



PLANNING APPLICATION FORM
Humboldt County Planning Department

Current Planning Division 3015 H Street Eureka, CA 95501-4484
Phone (707) 445-7541 Fax (707) 268-3792

INSTRUCTIONS:

1. Applicant/Agent complete Sections I, II and III below.
2. It is recommended that the Applicant/Agent schedule an Application Assistance meeting with the Assigned Planner. Meeting with the Assigned Planner will answer questions regarding application submittal requirements and help avoid processing delays. A small fee is required for this meeting.
3. Applicant/Agent needs to submit all items marked on the reverse side of this form.

SECTION I

APPLICANT (Project will be processed under Business name, if applicable.)

Business Name: _____
Contact Person: _____
Mailing Address: _____
City, St, Zip: _____
Telephone: _____ Alt. Tel: _____
Email: _____

AGENT (Communications from Department will be directed to agent)

Business Name: _____
Contact Person: _____
Mailing Address: _____
City, St, Zip: _____
Telephone: _____ Alt. Tel: _____
Email: _____

OWNER(S) OF RECORD (If different from applicant)

Owner's Name: _____
Mailing Address: _____
City, St, Zip: _____
Telephone: _____ Email: _____

Owner's Name: _____
Mailing Address: _____
City, St, Zip: _____
Telephone: _____ Email: _____

LOCATION OF PROJECT

Site Address: _____
Community Area: _____

Assessor's Parcel No(s): _____
Parcel Size (acres or sq. ft.): _____

Is the proposed building or structure designed to be used for designing, producing, launching, maintaining, or storing nuclear weapons or the components of nuclear weapons? ☐ YES ☐ NO

SECTION II


PROJECT DESCRIPTION

Describe the proposed project (attach additional sheets as necessary):

SECTION III

OWNER'S AUTHORIZATION & ACKNOWLEDGEMENT

I hereby authorize the County of Humboldt to process this application for a development permit and further authorize the County of Humboldt and employees of the California Department of Fish and Wildlife to enter upon the property described above as reasonably necessary to evaluate the project. I also acknowledge that processing of applications that are **not** complete or do not contain truthful and accurate information will be delayed and may result in denial or revocation of approvals.



Applicant Signature

8 April 2025

Date

If the applicant is not the owner of record: I authorize the applicant/agent to file this application for a development permit and to represent me in all matters concerning the application.

Owner of Record Signature

Date

Owner of Record Signature

Date

This side completed by Planning Staff

Checklist Completed by: _____ Date: _____

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH THIS APPLICATION

Item	Received	Item	Received
<input type="checkbox"/> Filing Fee of \$ _____	<input type="checkbox"/>	<input type="checkbox"/> Architectural Elevations	<input type="checkbox"/>
<input type="checkbox"/> Fee Schedule (see attached, please return completed fee schedule with application)	<input type="checkbox"/>	<input type="checkbox"/> Biological Assessment	<input type="checkbox"/>
<input type="checkbox"/> Plot Plan	<input type="checkbox"/>	<input type="checkbox"/> Campaign Disclosure Form	<input type="checkbox"/>
<input type="checkbox"/> Tentative Map	<input type="checkbox"/>	<input type="checkbox"/> Exception Request Justification	<input type="checkbox"/>
<input type="checkbox"/> CEQA Initial Study	<input type="checkbox"/>	<input type="checkbox"/> Hazardous Waste Statement per 65962.5	<input type="checkbox"/>
<input type="checkbox"/> Tentative Map/Plot Plan Checklist (complete & return with application)	<input type="checkbox"/>	<input type="checkbox"/> Lot Size Modification Request Justification	<input type="checkbox"/>
<input type="checkbox"/> Floor Plan	<input type="checkbox"/>	<input type="checkbox"/> Military Training Route (see County GIS)	<input type="checkbox"/>
<input type="checkbox"/> Division of Environmental Health Questionnaire	<input type="checkbox"/>	<input type="checkbox"/> Parking Plan	<input type="checkbox"/>
<input type="checkbox"/> On-site sewage testing (if applicable)	<input type="checkbox"/>	<input type="checkbox"/> Plan of Operation	<input type="checkbox"/>
<input type="checkbox"/> On-site water information (if applicable)	<input type="checkbox"/>	<input type="checkbox"/> Preliminary Hydraulic & Drainage Plan	<input type="checkbox"/>
<input type="checkbox"/> Solar design information	<input type="checkbox"/>	<input type="checkbox"/> R1 / R2 Report (Geologic/Soils Report - signed by preparer)	<input type="checkbox"/>
<input type="checkbox"/> Chain of Title	<input type="checkbox"/>	<input type="checkbox"/> Reclamation Plan, including engineered cost estimate for completing reclamation	<input type="checkbox"/>
<input type="checkbox"/> Grant Deed	<input type="checkbox"/>	<input type="checkbox"/> Accessory Dwelling Unit Fact Sheet	<input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/> Current <input type="checkbox"/> Creation	<input type="checkbox"/>	<input type="checkbox"/> Variance Request Justification	<input type="checkbox"/>
<input type="checkbox"/> Preliminary Title Report (<u>two copies</u> , prepared within the last six months prior to application)	<input type="checkbox"/>	<input type="checkbox"/> Vested Right Documentation/Evidence	<input type="checkbox"/>
		<input type="checkbox"/> Other _____	<input type="checkbox"/>
		_____	<input type="checkbox"/>
		<input type="checkbox"/> Other _____	<input type="checkbox"/>
		_____	<input type="checkbox"/>
		<input type="checkbox"/> Other _____	<input type="checkbox"/>
		_____	<input type="checkbox"/>

FOR INTERNAL USE

<input type="checkbox"/> Ag. Preserve Contract	<input type="checkbox"/> General Plan Amendment	<input type="checkbox"/> Reclamation Plan
<input type="checkbox"/> Certificate of Compliance	<input type="checkbox"/> General Plan Petition	<input type="checkbox"/> Surface Mining Permit
<input type="checkbox"/> Coastal Development Permit <input type="checkbox"/> Administrative <input type="checkbox"/> Planning Commission	<input type="checkbox"/> Information Request	<input type="checkbox"/> Surface Mining Vested Right Determination
<input type="checkbox"/> Design Review <input type="checkbox"/> Inland <input type="checkbox"/> Coastal	<input type="checkbox"/> Modification to _____	<input type="checkbox"/> Timber Harvest Plan Information Request
<input type="checkbox"/> Determination of Legal Status	<input type="checkbox"/> Lot Line Adjustment	<input type="checkbox"/> Use Permit H.C.C. § _____
<input type="checkbox"/> Determination of Substantial Conformance	<input type="checkbox"/> Preliminary Project Review	<input type="checkbox"/> Variance H.C.C. § _____
<input type="checkbox"/> Extension of _____	<input type="checkbox"/> Special Permit <input type="checkbox"/> Administrative <input type="checkbox"/> Planning Commission H.C.C. § _____	<input type="checkbox"/> Zone Reclassification
<input type="checkbox"/> Fire Safe Exception Request	<input type="checkbox"/> Subdivision <input type="checkbox"/> Parcel Map <input type="checkbox"/> Final Map	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Exception to the Subdivision Requirements	<input type="checkbox"/> Other _____

Application Received By: _____			Date: _____		Receipt Number: _____	
General Plan Designation: _____						
Plan Document: _____						
Land Use Density: _____						
Zone Designation: _____						
Coastal Jurisdiction Appeal Status:			<input type="checkbox"/> Appealable	<input type="checkbox"/> Not Appealable		
Preliminary CEQA Status:						
<input type="checkbox"/> Environmental Review Required						
<input type="checkbox"/> Categorically Exempt From Environmental Review:			Class _____	Section _____		
<input type="checkbox"/> Statutory Exemption:			Class _____	Section _____		
<input type="checkbox"/> Not a Project						
<input type="checkbox"/> Other _____						