ITEMS REQUIRED FOR ALL APPLICATIONS

This checklist will be used by staff to determine if an application contains the appropriate requirements to begin the application process. All items listed below must be included for all applications. Certain types of application might require additional items, as specified on supplemental application forms. If any items are not included the project will not be accepted for submittal. This checklist does not determine a project complete for purposes of the Permit Streamlining Act.

Applicable Filing Fees (Major: \$2,062; or Mir	nor: \$1,202)		
Address change Filing Fee: \$219 (if the proje	ect contains an	ADU or JADU)	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Proof of Owner Occupancy (only required fo three months and a copy of the photo ID sh			-
Plans prepared in accordance with the <i>Min</i> drawn to scale and fully dimensioned. Provinsizes:		•	
Diane	Full Size	Digital	-
Plans	(24" x 36")	(.dwg & pdf)	_
Site Plan (Existing and Proposed)		1	-
Floor Plan(s) (Existing and Proposed)		1	_
Roof Plans (Existing and Proposed)		1	_
Elevations (All Sides, Existing and Proposed)		1	-
Cross section showing building height,		1	
existing grade, and finished grade			_
Landscape Plan (if applicable)		1	_
Demolition Plan (if applicable)		1	_
Photometric Plan (if applicable)		1	-
Project information must be provided on t existing square footage of all structures on structures, lot coverage calculation, lands calculation.	the site, the p	proposed squa	re footage of the addition or of new
igotimes Color and materials assignment (if applicabl	e).		
Pictures of the site. Pictures may be submit	ted digitally in	the following for	ormats: JPEG, BMP, or TIF.
Notification Packet – Radius Map & Owners only required when the project is a two-stor	•		
Demolition Disclosure Form (if the project invo	olves substantia	al modification to	o the existing structure)
Address Assignment Form (If the application in	nvolves an ADU	J OR JADU)	
igstyle Low Impact Development Form (if the project	will disturb a g	round area of or	over 500 square feet
☐ Certification of Landscape Design (if landsca	pe plan is pre	pared according	g to WELO)

Online Submittal Portal: http://www.ci.temple-city.ca.us/1202/Apply-Online



City of Temple City

SITE PLAN REVIEW

APPLICATION

PERMIT REQUESTED (PLEASE CHECK ALL APPLICABLE BOXES)

Minor	Site Plan Review:	Major	Site Plan Review:	
	New one or two-story single-family residences		All new commercial, industrial, mixed-use, multi-family	
	Additions to a single-family residence		residential, and institutional construction, or remodel where new square footage or units is proposed.	
	Any proposed demolition, where new construction is not proposed.			
	Facade improvements and other exterior changes on commercial, industrial, mixed-use, and institutional uses provided there is no square footage being added.		Any other construction not identified as requiring a minor site plan review or zoning clearance, as determined by the Director.	
	Accessory structures for multi-family, commercial, industrial, mixed-use, and institutional uses, including trash enclosures and other non-habitable structures that are 120 square feet or larger; provided there is no habitable square footage being added.			
	The addition of outdoor seating areas to existing restaurants provided there is no interior square footage being added			
DESC	RIPTION OF PROJECT (Be as specific	as pos	sible, use additional sheets if necessary)	
PROI	PERTY INFORMATION			
Propert	y Address:			
Parcel S	Size (area): Width:		Depth:	
Current	t Use:			

OWNER / APPLICANT INFORMATION Property Owner: Address: Zip Code: City: State: Phone: Fax: Cell / Other Phone: E-mail: Attach additional lists for multiple property owners. If the property owner or applicant is a trust, partnership, corporation or LLC, Note: on a separate sheet, provide a listing of all persons that make-up the trust, partnership, corporation or LLC Applicant: Address: Zip Code: City: State: Phone: Cell / Other Phone: E-mail: Project Architect Project Engineer Applicant's Representative: Address: Zip Code: City: State: Phone: Fax: Cell / Other Phone: E-mail: Note: Prior to submittal of this application, it is advised that the applicant review the requested proposal with the Planning Division in order to review ordinance requirements and consistency with the General Plan. In completing the application form, please be as accurate and complete as possible. APPLICANT CERTIFICATION I hereby certify that the statements furnished in this application and in the attached exhibits present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements, and information presented are true and correct to the best of my knowledge and belief. In addition, I understand that the filing of this application grants the City of Temple City permission to reproduce submitted materials, including but not limited to, plans, exhibits, and photographs, for distribution to staff, Commission, and City Council Members, and other Agencies in order to process the application, and to make those materials available to the public on the City of Temple City's web site and cable channel, notwithstanding Health & Safety Code § 19851 or any other provision of law. Nothing in this consent, however, shall entitle any person to make use of the intellectual property in plans, exhibits and photographs for any purpose unrelated to the City's consideration of this application. Signature: Date: Name (print or type): Phone:

CONSENT BY PROPERTY OWNER

If applicant is other than property owner, owner must sign consenting to filing. Attach additional sheets if necessary. Originals signatures only. Fax copies of owner's signature will not be accepted.

hereby authorize City representative(s) to	operty, consent to the filing of this appli o enter upon my property for the purpose d/or required environmental review for th	of examining and inspecting the
being filed. Attach additional sheets if no	•	e processing of the application(s)
Signature(s)	Name(s) (please print or type)	Date
Note: This application being signed und	er penalty of perjury and does not require	notarization
FOR OFFICE USE ONLY		
Case Number:	Receipt Number:	
Submittal Date:	Approval Date:	