



Planning Permit Application

Community Development Department
Planning Division
3300 Newport Boulevard, Newport Beach, CA 92663
(949)644-3204 Telephone | (949)644-3229 Facsimile
www.newportbeachca.gov

1. Check Permits Requested:

- | | | |
|---|---|---|
| <input type="checkbox"/> Coastal Residential Development | <input type="checkbox"/> Modification Permit | <input type="checkbox"/> Tract Map |
| <input type="checkbox"/> Condominium Conversion | <input type="checkbox"/> Off-Site Parking Agreement | <input type="checkbox"/> Traffic Study |
| <input type="checkbox"/> Comprehensive Sign Program | <input type="checkbox"/> Planned Community Development Plan | <input type="checkbox"/> Use Permit - <input type="checkbox"/> Minor <input type="checkbox"/> Conditional |
| <input type="checkbox"/> Development Agreement | <input type="checkbox"/> Planned Development Permit | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Development Plan | <input type="checkbox"/> Site Plan Review - <input type="checkbox"/> Major <input type="checkbox"/> Minor | <input type="checkbox"/> Amendment - <input type="checkbox"/> Code <input type="checkbox"/> PC <input type="checkbox"/> GP <input type="checkbox"/> LCP |
| <input type="checkbox"/> Lot Line Adjustment | <input type="checkbox"/> Parcel Map | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Lot Merger | <input type="checkbox"/> Staff Approval | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Limited Term Permit – | | |
| <input type="checkbox"/> Less than 90 day <input type="checkbox"/> Greater than 90 days | | |

2. Project Address(es)/Assessor's Parcel No(s): _____

3. Project Description and Justification (*Attach additional sheets if necessary*):

4. Applicant Name(s): _____
Address: _____
City/State/Zip: _____
Phone: _____ Fax: _____ Email: _____

5. Contact: _____
Address: _____
City/State/Zip: _____
Phone: _____ Fax: _____ Email: _____

6. Property Owner Name(s): _____
Address: _____
City/State/Zip: _____
Phone: _____ Fax: _____ Email: _____

7. Property Owner's Affidavit*:

(I) (We) _____ depose and say that (I am) (we are) the owner(s) of the property (ies) involved in this application. (I) (We) further certify, under penalty of perjury, that the foregoing statements and answers herein contained and the information herewith submitted are in all respects true and correct to the best of (my) (our) knowledge and belief.

Signature(s): _____ Date: _____

*May be signed by the lessee or by an authorized agent if written authorization from the owner of record is filed concurrently with the application. The owner(s)' signature on Parcel/Tract Map and Lot Line Adjustment Application must be notarized.)