



CERTIFICATE OF COMPLIANCE

A CERTIFICATE OF COMPLIANCE (COC) is provided for under the Map Act, Section 66499.35 of the Government Code. It allows a person to apply for a determination as to whether a division of land complied with State and Local laws in effect at the time of the division. If the division complies with applicable provisions of State and Local law enacted pursuant thereto, a Certificate of Compliance shall be recorded, but if the division did not comply with State and Local laws enacted pursuant thereto, a Conditional Certificate of Compliance shall be issued. A Conditional Certificate of Compliance is forwarded by the Public Works Department to Planning and Development for assignment of a case number and scheduling on the Zoning Administrator agenda to consider imposing appropriate conditions in accordance with provisions of Section 66499.35(b) of the Government Code.

THIS PACKAGE CONTAINS _____

✓ SUBMITTAL REQUIREMENTS

✓ APPLICATION FORM

AND, IF ✓'D, ALSO CONTAINS _____

AGREEMENT FOR PAYMENT OF PROCESSING FEES

[Click to download Agreement to Pay form](#)

PLAN AND MAP REQUIREMENTS

[Click to download Site Plan and Topographical Map Requirements](#)

FIRE DEPARTMENT VEGETATION PLAN INFORMATION

[Click to download Fire Department Requirements for Vegetation Plan](#)

South County Office

123 E. Anapamu Street
Santa Barbara, CA 93101
Phone: (805) 568-2000
Fax: (805) 568-2030

Energy Division

123 E. Anapamu Street
Santa Barbara, CA 93101
Phone: (805) 568-2040
Fax: (805) 568-2522

North County Office

624 W. Foster Road, Suite C
Santa Maria, CA 93455
Phone: (805) 934-6250
Fax: (805) 934-6258

Website: www.sbcountyplanning.org

SUBMITTAL REQUIREMENTS

Cities Sphere of Influence

Is this site within a city sphere of influence** Yes No

If yes, which city? _____

- ___ 9 Copies of completed application form
 - ___ 9 Copies of site plan folded to 8½"x11"
[Click to download Site Plan and Topographical Map Requirements](#)
 - ___ 9 Copies of topographic map.
[Click to download Site Plan and Topographical Map Requirements](#)
 - ___ 1 Copy of a site plan reduced to 8½"x11"
 - ___ 1 Copies of an 8½"x11" vicinity map showing project location with respect to identifiable landmarks
 - ___ 1 Copy of the determination letter created by the County Surveyor
 - ___ 2 Copies of Preliminary Title Report not more than 60 days old and/or any other supporting real estate transfer records.
 - ___ 1 Copy of chain of title.
 - ___ 2 Copies each: (as applicable)
 - ___ existing hydrologic studies
 - ___ water well driller's reports
 - ___ well pump test reports
 - ___ water quality analysis
 - ___ percolation tests
 - ___ drywell performance tests
- (**NOTE:** This information is necessary to evaluate existing and/or proposed wells and septic systems. If you have an existing well or septic system, submit the reports which were completed for their construction. If you are proposing a well or septic system as part of this project, submit any documentation completed as the on of this date. If you have any questions, please contact the Land Use Section of Environmental Health Services at 681-4900.)
- ___ 2 Copies of 10 year water use data:
 - ___ District/Company meter records for the past 10 years
 - ___ pumpage records for the past 10 years **If ten-year history is not available, provide available data.**
 - ___ 1 Letter of Authorization for all owners noted in the title report if requestor and owner(s) are not the same. Full addresses of all owners must be on the Letter of Authorization.
 - ___ 1 Check payable to Planning & Development.

** If additional information is needed regarding location of a City's Sphere of Influence, please contact our zoning information counter.



PLANNING & DEVELOPMENT
PERMIT APPLICATION

SITE ADDRESS: _____

ASSESSOR PARCEL NUMBER: _____

PARCEL SIZE (acres/sq.ft.): Gross _____ Net _____

COMPREHENSIVE/COASTAL PLAN DESIGNATION: _____ ZONING: _____

Are there previous permits/applications? no yes numbers: _____
(include permit# & lot # if tract)

Did you have a pre-application? no yes if yes, who was the planner? _____

Are there previous environmental (CEQA) documents? no yes numbers: _____

1. Financially Responsible Person _____ Phone: _____ FAX: _____
(For this project)
Mailing Address: _____
Street City State Zip

2. Owner: _____ Phone: _____ FAX: _____
Mailing Address: _____ E-mail: _____
Street City State Zip

3. Agent: _____ Phone: _____ FAX: _____
Mailing Address: _____ E-mail: _____
Street City State Zip

4. Arch./Designer: _____ Phone: _____ FAX: _____
Mailing Address: _____ State/Reg Lic# _____
Street City State Zip

5. Engineer/Surveyor: _____ Phone: _____ FAX: _____
Mailing Address: _____ State/Reg Lic# _____
Street City State Zip

6. Contractor: _____ Phone: _____ FAX: _____
Mailing Address: _____ State/Reg Lic# _____
Street City State Zip

COUNTY USE ONLY

Case Number: _____ Companion Case Number: _____

Supervisory District: _____ Submittal Date: _____

Applicable Zoning Ordinance: _____ Receipt Number: _____

Project Planner: _____ Accepted for Processing _____

Zoning Designation: _____ Comp. Plan Designation _____

III. **GRADING:** Will there be any grading associated with the project? Y N

(NOTE: For proposed access drives over 12% grade, a clearance letter from the Fire Dept. will be required)

CUT _____ cubic yards

AMOUNT TO BE EXPORTED _____ c.y.

FILL _____ c.y.

AMOUNT TO BE IMPORTED _____ c.y.

MAXIMUM VERTICAL HEIGHT OF CUT SLOPES _____

MAXIMUM VERTICAL HEIGHT OF FILL SLOPES _____

MAXIMUM HEIGHT OF ANY PROPOSED RETAINING WALL(S) _____

TOTAL AREA DISTURBED BY GRADING (sq. ft. or acres) _____

What is the address of the pick-up/deposit site for any excess cut/fill?

Specify the proposed truck haul route to/from this location.

IV. SITE INFORMATION

A. Is this property under an Agricultural Preserve Contract? Y N

B. Describe any unstable soil areas on the site.

C. Name and describe any year round or seasonal creeks, ponds, drainage courses or other water bodies. How is runoff currently conveyed from the site?

D. Has there ever been flooding on the site? Y N
If yes, state the year and describe the effect on the project site.

E. Describe any proposed drainage and/or flood control measures. How will storm water be conveyed across and from the site? Where will storm water discharge?

F. Describe measures that will be incorporated into the project design to address storm water quality (e.g. protect riparian corridors, reduce runoff, reduce directly connected impervious areas, eliminate pollutant sources, etc.*

G. Will the project require the removal of any trees? Y N
If so, please list them here as requested. Attach additional sheets as necessary.

<u>Type</u>	<u>Diameter (at 4' height)</u>	<u>Height</u>

Explain why it is necessary to remove these trees.

H. Describe any noise sources that currently affect the site.

I. Are there any prehistoric or historic archaeological sites on the property or on neighboring parcels? Y
N Unknown
If yes, describe. _____

J. Describe all third party property interests (such as easements, leases, licenses, rights-of-way, fee ownerships or water sharing agreements) affecting the project site, provision of public utilities to the site or drainage off the site.

K. Have you incorporated any measures into your project to mitigate or reduce potential environmental impacts? Y N Unknown If so, list them here. (Examples include tree preservation plans, creek restoration plans, and open space easements.)

* Refer to Best Management Practices handbooks such as "Start at the Source" by Bay Area Stormwater Management Agencies Association, 1999 and on the Internet at www.epa.gov/npdes/menuofbmps.htm. Also handouts at the counter developed by Project Clean Water.

V. ACCESS

A. Describe the existing access road(s) to the site. Include road widths, shoulders, and type of surface material.

B. Does property front on a public street? Y N
 Is access to be taken from this public street? Y N
 Name of public street: _____

C. Will the proposed access utilize an easement across neighboring property? Y* N
***Submit documentation which supports the applicant's use of this easement.**

D. Describe proposed construction equipment access _____

VI. DEVELOPMENT AND USE

A. Existing: Describe the existing structures and/or improvements on the site.

<u>Use</u>	<u>Size (sq ft)</u>	<u>Height</u>	<u># of Dwelling Units</u>
_____	_____	_____	_____
_____	_____	_____	_____

B. Proposed: Describe the proposed structures and/or improvements.

<u>Use</u>	<u>Size (sq ft)</u>	<u>Height</u>	<u># of Dwelling Units</u>
_____	_____	_____	_____
_____	_____	_____	_____

C. Will any structures be demolished or removed? ____ If so, please list them here as requested.

<u>Current Use</u>	Historic Use	Age	<u>Rental Price (if rented)</u>
_____	_____	_____	_____
_____	_____	_____	_____

D. Describe all other existing uses of the property.

E. How will the project affect the existing uses of the property?

F. Describe any other historic use(s) of the property. This may include agricultural (include crop type), commercial, or residential uses.

G. Provide a short description of the land uses surrounding the site.

North _____

South _____

East _____

West _____

H. STATISTICS: Mark each section with either the information requested or "n/a" if not applicable.

	<u>EXISTING</u>	<u>PROPOSED</u>	<u>TOTAL</u>
BUILDING COVERAGE	_____	_____	_____
IMPERMEABLE ROADS/PARKING/ WALKWAYS (sq. ft.)	_____	_____	_____
OPEN SPACE (sq. ft.)	_____	_____	_____
RECREATION (sq. ft.)	_____	_____	_____
LANDSCAPING (sq. ft.)	_____	_____	_____
AGRICULTURAL LANDS (sq. ft.)	_____	_____	_____
POPULATION (#) (employees/residents)	_____	_____	_____
DWELLING, HOTEL/MOTEL UNITS	_____	_____	_____
PARKING (on-site)			
TOTAL # OF SPACES	_____	_____	_____
# OF COVERED SPACES	_____	_____	_____
# OF STANDARD SPACES	_____	_____	_____
SIZE OF COMPACT SPACES	_____	_____	_____

Estimate the cost of development, excluding land costs. _____

VII. PARCEL VALIDITY

P&D requires applications for development on vacant, unimproved property to provide clear evidence that the property is a separate legal lot. Acceptable evidence of a separate legal lot include any of the following which show the subject property in it's current configuration: a recorded Parcel or Final Map, a recorded Certificate of Compliance or Conditional Certificate of Compliance, an approved Lot Line Adjustment, a recorded Reversion to Acreage, a recorded Voluntary Merger or an approved Lot Split Plat.

- A. Type of evidence provided to demonstrate a separate, legal lot: _____
 Copy of evidence attached: Yes No
 Reference number for evidence supplied: _____

VIII. PUBLIC/PRIVATE SERVICES

A. WATER:

1. If the property is currently served by a private well, submit the following for each well:
 - a. Pumpage records (electrical meter or flow meter readings) for the past 10 years
 - b. pump test data
 - c. location of other wells within 500 feet
 - d. water quality analysis
 - e. drillers report (with construction details)
 - f. copy of applicable well sharing agreement

2. Does the well serve other properties? Y N
 If yes, address(es): _____

3. Is a well proposed? Y N If so, will it serve other properties? Y N
 If yes, address(es): _____

4. If the property is currently served by a private or public water district, submit the following:
 - a. Name: _____

5. Will the project require annexation to a public or private water company? Y N
 If yes, name: _____

B. SEWAGE DISPOSAL:

1. Existing: Indicate if the property is currently served by the following:

	Yes/No
a. septic system*	_____
b. drywell*	_____
c. public sewer district	_____

If yes, name: _____

*Submit engineering details on septic tanks and dry wells, as well as calculations for leach field size, where applicable.

2. Proposed: Indicate what sewage disposal services are proposed as part of this project?

- a. septic system* _____
- b. drywell* _____
- c. public sewer district _____

District Name: _____

*Submit percolation tests and/or drywell performance tests as applicable.

3. Will the project require annexation to any public sewer district? Y N

Name: _____

C. FIRE PROTECTION

1. Fire protection is (will be) provided by the _____ Fire Department.
(Montecito, Summerland, S.B. County)

2. Is there an existing water main infrastructure in the vicinity? Circle one: Yes No

3. How far away is the nearest standard fire hydrant? _____ feet.

4. Is a new fire hydrant proposed? Circle one: Yes No

5. If a new hydrant is proposed, what is the longest driving distance from the proposed hydrant to the proposed building(s)? _____ feet.

6. Will fire protection be provided by an on-site water storage tank? Circle one: Yes No

Tank capacity: _____ gallons

7. What is the driving distance from the water tank to the proposed structure(s)? _____ feet.

8. Is a fire sprinkler system proposed? Yes No Location _____

9. Describe the access for fire trucks. Include width and height clearance for access and surface material.

10. Will hazardous materials be stored or used? Y/N List any hazardous materials which may be used or stored on the site. _____

HAZARDOUS WASTE/MATERIALS

Please read and answer the following questions if, in the known history of the property, there has been any storage (above or underground) or discharge of hazardous materials or if the proposal includes storage, use or discharge of any hazardous material. Hazardous materials include pesticides, herbicides, solvents, oil, fuel, or other flammable liquids. Attach additional sheets if necessary.

Past & Present:

List any hazardous materials which have been or are currently stored/discharged/produced on the property. Describe their use, storage and method of discharge. Provide dates where possible.

If a characterization study has been prepared, please submit it with this application.

Is the project site on the County Site Mitigation list? Y N Unknown

Is the site on the CA Hazardous Waste and Substances Sites list? Y N Unknown

Proposed Project:

List any hazardous materials proposed to be stored/discharged/produced on the property. Describe the proposed use and method of storage and disposal.

If the proposed project involves use, storage or disposal of any hazardous materials, please contact County Fire Department at 686-8170 to determine whether additional submittals are required.

Please include any other information you feel is relevant to this application.

CERTIFICATION OF ACCURACY AND COMPLETENESS Signatures must be completed for each line. If one or more of the parties are the same, please re-sign the applicable line.

Applicant's signature authorizes County staff to enter the property described above for the purposes of inspection.

I hereby declare under penalty of perjury that the information contained in this application and all attached materials are correct, true and complete. I acknowledge and agree that the County of Santa Barbara is relying on the accuracy of this information and my representations in order to process this application and that any permits issued by the County may be rescinded if it is determined that the information and materials submitted are not true and correct. I further acknowledge that I may be liable for any costs associated with rescission of such permits.

Print name and sign - Applicant/Agent

Date

Print name and sign - Landowner

Date