



**COUNTY OF MENDOCINO  
DEPARTMENT OF PLANNING & BUILDING SERVICES**

120 WEST FIR STREET  
FORT BRAGG, CALIFORNIA 95437

## **CDP RENEWAL - FACTS TO KNOW**

Each valid unrevoked and unexpired coastal development permit (CDP) shall expire and become null and void at the time specified in such permit, or if no time is specified, at the expiration of two (2) years after granting except where construction and or use of the property in reliance on such permit has been initiated prior to its expiration. To remain valid, progress toward completion of the project must be continuous.

On or before the date of expiration of a CDP, the person holding the permit shall apply for a renewal of said permit if the use is to be continued beyond the date of expiration or the development cannot be initiated prior to expiration. An application for a renewal shall be submitted in compliance with the CDP Renewal Project Intake Checklist. (See following page.)

- (A) Notice for renewal of a CDP shall be given in the same manner as the original CDP.
- (B) The renewal of a CDP may be granted by the Coastal Permit Administrator without a public hearing for a term not exceeding one (1) year provided:
  - (1) No additional conditions are recommended by referral agencies or the Planning and Building Services Department and the Director determines that there are no changed circumstances that may affect the consistency of the project with the Local Coastal Program (LCP); and
  - (2) No written objection to the granting of the renewal application without a public hearing is received within ten (10) working days after notice has been given.
- (C) If the Planning Director determines that there are changed circumstances that may affect the consistency of the project with the LCP, or if additional conditions are recommended or written objection is made, the application shall be referred to the approving authority having original jurisdiction over the CDP, and the renewal shall be subject to the hearing and notice requirements of Section 20.536.010 of the Coastal Zoning Code.

# COASTAL DEVELOPMENT PERMIT RENEWAL PROJECT INTAKE CHECKLIST

The following information and materials must be submitted at the time a coastal development permit renewal application is filed with the Planning Division. **Applicants should check off each completed item under the box marked "A" and submit this checklist with the application.**

A  C

1. **FIVE (5) SETS** of items a-d. Copies must be on 8 ½" x 11" paper, collated and stapled into individual application packets.

- a) **APPLICATION FORM AND COASTAL ZONE PROJECT DESCRIPTION QUESTIONNAIRE.** Please be sure to answer all questions thoroughly and accurately.
  - b) **LOCATION MAP** using USGS quad maps with parcel boundaries (See attached example).
  - c) **SITE PLAN** drawn to scale (See attached example).
  - d) **ARCHITECTURAL BUILDING FLOOR PLANS & ELEVATIONS** (& Sign Detail, if applicable).
- 

A  C

2. **SIGNED CERTIFICATION AND SITE VIEW AUTHORIZATION FORM - 1 Copy**

A  C

3. **SIGNED DECLARATION OF POSTING - 1 Copy**

A  C

4. **SIGNED INDEMNIFICATION AGREEMENT- 1 Copy**

A  C

5. **UPDATED STAMPED, LEGAL SIZE ENVELOPES** addressed to all **owners** of property situated within three hundred (300) feet of property boundaries and **occupants** situated within one hundred (100) feet of the property lines of the project site (excluding roads) and to any other parties known to the applicant to have an interest in the proposed development. Return address shall be left blank on the envelopes.

A  C

6. **UPDATED MAILING LIST - 1 COPY** A list of the names, addresses and Assessor's Parcel Numbers of owners/occupants/parties of interest as required above shall be typed or printed legibly on the form provided in the application packet.

A  C

7. **FILING FEE** (check with a planner for fee amount). Checks to be made payable to the County of Mendocino.

**COUNTY OF MENDOCINO  
DEPT OF PLANNING & BUILDING SERVICES**

**120 WEST FIR STREET  
FORT BRAGG, CA 95437  
Telephone: 707-964-5379  
Fax: 707-961-2427**

Case No(s) \_\_\_\_\_  
Date Filed \_\_\_\_\_  
Fee \$ \_\_\_\_\_  
Receipt No. \_\_\_\_\_  
Received by \_\_\_\_\_

**Office Use Only**

**COASTAL DEVELOPMENT PERMIT RENEWAL APPLICATION FORM**

Name of Applicant	Name of Owner(s)	Name of Agent
Mailing Address	Mailing Address	Mailing Address
Telephone Number	Telephone Number	Telephone Number

Please describe any actions taken to initiate development since issuance of the coastal development permit. List any changes to the property and or structure(s) since CDP issuance.

**Driving Directions**

The site is located on the \_\_\_\_\_ (N/S/E/W) side of \_\_\_\_\_ (name road)  
approximately \_\_\_\_\_ (feet/miles) \_\_\_\_\_ (N/S/E/W) of its intersection with  
\_\_\_\_\_ (provide nearest major intersection).

Assessor's Parcel Number(s)	Date of expiration of issued CDP
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Parcel Size  <input type="checkbox"/> Square Feet <input type="checkbox"/> Acres _____	Street Address of Project
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# COASTAL DEVELOPMENT PERMIT RENEWAL APPLICATION QUESTIONNAIRE

The purpose of this questionnaire is to relate information concerning your application to the Planning & Building Services Department and other agencies that will be reviewing your project proposal. The more detail that is provided, the easier it will be to promptly process your application. Please answer all questions. For those questions, which do not pertain to your project, please indicate "Not Applicable" or "N/A".

1. Describe your project and include secondary improvements such as wells, septic systems, grading, vegetation removal, roads, etc.

2. If the project is residential, please complete the following:

TYPE OF UNIT	NUMBER OF STRUCTURES/UNITS	SQUARE FEET PER UNIT
<input type="checkbox"/> Single Family	_____	_____
<input type="checkbox"/> Mobile Home	_____	_____
<input type="checkbox"/> Duplex/Multifamily	_____	_____

3. Are there existing structures on the property?  Yes  No  
If yes, describe below and identify the use of each structure on the plot plan.

4. Utilities will be supplied to the site as follows:

- A. Electricity
- Utility Company (service exists to the parcel).
  - Utility Company (requires extension of services to site: \_\_\_\_\_ feet \_\_\_\_\_ miles)
  - On Site generation, Specify: \_\_\_\_\_
  - None
- B. Gas
- Utility Company/Tank
  - None
- C. Telephone:  Yes  No

5. Will there be any exterior lighting?  Yes  No

If yes, describe below and identify the location of all exterior lighting on the plot plan and building plans.

6. What will be the method of sewage disposal?

- Community sewage system, specify supplier \_\_\_\_\_  
 Septic Tank (indicate primary + replacement leachfields on plot plan)  
 Other, specify \_\_\_\_\_

7. What will be the domestic water source?

- Community water system, specify supplier \_\_\_\_\_  
 Well  
 Spring  
 Other, specify \_\_\_\_\_

8. Is any grading or road construction planned?  Yes  No

Estimate the amount of grading in cubic yards \_\_\_\_\_ c.y. If greater than 50 cubic yards or if greater than 2 feet of cut or 1 foot of fill will result, please provide a grading plan.

Describe the terrain to be traversed (e.g., steep, moderate slope, flat, etc.).

9. Will vegetation be removed on areas other than the building sites and roads?  Yes  No  
If yes, explain:

10. Is the proposed development visible from:

- A. State Highway 1?  Yes  No  
B. Park, beach or recreation area?  Yes  No

If you answered yes to either question, explain.

11. Project Height. Maximum height of structure(s). \_\_\_\_\_ feet

12. Describe all exterior materials and colors of all structures.

13. Are there any water courses, anadromous fish streams, sand dunes, rookeries, marine mammal haul-out areas, wetlands, riparian areas, pygmy vegetation, rare or endangered plants, animals or habitat which support rare and endangered species located on the project site or within 100 feet of the project site?

14. If the project is **commercial**, **industrial**, or **institutional**, complete the following:

Total square footage of all structures: \_\_\_\_\_

Estimated employees per shift: \_\_\_\_\_

Estimated shifts per day: \_\_\_\_\_

Type of loading facilities proposed: \_\_\_\_\_

Will the proposed project be phased?  Yes  No

If Yes, explain your plans for phasing.

Parking will be provided as follows:

Number of Spaces Existing \_\_\_\_\_ Proposed \_\_\_\_\_ Total \_\_\_\_\_

Number of standard spaces \_\_\_\_\_ Size \_\_\_\_\_

Number of handicapped spaces \_\_\_\_\_ Size \_\_\_\_\_

# MAILING LIST

List all property owners within 300 feet, and occupants within 100 feet along with the corresponding Assessor's Parcel Number for each owner/occupant.

<b>AP# 000-000-00 LAST NAME, FIRST NAME STREET ADDRESS/P.O. BOX CITY, STATE ZIP</b>		

# CERTIFICATION AND SITE VIEW AUTHORIZATION

- 1. I hereby certify that I have read this completed application and that, to the best of my knowledge, the information in this application, and all attached appendices and exhibits, is complete and correct. I understand that the failure to provide any requested information or any misstatements submitted in support of the application shall be grounds for either refusing to accept this application, for denying the permit, for suspending or revoking a permit issued on the basis of such misrepresentations, or for seeking of such further relief as may seem proper to the County.
- 2. I hereby grant permission for County Planning and Building Services staff and hearing bodies to enter upon and site view the premises for which this application is made in order to obtain information necessary for the preparation of required reports and render its decision.

\_\_\_\_\_

Owner/Authorized Agent Date

NOTE: IF SIGNED BY AGENT, OWNER MUST SIGN BELOW.

### AUTHORIZATION OF AGENT

I hereby authorize \_\_\_\_\_ to act as my representative and to bind me in all matters concerning this application.

\_\_\_\_\_

Owner Date

## MAIL DIRECTION

To facilitate proper handling of this application, please indicate the names and mailing addresses of individuals to whom you wish correspondence and/or staff reports mailed if different from those identified on Page One of the application form.

<b>Name</b>	<b>Name</b>	<b>Name</b>
<b>Mailing Address</b>	<b>Mailing Address</b>	<b>Mailing Address</b>

**INDEMNIFICATION AND HOLD HARMLESS**

ORDINANCE NO. 3780, adopted by the Board of Supervisors on June 4, 1991, requires applicants for discretionary land use approvals, to sign the following Indemnification Agreement. Failure to sign this agreement will result in the application being considered incomplete and withheld from further processing.

**INDEMNIFICATION AGREEMENT**

As part of this application, applicant agrees to defend, indemnify, release and hold harmless the County of Mendocino, its agents, officers, attorneys, employees, boards and commissions, as more particularly set forth in Mendocino County Code Section 1.04.120, from any claim, action or proceeding brought against any of the foregoing individuals or entities, the purpose of which is to attack, set aside, void or annul the approval of this application or adoption of the environmental document which accompanies it. The indemnification shall include, but not be limited to, damages, costs, expenses, attorney fees or expert witness fees that may be asserted by any person or entity, including the applicant, arising out of or in connection with the approval of this application, whether or not there is concurrent, passive or active negligence on the part of the County, its agents, officers, attorneys, employees, boards and commissions.

Date: \_\_\_\_\_

\_\_\_\_\_  
Applicant

# NOTICE OF PERMIT RENEWAL

A COASTAL PERMIT RENEWAL APPLICATION FOR DEVELOPMENT ON  
THIS SITE IS PENDING BEFORE THE COUNTY OF MENDOCINO:

CDP # TO BE RENEWED: \_\_\_\_\_

PROJECT DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

LOCATION: \_\_\_\_\_

\_\_\_\_\_

APPLICANT: \_\_\_\_\_

ASSESSOR'S PARCEL NUMBER (S): \_\_\_\_\_

DATE NOTICE POSTED: \_\_\_\_\_

ANY PERSON WISHING TO CONTEST THE GRANTING OF THIS RENEWAL WITHOUT A PUBLIC HEARING MUST SUBMIT TO THE PLANNING DIVISION A WRITTEN REQUEST WITHIN 10 DAYS TO HOLD A PUBLIC HEARING. FOR FURTHER INFORMATION, PLEASE TELEPHONE OR WRITE TO:

COUNTY OF MENDOCINO  
PLANNING & BUILDING SERVICES  
120 WEST FIR STREET  
FORT BRAGG, CA 95437

TELEPHONE 707-964-5379 • FAX 707-961-2427  
HOURS: 8:00 - 12:00 & 1:00 - 5:00



**DECLARATION OF POSTING**

At the time the application is submitted for filing, the applicant must **Post**, at a conspicuous place, easily read by the public and as close as possible to the site of the proposed development, notice that an application for the proposed development has been submitted. Such notice shall contain a general description of the nature of the proposed development and shall be on the standard form provided in the application packet. If the applicant fails to post the completed notice form and sign the **Declaration of Posting**, the Department of Planning and Building Services cannot process the application.

As **Proof of Posting**, please sign and date this Declaration of Posting form when the site is posted; it serves as proof of posting. It should be returned to the Department of Planning and Building Services with the application.

Pursuant to the requirements of Section 20.532.025(H) of the Mendocino County Code, I hereby certify that on \_\_\_\_\_ (date of posting), I or my authorized representative posted the "NOTICE OF PENDING PERMIT" for application to obtain a Coastal Development Permit for the development of:

\_\_\_\_\_  
\_\_\_\_\_  
(Description of development)

Located at:

\_\_\_\_\_  
\_\_\_\_\_  
(Address of development and Assessor's Parcel Number)

The public notice was posted at:

\_\_\_\_\_  
\_\_\_\_\_  
(A conspicuous place, easily seen by the public and as close as possible to the site of proposed development)

\_\_\_\_\_  
Owner/Authorized Representative

\_\_\_\_\_  
Date

(A copy of the notice which was posted shall be attached to this form).

**NOTE:** YOUR APPLICATION CANNOT BE PROCESSED UNTIL THIS "DECLARATION OF POSTING" IS SIGNED AND RETURNED TO PLANNING AND BUILDING SERVICES.