



# ZONING CLEARANCE

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

30001 Ladyface Circle  
Agoura Hills, CA 91301

## PARCEL INFORMATION

Assessor's Parcel Number: \_\_\_\_\_ Address Map No: \_\_\_\_\_

Zoning: \_\_\_\_\_ Lot Number: \_\_\_\_\_

Homeowners Association:  Required  Not Required  
Name of HOA: \_\_\_\_\_

## SITE PLAN CODE REQUIREMENTS

- Proposed Use:**
- Retail
  - Office
  - Medical
  - Restaurant
  - Gym/Studio
  - Residential

**Setbacks**

Front: \_\_\_\_\_

Sides: Left: \_\_\_\_\_ Right: \_\_\_\_\_

Rear: \_\_\_\_\_

Square Footage: \_\_\_\_\_

Building Height: \_\_\_\_\_

Existing Lot Coverage: \_\_\_\_\_

Proposed Lot Coverage: \_\_\_\_\_

**Oak Trees**

Number of Oak Trees: \_\_\_\_\_

Distance from project: \_\_\_\_\_

**Grading:**

Is there earth to be moved? \_\_\_\_\_

More or less than 50c.y.? \_\_\_\_\_

## PARKING

Commercial  Office  Medical  Restaurant  Gym/Studio  Residential   
 1/300 sq ft 5/1000 sq ft 15/1000 sq ft 1/220 sq ft 2 Covered Spaces

Original Approval Count: \_\_\_\_\_ Current Count: \_\_\_\_\_

Total Square Footage: \_\_\_\_\_ Proposed Use Requirement: \_\_\_\_\_

I, the applicant, agree to the above-mentioned conditions and certify that the information provided is true and accurate.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Planner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_