



APPLICATION CHECKLIST

ZONE CODE TEXT CHANGE

A request for zoning code text amendment changes require (1) public hearing before the City's Planning Commission and two (2) hearings before the City Council. Zoning code text amendment changes become effective thirty (30) days following the final action. The applicant or the applicant's representative must be present at all public hearings to answer questions.

Chapter 106.74 of the Citrus Heights Zoning Code provides procedures of an amendment to the Zoning Code.

Application Submittal Requirements:

- A) One (1) copy of the completed universal application form, and all required signatures.
- B) The required processing fee (see fee schedule).
- C) A detailed project description including the reasons why the changes are proposed, the areas/properties that would be affected by the changes, any other substantiating evidence to support the changes.
- D) Five (5) copies of underline/strikeout text indicating the proposed text changes (include zoning code chapter/section/subsection numbers).
- E) One (1) Electronic editable version of the underline/strikeout text.
- F) Additional information as deemed necessary by the Planning Department.

An electronic copy of all materials shall also be provided at the time of submittal. The electronic copy shall be provided either on a CD or USB flash drive. The CD or USB flash drive shall contain each document that is included in the planning entitlement application. Any subsequent revision or supplemental information submitted in conjunction with the application shall also be submitted in electronic form.

Please note: You may be required to submit additional copies prior to the public hearing.

Please feel free to discuss your application with a member of the Planning Department at (916) 727-4740 or visit the office in City Hall located at 6360 Fountain Square Drive, Citrus Heights, CA 95621

www.citrusheights.net



UNIVERSAL APPLICATION FORM

PLANNING DIVISION

www.citrusheights.net

6360 Fountain Square Drive ♦ Citrus Heights, CA 95621 ♦ (916) 727-4740

planning@citrusheights.net

Notice to Applicants: A complete application must be submitted in order for the project to be accepted. It is recommended to schedule an appointment to discuss your project prior to submission.

Type of Application (check all that apply):

<input type="checkbox"/> Design Review Permit <input type="checkbox"/> Design Review Permit Modification <input type="checkbox"/> Use Permit <input type="checkbox"/> Use Permit Modification <input type="checkbox"/> Minor Use Permit <input type="checkbox"/> Eligible Facilities Request	<input type="checkbox"/> Parcel Map (1-4 lots) <input type="checkbox"/> Subdivision Map (5+ lots) <input type="checkbox"/> Rezone <input type="checkbox"/> Ordinance Text Amendment <input type="checkbox"/> General Plan Amendment <input type="checkbox"/> OTHER _____
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Project Information (complete all sections):

Proposed Project Name:		
Property Address:		
Assessor Parcel #'s:		
Total Land Area (Acre or SF):	General Plan Designation:	Zoning Designation:
Total Net SF of New Buildings (Commercial Only):	No. Proposed Units (Residential only):	
Project Description:		

Applicant Information:

Applicant Name:		
Company (if applicable):	Address:	
City:	State:	Zip:
Phone:	E-Mail:	

Property Owner:

Owner Name:		
Company (if applicable):	Address:	
City:	State:	Zip:
Phone:	E-Mail:	
Property Owner Signature (or separate written authorization):		

Designated Primary Contact, if Different than Applicant:

Name:		
Company (if applicable):	Address:	
City:	State:	Zip:
Phone:	E-Mail:	

City Use Only:

Planner Complete Below:

Dated Received:	Accepted by:	AA: ST PC CC	NA#:
TOTAL AMOUNT COLLECTED:			
Receipt Number:		Payment Method:	

Data Entry:

Date Entered:			
File Type/Number (one per box)			
CW #			