

PLANNING DIVISION

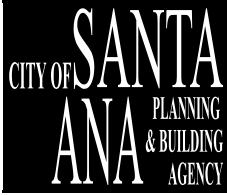
I. General Information

- A. To submit your conditional use permit (CUP) application, it is required that you **make an appointment** with the case planner assigned to your project. Walk-in submittals without a scheduled appointment will not be accepted.
- B. Conditional use permit applications for ABC (liquor) licenses and after hours operations at eating establishments do not require the Development Project review process. All other conditional use permit and other discretionary applications, including after hours operations at retail markets, banquet facilities, variances, and minor exceptions require Development Project review completion prior to submitting for discretionary action.
- C. Variances, zone changes, conditional use permits, tract and parcel maps, minor exceptions, and all other discretionary actions require a public hearing before the City Zoning Administrator, Planning Commission, or City Council.

II. Submittal Requirements:

Pursuant to the Permit Streamlining Act, all applications for a development project shall include each of the following. Applications are deemed incomplete should there be any missing item. Incomplete applications are not deemed filed or accepted.

- A. Completed **Submittal Affidavit** form.
- B. Completed **General Data** form.
- C. Completed **Project Description** form.
- D. Completed **Existing Conditions** form.
- E. Completed **Conditional Use Permit** application(s) for your project.
- F. Completed **Operational Checklist** form.
- G. **Two (2) ledger (11" x 17") sets** and **two (2) full-sized (min. 24" x 36") sets of plans** (4 sets total) are required for variances, zone changes, conditional use permits, general plan amendments, and subdivision maps. All plans must be clear, legible, and stapled and folded to eight and one-half inch by 11-inch notebook size.
- H. One clean **reduction (8½" x 11")** of all plans. **MUST BE CLEAR AND LEGIBLE.**



CONDITIONAL USE PERMIT SUBMITTAL CHECKLIST

For ABC Licenses and Eating
Establishment After Hours Operations

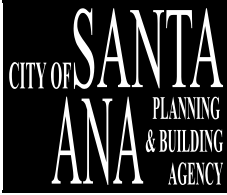
- I. Please obtain the following information from the Orange County Assessor's Office, 630 North Broadway, Santa Ana, CA.
1. Provide one **assessor's parcel map**. The following information must be provided on the assessor parcel map and consolidated on only one sheet of paper:
 - a. ___ A north arrow.
 - b. ___ A **500-foot radius circle** from exterior boundaries of subject property.
PRINT IN existing land uses (school, market, auto repair, SFR (single-family residences), etc.) within the 500-foot radius.
 - c. ___ PRINT IN street addresses of each property within the 500-foot radius.
 2. Provide mailing **labels** for **property owners and occupants (renters/business tenants)** within **500 feet** of the subject parcel, including the subject site. Include each property owner's or occupant's **name, address, and APN on each label**. In addition to the required sets of labels, submit one duplicate copy. Each set of addresses may be on City provided label sheets or other equivalent preprinted gummed labels.

* **Sets of Mailing Labels Required** (Eight and one-half inch format. Labels may not be older than six months.)
 - a. ___ One (1) set of mailing labels; and
 - b. ___ One (1) digital Microsoft Excel copy on USB flash-drive.
- J. Pay the appropriate fees at the time of the Discretionary Action submittal.
- K. Plans and Photographs must be submitted in digital format (USB flash-drive).

III. Plans submitted for your project must include the following information:

1. Site Plan

- A. North Arrow and Plan Scale (not to be smaller than one inch = 40 feet for site plans).
- B. A Legend of Project Data including:
 1. ___ *Project Address.*
 2. ___ *Assessor's Parcel Number.*
 3. ___ *Name, Address, and Telephone Number of Applicant and Property Owner.*
 4. ___ *Current zoning.*
 5. ___ *Total lot size in square footage and acres.*



**CONDITIONAL USE PERMIT
SUBMITTAL CHECKLIST**
For ABC Licenses and Eating
Establishment After Hours Operations

- 6. *Proposed use and floor area of each building on site.*
- 7. *The total number of existing and proposed parking spaces.*
- C. Include and correctly dimension all property lines.
- D. Include and dimension all existing and proposed landscaping and building setbacks.
- E. Label all abutting streets and alleyways.
- F. Depict and fully dimension all landscape areas, loading zones, drop-off areas, trash enclosures, and the location of all existing and proposed utility meters and services including transformers.
- G. Depict and label all existing and proposed on-site outdoor vending machines, telephones, seating areas, and lighting.
- H. Depict the height, location, and construction type of all existing and proposed fences or walls.
- I. Fully dimension the proposed parking lot, drive aisles, and parking stalls.
- J. Show and fully dimension any drive-through lane and appurtenant menu board(s) and speaker(s).

2. Floor Plan

- A. Plan Scale (not to be smaller than 1/8th inch = one foot for floor plans).
- B. Provide a detailed and dimensioned floor plan of the establishment depicting all kitchen equipment, sinks, preparation areas, alcoholic beverage storage and display areas, seating, restrooms, and if applicable, dance floor, entertainment area, pool tables, and/or video games.
- C. Label and dimension all areas used for alcohol storage and display.
- D. Provide the floor area of all alcoholic beverage storage areas and calculate its percentage for the entire floor area of the establishment.



Planning and Building Agency
 Planning Division
 20 Civic Center Plaza
 P.O. Box 1988 (M-20)
 Santa Ana, CA 92702
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 www.santa-ana.org

SUBMITTAL AFFIDAVIT

This application is for:

- Amendment Application
- Appeal/Planning Commission
- Appeal/Planning Manager
- Appeal/Zoning Administrator
- C-3 Parking Waiver
- Certificate of Compliance
- Conceptual Review
- Conditional Use Permit
- Development Agreement
- Environmental Review
- General Plan Amendment
- Historic Demolition
- Historic Project Review
- Land Use Certificate
- Lot Line Adjustment
- Metro East Site Plan Review
- Minor Exception
- Neighborhood Project Review
- Parcel Map
- Planning Commission Site Plan Review
- Residential Relocation
- Development Project Review
- Specific Plan
- Tract Map
- Variance
- Zoning Ordinance Amendment
- Other _____

Project Address: _____

Assessor's Parcel Number(s): _____

I, as current legal owner of the property identified above and in the attached application(s), acknowledge the submittal of the above application(s). I certify that the information contained in the application package is true and correct to the best of my knowledge.

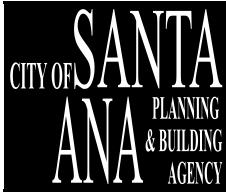
Recorded Property Owner
 or Authorized Signature: _____

Print Name: _____

Title: _____

Date: _____

Note: An original signature is required on this form as part of the application. An agent for the property owner may sign the application provided that a signed original letter of authorization from the property owner accompanies this affidavit.



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GENERAL DATA

I. Property Information

Project Address: _____

Assessor's Parcel Number(s) (APN No.): _____

Legal Description (Lot and Tract Number(s)): _____

Existing General Plan Designation and Density/Floor Area Ratio: _____

Existing Zoning Designation: _____

Property Acreage: _____

II. Project Information

Project (or Business) Name: _____

Non-residential use(s): Proposed Commercial Square Footage: _____

Proposed Office Square Footage: _____

Proposed Industrial Square Footage: _____

Residential Uses: Single Family Units: _____ Density: _____

Duplex Units: _____ Density: _____

Multiple Family Units: _____ Density: _____

Parking Spaces: Required: _____ Proposed: _____

III. Applicant/Developer Information

Applicant/Developer Company Name: _____

Address: _____

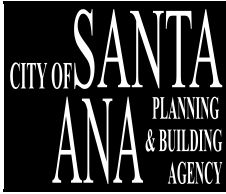
City: _____ State: _____ Zip: _____

Contact Person (please print): _____

Telephone: _____ Fax: _____

Mobile: _____

E-mail: _____



IV. Property Owner Information

Recorded Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person (please print): _____

Telephone: _____ Fax: _____

Mobile: _____

V. Architect/Designer/Engineer Information

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person (please print): _____

Telephone: _____ Fax: _____

Mobile: _____

E-mail: _____

VI. Proposed Tenant Information

Proposed Tenant: _____

Contact Person (please print): _____

Telephone: _____

VII. Primary Contact for Project (if different from applicant)

Contact Person (please print): _____

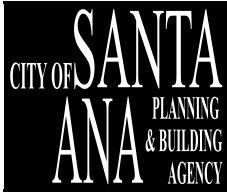
Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Mobile: _____

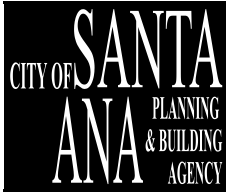
E-mail: _____



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PROJECT DESCRIPTION

- VII. Are any off-site parking spaces proposed? If yes, please describe the number and location:**
- VIII. Describe the project phasing:**
- IX. Describe grading operations and the amount (cubic feet) of soil to be moved, if applicable:**
- X. Describe the nature of any trees and landscaping to be removed:**
- XI. Describe the operational characteristics of the project (proposed hours of operation, proposed type of ABC license, and unique characteristics of the proposed use):**
- XII. Other pertinent information about the project:**



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EXISTING CONDITIONS

- Soil conditions (liquefaction, contamination, underground tanks):

- Historic or cultural resources:

IV. Describe the land use and size of surrounding properties:

North:

South:

East:

West:



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CONDITIONAL USE PERMIT Application

PLANNING DIVISION

I. Conditional Use Permit Requirement

A **Conditional Use Permit** is required for certain activities and uses which are permitted by the zoning code, only if they can be found to be compatible with surrounding uses. These situations are considered individually by the Planning Commission or Zoning Administrator on a case-by-case basis. It is up to the applicant for such a permit to show that the use being proposed is acceptable in the location proposed and is of general benefit to the City, compatible with all surrounding uses, and consistent with the City's General Plan.

II. Conditional Use Purpose

Describe briefly the specific use(s) and improvements proposed.

III. Conditional Use Justification

The conditional use procedure provides a method whereby specific uses, not considered compatible as a permitted use in a zoning district, are afforded an opportunity to locate in the zoning district on the basis of a specific location provided certain findings can be established [Santa Ana Municipal Code (SAMC) Sections 41-638 (a)(1)(i), (ii), (iii), (iv), and (v)]. The Zoning Administrator, Planning Commission, and City Council must make affirmative findings on all five items listed in the above mentioned code sections if this request is to be approved. Your concise responses to the following five criteria are essential. [Please read SAMC Sections 41-638 (a)(1)(i), (ii), (iii), (iv), and (v) carefully; they have been reproduced at the end of this form for your convenience.]

Section 41-638 (a)(1)(i) (necessary and desirable):

Section 41-638 (a)(1)(ii) (health, safety, and general welfare):



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CONDITIONAL USE PERMIT Application

Section 41-638 (a)(1)(iii) (economic stability):

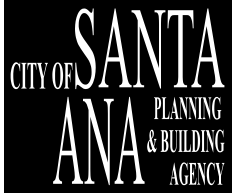
Section 41-638 (a)(1)(iv) (compliance with other regulations and conditions):

Section 41-638 (a)(1)(v) (effect on the General Plan):

CONDITIONAL USE PERMITS

FINDINGS IN COMPLIANCE WITH SECTION 41-638 (a)(1) OF THE SANTA ANA MUNICIPAL CODE:

- (i) That the proposed use will provide a service or facility which will contribute to the general well being of the neighborhood or the community; and
- (ii) That the proposed use will not, under the circumstances of the particular case, be detrimental to the health, safety, or general welfare of persons residing or working in the vicinity; and
- (iii) That the proposed use will not adversely affect the present economic stability or future economic development of property in the surrounding area;
- (iv) That the proposed use will comply with the regulations and conditions specified in this chapter for such use; and
- (v) That the proposed use will not adversely affect the general plan of the city or any specific plan applicable to the area of the proposed use.



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**OPERATIONAL CHECKLIST
 After Hours Operations, ABC
 Licenses, & Banquet Facilities**

Please provide a description of the business and how it operates: _____

Proposed ABC License Type(s) (ie, 20, 41, etc.): _____

ABC License Information: New/Original Transfer Upgrade Does not apply

Proposed Hours of Operation: _____

Seating or occupant capacity: _____

Are you proposing any of the following? If yes, please indicate on plans and describe in the space below.

Dance Floor Stage Area Cover Charge/Admission Pool Tables/Billiards Video Games

Outdoor Seating Banquet Adult Entertainment (SAMC Article XVII)

If yes, describe: _____

Additional Information: _____

Note: Any project requiring discretionary approval(s) must complete Site Plan Review before submitting discretionary applications, except applications for ABC licenses (on- or off-sale) and after hours operations at eating establishments only.

STAFF USE ONLY

APPLICATION NO.: _____