolition or adaptive reuse of existing structures, etc.).

3. List the hours of operation: _____ Number of Days per Week: _____
If Seasonal, list the months of operation: _____

4. Number of Customers or Visitors per day: _____ Maximum per Day: _____
During what hours will customers visit your property? _____

5. Number of current employees: _____ Future employees: _____
Will any live on site? YES / NO

6. Will the operation or equipment used generate noise above existing levels in the area? YES / NO
If yes, explain _____

7. Will hazardous materials or waste be produced as part of this business? YES / NO
If yes, explain _____

8. Explain which building(s) or what portion of the building(s) will be used in your operation: _____

Applicant's Signature

Date



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Initial Environmental Assessment Form

This form is designed to provide accurate and objective data to facilitate an initial environmental assessment. There is no need to limit your answers to the space provided; additional sheets may be attached. Clarity and completeness in your responses will aid in the review and evaluation of your application.

I. Project Description:

A. Name: _____

Address: _____

Telephone: _____ Location of Project: _____

B. Nature of Request: _____

Proposed Physical Improvements (Map Acceptable): _____

Proposed Buildings: _____

Proposed Roads: _____

Proposed Grading and Removal of Vegetation: _____

Proposed Landscaping: _____

Do you own adjacent properties? (If yes, list APN): _____

If development will be phased, depict phasing: _____

II. Site Characteristics: (use additional sheets if necessary)

A. Hydrology (Map Acceptable):

Location of natural drainage patterns on property: _____

Location of water courses on property: _____

Is any portion of the project in a flood prone area? _____

Are there any wells on site? _____

B. Soil Characteristics: _____

C. Vegetation / Description of Vegetation Cover (Map Acceptable): _____

D. Other: _____

Present Land Use: _____

Existing Physical Improvements – including water, sewage, roads, lighting and buildings:

III. Surrounding Land Uses (Map Acceptable):

North: _____

South: _____

East: _____

West: _____

IV. Environmental Impacts of the Proposed Project: (use additional sheets if necessary)

A. Effects on the Site:

Soils (including prime agricultural soils to be removed from production): _____

Vegetation (including amount to be removed if any): _____

Hydrology (changes in drainage patterns and amount of runoff): _____

Visual Impacts (how will the site look different?): _____

B. Effects on Surrounding Areas:

Traffic (how much traffic will be generated by the project?): _____

Noise (will any part of the project cause increases in noise levels?): _____

Visual Impacts (distance of visibility of project in all directions): _____

Air Quality (will there be any discharge into the atmosphere?): _____

Water Quality (will water quality be decreased?): _____

Growth Inducing Impacts (will the project encourage further development in the area or set a precedent for higher densities?): _____

V. Mitigation Measures: (use additional sheets if necessary)

Describe in detail any proposed method to reduce potential impacts of your project on the environment. This might include measures which address, energy conservation measures, scenic vistas, air quality, traffic volume and circulation, public utilities, and police and fire services.

To the best of my knowledge, the foregoing information is true. I understand that any changes as a result of either inaccuracies or project modifications may necessitate additional environmental assessment.

Signature: _____

Date: _____



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Agency Authorization

OWNER:

I, _____, declare as follows:
(Owners Name)

I am the owner of certain real property bearing assessor's parcel number(s) (APN's):

AGENT:

I designate _____, to act as my duly
(Agent's Name) (Please type or print)

authorized agent for all purposes necessary to (list permit type) _____

relative to the property mentioned herein.

DECLARATION:

I declare under penalty of perjury the foregoing is true and correct.

Executed this _____ day of _____, 20_____.

OWNER

AGENT

(Signature of Owner)

(Signature of Agent)

(Owner Mailing Address)

(Agent Mailing Address)

(Owner Telephone)

(Agent Telephone)

APPROVED:

CITY OF REEDLEY

By: _____ Date: _____
(Signature)

(Note: Attach acknowledgment of signatures(s) by Notary Public if executed outside State of California)