



PLANNING APPLICATION

TYPE OR PRINT CLEARLY

MAKE CHECKS PAYABLE TO CITY OF REDDING

REDDING
CALIFORNIA
City of Redding
777 Cypress Avenue
Redding CA 96001
Telephone:
(530) 225-4020
FAX: (530) 225-4495

Applicant	Mailing Address	Day Phone ()
	City Zip Code	Fax Phone ()
	E-Mail Address:	
Representative (if any)	Mailing Address	Day Phone ()
	City Zip Code	Fax Phone ()
	E-Mail Address:	
Property Owner	Mailing Address	Day Phone ()
	City Zip Code	Fax Phone ()
	E-Mail Address:	

Correspondence to be sent to: Applicant Representative Owner

Project Address			Assessor's Parcel No.
Existing Land Use	Site Acreage	Zoning	General Plan
Type of Application and Description of Proposed Project (attach sheets if necessary)			

<p>Applicant/Representative: <i>I have reviewed this application and the attached material. The provided information is accurate.</i></p> <p>Signed _____ Date _____</p>	<p>Property Owner/Authorized Agent: <i>I have read this application and consent to its filing.</i></p> <p>Signed _____ Date _____</p>
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FOR OFFICE USE ONLY		
Application Number(s)	Date Application Received	Application Received By
Prior Applications at this Site	GIS Number(s)	Address Atlas Page Number
Fees Received	Environmental Review Required <input type="checkbox"/> Yes <input type="checkbox"/> No-Categorical Exemption	Site in 100-Year Floodplain <input type="checkbox"/> Yes (MW and/or FEMA) <input type="checkbox"/> No
Staff Assigned	Date Staff Assigned	Date Application Certified Complete



REZONING



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PURPOSE

The City's Zoning Ordinance classifies all property into various zoning classifications or districts which control both land use and development standards. California law requires zoning to be consistent with the City's General Plan. The chart on the reverse side generally identifies which zoning districts are consistent with certain General Plan classifications.

In reviewing a proposed rezoning, the request is evaluated for its consistency with the General Plan and the compatibility of potential land uses and conditions regulating said uses (such as building height and setbacks) with surrounding development. A rezoning will be evaluated in light of its communitywide benefit and enhancement of orderly growth. The Zoning Ordinance—like the General Plan—represents one of the most important policy statements of the City. Any changes are reviewed very carefully by the Planning Commission and City Council. Applications for rezoning should be made only when there are compelling reasons for change.

PROCESS

Step 1 - Preapplication Discussion with Staff

It is recommended that you review the request with Planning Division staff prior to the submission of the formal application. This will allow an opportunity to discuss the feasibility of the request and identify possible environmental concerns and review what the present General Plan calls for in the location or area affected—a proposed land use change should be compatible with the surrounding uses and provide a logical progression for the City's development. In addition, staff can review with you the required data and procedures to be followed through the process. Usually, this first step is the most important step and helps a project move faster through the process.

Step 2 – Filing of Application

You should submit a completed application form together with a written statement of the reasons for the rezoning request; a map exhibit, as appropriate; and a filing fee to the Planning Division of the Development Services Department, 777 Cypress Avenue, Redding, California 96001. If the rezoning request is the first step in a known series of actions, all required applications should be filed. A staff Planner will review the material to make sure all the required information is provided. You will be notified within 30 days after filing as to whether the application is complete or what additional information is required. **The application must be signed by the property owner(s).**

Step 3 – Environmental Review

If the application is accurate and complete, a hearing is scheduled before the Board of Administrative Review (Board) to identify any significant environmental impacts associated with the rezoning request. The action of the Board is to recommend preparation of a negative declaration or an environmental impact report (EIR) or to refer the environmental determination to the Planning Commission. Notification of the hearing is given to adjacent property owners within a minimum of 300 feet from the exterior project boundaries.

Step 4 – Permit Hearing

If an environmental impact report (EIR) is not required, the Planning Commission will review the Rezoning request at a public hearing and make a recommendation to the City Council. The City Council then considers the recommendation of the Planning Commission at a public hearing. Following the receipt of public testimony, the City Council may: (1) refer the matter back to the Planning Commission for further evaluation; (2) continue the public hearing to a specific time, date, and place; or (3) close the public hearing and make its decision. The decision on approval or denial of the City Council is final. It takes the following two actions by the City Council to approve a Rezoning: (1) Introduction of an ordinance, which usually occurs at the same meeting as the public hearing and (2) Ordinance adoption at the next City Council meeting. There is a 30-day period after ordinance adoption before the Rezoning becomes effective.

ESTIMATED TIME REQUIREMENTS

The actual time for the processing of a Rezoning application will vary depending on the complexity and magnitude of the request, but generally the period from acceptance of a complete application to the effective date of the Rezoning is approximately 14 to 16 weeks under normal circumstances.

APPLICATION SUBMITTAL REQUIREMENTS

- Application form completed and signed.
- Map exhibit depicting the dimensions of properties proposed to be rezoned and identifying the owner of each parcel.
- A map, as appropriate, showing all properties proposed to be rezoned. If the rezoning application initiates text amendments, the requested text shall be specified.
- Statement of the reasons for the rezoning request.
- Application fee—refer to "Schedule of Fees and Charges."

ZONING CONSISTENCY GUIDELINES

General Plan Classification	Zoning District
	Residential Zoning Districts
Residential, 1 du/5 acres and larger	"RL" Rural Lands "RL-5" "RL-2" "RL"
Residential, 1 du/1 to 5 acres Residential, 1 to 2 du/acre	"RE" Residential Estate "RE-1" "RE-2"
Residential, 2–3.5 u/a	"RS" Residential Single Family "RS-2" "RS-2.5" "RS-3" "RS-3.5"
Residential, 3.5–6 u/a	"RS-4"
Residential, 6–10 u/a	"RM" Residential Mixed Housing Type "RM-6" "RM-9" "RM-10"
Residential, 10–20 u/a	"RM-12" "RM-15" "RM-18" "RM-20"
Residential, 20–30 u/a	"RM-30"
	Office and Commercial Zoning Districts
"LO"	"LO" Limited Office
"GO"	"GO" General Office
"NC"	"NC" Neighborhood Commercial
"SC"	"SC" Shopping Center
"RC"	"RC" Regional Commercial
"GC"	"GC" General Commercial
"GC-VR"	"GC-VR" General Commercial–Visitor/Retail
"HC"	"HC" Heavy Commercial

General Plan Classification	Zoning District
	Industrial Zoning Districts
"GI"	"GI" General Industry
"HI"	"HI" Heavy Industry
	Other District
"PF-I"; "PF-I-S"	"PF" Public Facilities



AGREEMENT FOR FULL COST BILLING



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I understand that the final fee for this application will be based on the costs of the employee time spent processing the application per adopted City labor contracts plus an overhead rate associated with providing the materials and maintaining the facilities necessary to support the service.

I understand that the initial fee is considered a deposit toward full cost for processing. This initial fee will set up an account that shall be charged at the current rate for all staff processing time. I understand that should the final costs be more than the initial fee deposit, I will be billed for the additional charges. If costs are less than the deposit, a refund will be processed.

I understand that staff processing time is applicable to all divisions of the Development Services Department. This also includes, but is not limited to, reviewing plans/submittal packages; routing plans to and communicating with interoffice departments and outside agencies; researching documents relative to site history; conducting site visits; consulting with applicant and/or other interested parties either in person or by phone; preparing environmental documents; drafting of staff reports and resolutions; performing clerical functions; preparing pertinent maps, graphs, and exhibits; and attending meetings/public hearings before the Board of Administrative Review/Planning Commission/City Council.

I also understand that receipt of all discretionary approvals does not constitute an entitlement to begin work. Nondiscretionary approvals may be required from City development departments and outside agencies. I understand that additional fees will be assessed for these approvals. These fees may include, but are not limited to, building permit fees, improvement plan fees, map check fees, traffic impact fees and other development impact fees, parkland dedication fees, and utility connection fees.

As applicant, I assume full responsibility for all costs leading to discretionary approvals (as listed above) incurred by the City in processing this application(s).

PROJECT NAME: _____

PROJECT DESCRIPTION: _____

BILLING CONTACT INFORMATION:

NAME: _____
COMPANY: _____
ADDRESS: _____
CITY, STATE: _____ ZIP: _____
PHONE: _____ FAX #: _____
CELL #: _____ EMAIL: _____

OWNER ARCHITECT
 ENGINEER OTHER: _____

BILLING ADDRESS, IF DIFFERENT FROM CONTACT:

NAME: _____
COMPANY: _____
ADDRESS: _____
CITY, STATE: _____ ZIP: _____
PHONE: _____ FAX #: _____
CELL #: _____ EMAIL: _____

OWNER ARCHITECT
 ENGINEER OTHER: _____

PROPERTY OWNER OR AGENT AUTHORIZATION:

NAME: _____
COMPANY: _____
ADDRESS: _____
CITY, STATE: _____ ZIP: _____
PHONE: _____ FAX #: _____
EMAIL: _____

CHOOSE ONE:

- I am the property owner and hereby authorize the filing of this agreement.
- I am the applicant and am authorized by the owner to file this agreement.

SIGNATURE: _____

DATE: _____

FOR STAFF USE ONLY

PROJECT ADDRESS: _____

JOB NUMBER: _____

TOTAL DEPOSIT FEE: \$ _____

RECEIPT #: _____

RECEIVED BY: _____

(Date Stamp)