

Development Application

PROJECT ADDRESS: _____

Applicant _____
 Applicant Address _____
 City _____ State ____ Zip Code _____
 Person to contact _____
 Phone # _____
 E-mail _____

Owner _____
 Owner Address _____
 City _____ State ____ Zip Code _____
 Person to contact _____
 Phone # _____
 E-mail _____

Check if same as applicant information

Development Application (Projects requiring public review and/or City Council hearing)		
<input type="checkbox"/> Appeal	<input type="checkbox"/> Major Accessory Use	<input type="checkbox"/> Non-Residential Additions
<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Subdivision	<input type="checkbox"/> Signs
<input type="checkbox"/> Certificate of Zoning Occupancy	<input type="checkbox"/> Lot Split/Combo	<input type="checkbox"/> Text Amendment
	<input type="checkbox"/> New Construction	<input type="checkbox"/> Variance

Applications must include a site plan or a sketch of the site.
 Applications must comply with the Unified Development Ordinance (UDO) code in order to be furthered reviewed by the Planning Commission for the City of Riverside.
 Permits expire 1 calendar year from the date of approval.
 Applicants will be notified if there are issues with the application, and how to correct it.

I hereby acknowledge that in review of this application, the City of Riverside may require the services of the City Engineer and/or the City Attorney to insure that the requested item(s) for review of this application is compliant to the current zoning laws and policies of the City of Riverside. For any and all costs incurred in the review of this application, I acknowledge that the city of Riverside or any of the City's consultants listed above are my responsibility to reimburse.

I hereby attest that all information on this application is, to the best of my knowledge, true and accurate. Additionally, I hereby grant permission for the City of Riverside Zoning Administrator to enter upon the above mentioned property (or as described in the attachment) for the purposes of gathering information related to this application.

Signature: _____

Date _____

OFFICIAL USE ONLY

Permit No. _____

Approved _____

Date _____

Denied _____