

Sutter County Community Services Department
1130 Civic Center Boulevard
Yuba City, California, 95993
(530) 822-7400

APPLICATION PACKET FOR

USE PERMIT

Attached are the necessary filing forms and instructions for submitting a complete use permit application. All forms must be completely filled out and submitted with any necessary supporting information. This packet includes the following application forms (item numbers 1, 2 3 and 6) and information sheets (item numbers 4 and 5):

1. Application Form
2. Supplemental Application Information Form
3. Sewer/Septic and Water (SAW) Form
4. Fish and Game Advisory Notice
5. Plot Plan Preparation Instructions
6. Indemnification Agreement

Upon receipt of the **completed forms, plot plan, and filing fees**, the Community Services Department will determine the completeness of the application. This review will be completed as soon as possible, but at most, within thirty (30) days of the submittal of the application. If the application is determined to be complete, the County will begin environmental review, circulate the project for review and then set the application for a hearing before the Planning Commission.

If sufficient information **has not** been submitted to adequately process your application, you will receive a notice of incomplete application with instructions on how to complete the application. Upon receipt of that additional information or revised application, the thirty (30) day review period will begin again.

Approximately five (5) days prior to the Planning Commission meeting, the Community Services Department will prepare a report and submit it to you, the Commission, and others involved with the project. This report will be based on the information contained in your application, comments from other agencies or departments, and a Community Services Department analysis. The report will usually contain a recommendation for approval, conditional approval, or denial.

Since the information contained in your application is used to evaluate the project and in the preparation of the staff report, it is important that you provide complete and accurate data. Failure to provide adequate information could significantly delay the processing of your application.

Each section of the application packet should be carefully reviewed prior to submittal and responses to **EVERY** question provided. If a particular response is not applicable, an N/A should be marked in the space provided indicating that the question has been reviewed by the applicant. If there are **ANY** blank spaces, staff will assume that the applicant has not completed the application packet and will return it for completion.

Applicants and/or their representatives are encouraged to attend the public hearing.

PLEASE CONTACT THE COMMUNITY SERVICES DEPARTMENT IF YOU HAVE ANY QUESTIONS WHILE PREPARING THE APPLICATION, OR AT ANY TIME DURING THE PERMIT PROCESS. WE WILL BE HAPPY TO ASSIST YOU IN ANY WAY WE CAN.

COUNTY OF SUTTER USE PERMIT APPLICATION

Filing FeesAt Cost with a \$1,850.00 Deposit
 - Environmental Health\$146.00
 - CEQA Initial StudyAt Cost with a \$650.00 Deposit

OFFICE USE ONLY	
Application No.:	Date Filed:
Environmental No.:	Receipt No.:
Other Related Application(s):	

Use Request: _____

Property Location and Address: _____

Assessor's Parcel No(s): _____ Zoning: _____

	Property Owner	Agent/Applicant	Engineer/Architect
NAME:	_____	_____	_____
ADDRESS:	_____	_____	_____
CITY:	_____	_____	_____
PHONE:	_____	_____	_____

SIGNATURE OF PROPERTY OWNER: _____
(A property owner's representative can sign if the property owner provides a consent letter.)

SIGNATURE OF APPLICANT: _____

OFFICE USE ONLY	
DISPOSITION: () APPROVED () DENIED by the Planning Commission:	
DISPOSITION: () APPROVED () DENIED by the Board of Supervisors:	
Conditions Attached: () Yes () No	
I agree to accept the Use Permit subject to the provisions of the Zoning Ordinance and the Conditions of Approval of the permit.	
Signature: _____	Date: _____

THIS USE PERMIT IS NOT VALID UNTIL 10 DAYS AFTER THE DATE OF APPROVAL AND BECOMES NULL AND VOID IF NOT USED WITHIN ONE YEAR OF THE DATE OF APPROVAL UNLESS EXTENDED BY THE COMMUNITY SERVICES DEPARTMENT.

SUPPLEMENTAL APPLICATION INFORMATION FORM

This document, once completed, will provide necessary factual information about the proposed project. It will also be used to evaluate potential environmental impacts created by the project. Please be as accurate and complete as possible in answering the questions. Further environmental information could be required from the applicant to evaluate the project.

**PLEASE PRINT CLEARLY OR TYPE
USE A SEPARATE SHEET, IF NECESSARY, TO EXPLAIN THE FOLLOWING:**

I. Project Characteristics:

- A. Describe the proposed project including all existing and proposed uses of the site.

- B. Parcel size (square feet or acres): _____

- C. Existing land use (attached photographs of the site):

Undeveloped (vacant) ☐ Developed ☐

If developed, describe extent (type and use of all structures): _____

- D. Existing surrounding land uses:

North _____
South _____
East _____
West _____

- E. Proposed building size (in square feet by floor):

F. Proposed building height (measured from average finished grade to highest point): _____

G. Proposed building site plan:

(1)	building coverage	_____	Sq. Ft.	_____	% of site
(2)	surfaced area	_____	Sq. Ft.	_____	% of site
(3)	landscaped area	_____	Sq. Ft.	_____	% of site
(4)	cultivated area	_____	Sq. Ft.	_____	% of site
(5)	natural area	_____	Sq. Ft.	_____	% of site
	Total	_____	Sq. Ft.	100	%

H. Construction phasing: If the project is a portion of an overall larger project, describe future phases or extension. Show all phases on site plan. _____

I. Exterior Lighting:

1. Identify the type and location of exterior lighting that is proposed for the project

2. Describe how new light sources will be prevented from spilling on adjacent properties or roadways. _____

J. Total number of parking spaces required (per Zoning Code): _____

K. Traffic:

1. Estimated average daily vehicle trips expected: _____

2. Percentage of average daily trips anticipated:

Employee personal vehicles: _____

Customer/vendor personal vehicles: _____

Service/supply utility vehicles: _____

Tractor/trailers or other heavy vehicles: _____

3. Estimated number of trips (per day) during peak hours:

7 a.m. to 9 a.m. _____

4 p.m. to 6 p.m. _____

L. Will the project generate new sources of noise? If not, please explain why. _____

- M. Will the project use or dispose of any potentially hazardous materials, such as toxic substances, flammables, or explosives? _____
If yes, please explain. _____

- N. Will the project generate new sources of dust, smoke, odors, or fumes? _____
- O. Will the project impact any or eliminate any natural plant or animal habitats? If not, please explain why. _____

- P. Will the project impact any cultural, historical, or scenic aspect? If not, please explain why. _____

II. Site Characteristics:

- A. Are there any natural water bodies on, or adjacent to, the subject property, including lakes, rivers, ponds, creeks, streams, intermittent or perennial water courses, wetlands, etc.? Y ☐ N ☐
If so, give names and show on plot plan _____

- B. Are there any man-made drainage/channels either on or within 100 feet of the site?
Y ☐ N ☐
If so, give names _____

- C. Identify types and quantity of vegetation on property: _____

- D. In which direction(s) does the subject property drain? Explain. _____

- E. How will drainage issues on the property be resolved by the proposal? And if it will not be affected, explain why not. _____

III. If Residential Project:

A. Number of dwelling units:

1. Single-family _____
2. Multiple-family _____

B. Check type of occupancy for proposed (or converted) residence:

owner-occupied ☐ agricultural employee ☐ elderly family member ☐
caretaker ☐ son/daughter ☐ other (explain) ☐

If for a family member in need of living assistance, provide a certification from a licensed doctor that a medical condition exists that necessitates the provision of onsite living assistance. _____

C. If multiple-family or condominium project, number of dwelling units with:

One bedroom <input type="checkbox"/>	Three bedrooms <input type="checkbox"/>
Two bedrooms <input type="checkbox"/>	Four or more bedrooms <input type="checkbox"/>

IV. If Non-Residential or Mixed Use Project:

Home occupation, commercial, industrial, institutional, non-profit, public agency or other project (if project is only residential, do **not** answer this section):

A. Type of use(s): _____

B. Square feet of use area: _____

C. Days of operation (e.g., Monday - Friday): _____

D. Total hours of operation per day: _____
Times of operation (e.g., 8 - 5, M - F): _____

E. If fixed seats involved, how many _____
If pews or benches, please describe how many and the total length: _____

F. Designed building capacity: _____

G. Total number of employees: _____

H. Anticipated number of employees on largest shift: _____

V. If an **outdoor use** is proposed as part of this project, please complete this section.

A. Type of use:

Sales ☐ Processing ☐ Storage ☐
Manufacturing ☐ Other ☐

B. Area devoted to outdoor use (shown on site plan):

Square feet/acres ☐ Percentage of site ☐

C. Describe the proposed outdoor use: _____

VI. List all other public agency approvals required for this project. Specify type of permit and issuing agency, telephone number and contact person.

VII. Is the proposed property located on a site which is included on the Hazardous Waste and Substances List (Cortese List)? Y ☐ N ☐

The Cortese List is available for review at the Community Services Department counter. If the property is on the List, please contact the Planning Program to determine appropriate notification procedures prior to submitting your application for processing (Government Code Section 65962.5).

I hereby certify, to the best of my knowledge, that the above statements are correct.

Signature of Person Preparing Form

Date

Telephone Number

INDEMNIFICATION AGREEMENT

This Indemnification Agreement ("Agreement") is entered into by the applicant for the project described below ("Applicant") and the owner or owners of the property that is the subject of such application ("Property Owner"). This Agreement is effective as of the date last signed below.

Applicant and Property Owner agree to indemnify, defend, and hold harmless Sutter County ("County"), the Sutter County Planning Commission, the Sutter County Board of Supervisors, and their officers, employees, and agents, including consultants ("Indemnified Parties") from any claim, action, or proceeding against Indemnified Parties to attack, set aside, void, or annul the approval of the Project or adoption of the environmental document that accompanies it. This indemnification obligation shall include, but not be limited to, damages, costs, expenses, attorneys' fees, or expert witness costs that may be asserted by any person or entity, including the Applicant and Property Owner, arising out of or in connection with the approval of the Project, including any claim for private attorney general fees claimed by or awarded to any party against the County.

The County shall promptly notify the Applicant of any claim, action, or proceeding. The County shall control the choice of counsel and defense of any such claim, action, or proceeding.

To the extent that County is required by Applicant to use any of its resources to respond to such claim, action, or proceeding, Applicant will reimburse County upon demand and upon presentation of an invoice describing the work done, the time spent on such work, and the hourly rate for such work by the employee or agent of County.

The person signing this Agreement represents and warrants that he or she is duly authorized and has legal capacity to execute and deliver this Agreement and that this Agreement is a valid and legal agreement binding on the Applicant and enforceable in accordance with its terms.

PROJECT:

Project Number: _____
Sutter County APN: _____

APPLICANT:

Signed _____
Name of Person Signing _____
Title _____
Name of Project Applicant _____

PROPERTY OWNER:

Signed _____
Name _____

January 1, 2009

ADVISORY RE: FISH AND GAME FEE REQUIREMENT

Permit applicants are advised that pursuant to Section 711.4 of the Fish and Game Code a fee of \$2,768.25 for an Environmental Impact Report and \$1,993.00 for a Negative Declaration shall be paid to the County Clerk at the time of recording the Notice of Determination for this project. This fee is required for Notices of Determination recorded after December 31, 2008. A Notice of Determination cannot be filed and any approval of the project shall not be operative, vested, or final until the required fee is paid. This shall mean that building, health, public works and other development permits cannot be approved until this fee is paid.

This fee is **not** a Sutter County fee; it is required to be collected by the County pursuant to State law for transmission to the Department of Fish and Game. This fee was enacted by the State Legislature in 2006, and is adjusted each January 1 in accordance with *Implicit Price Deflator for State and Local Government Purchases of Goods and Services, as Published by the U.S. Department of Commerce*.



SAW FORM (Sewage and Water Form)

Applicant _____
Address _____
Phone No. _____ **AP No(s).** _____
Project Location _____
Engineer _____ **Phone No.** _____
Address _____

Applications shall include the following signed statement from the Environmental Health Program verifying they have received sufficient information to fully evaluate the proposed project. The SAW form shall be used for all applications regardless of the type of sewer and water supply and will be required as part of an application packet submitted. Applications will be considered to be **INCOMPLETE** without this form.

The Environmental Health Program will check the appropriate spaces below when they have received wastewater disposal and water supply information which is adequate for their review of the application. **Checks do not in any way indicate approval or denial of a proposal** and a handout provided by the Environmental Health Program will explain what information will be required in order to check the spaces below. If you have any questions regarding this form and/or its purposes in the application packet, feel free to contact the Environmental Health Program at (530) 822-7400.

FOR OFFICE USE ONLY				
Description of the proposed project:				
WASTEWATER DISPOSAL:				
State Permitted Public Sewer:				
N/A	Public Sewer	STEP	On-site	
County Permitted On-Site System:				
Conventional	Pressure Dosed	Mound	Other	
WATER SUPPLY:				
State Permitted Public Water System:				
N/A	Public Water System	Yuba City	Hillcrest	Other
County Permitted Water System:				
State Small Water System		CURFFL Water System		
Private Well				
Other: _____				
Additional Comments: _____				

Environmental Health Program Signature			Date	



**Sutter County Community Services Department
BUILDING, ENVIRONMENTAL HEALTH & PLANNING DIVISIONS
530/822-7400 (telephone) 530/822-7109 (fax)**

PLOT PLAN REQUIREMENTS

- A. Plans to be drawn to a recognized scale. (i.e. 1"=10'), paper size not to exceed 11" x 17". If on a septic system, see M. 2. below for plot plan scale.
- B. Show **north** arrow.
- C. Title block.
- D. If located in the Sutter Buttes, show existing and proposed contours at 4' intervals.
- E. Show property lines and lot dimensions. NOTE: Back of sidewalk **may not be** property line. If indicating private roads, centerline of street may be property line.
- F. Show all existing and proposed structures and the distances between each including accessory buildings, decks, pools, pool equipment, spas, sheds and detached garages. Clearly distinguish between what is existing and what will remain, what is existing and what will be removed and what is proposed as new.
- G. Show existing and proposed front, side and rear setbacks for all floors from the property line to the closest portion of the building.
- H. Show all easements including public utilities, and drainage flow lines.
- I. Show driveways and adjacent streets. Indicate whether street is public or private.
- J. Show existing or proposed path of all utilities: electrical, gas, sewer or septic tank location, storm drains, and water or well location.
- K. Show areas that are and/or will be surfaced for parking.
- L. If a commercial/industrial project, show the location of all trees 6" diameter (dbh) to be retained or removed in the proposed landscape plan.
- M. Environmental Health Division Requirements (for on-Site Wastewater Disposal Permit). If connecting to sewer, go to "#4 FLOOR PLANS".
 - 1. Complete septic permit application (includes date and signature).
 - 2. Submit drawing (i.e. use engineer scale, 1"=20') showing exact locations of paved areas (both existing and proposed) including driveways, sidewalks, patios, pool decks, etc.
 - 3. Show all easements, any unpaved areas subject to vehicular traffic, structures (including pools, carport, decks, shops, covered patios, gazebos, etc.).
 - 4. Show on-site wastewater disposal system (septic tank, sewer lines, cleanouts, leach lines, distribution system, etc.) and 100% disposal field replacement area or Minimum Usable Sewage Disposable Area (MUSDA), if applicable.
 - 5. If project in Sutter Buttes, provide 4' contour lines.
 - 6. Show all well(s) and any abandoned well(s), and any off-site wells, abandoned wells located less than 150 feet from property lines.
 - 7. Show any water feature (streams, canals, culverts, ditches, lakes, ponds, areas subject to flooding, stormwater runoff or inundations, and any body of water (intermittent or perennial) on-site and off-site within 50-feet of the property line.
 - 8. Indicate 10-year flood plain and proximity to any structures.
 - 9. Show cutbanks, escarpments, man-made cuts, etc.

INSERT PLOT PLAN EXAMPLE