C I T Y   O F
AGOURA HILLS

Department of Planning and Community Development
30001 Ladyface Court, Agoura Hills, CA 91301   Phone (818) 597-7309 / Fax (818) 597-7352 www.ci.agoura-hills.ca.us

MASTER PLANNING APPLICATION

TYPE OF PERMIT *Check all that are required.*

❑ Conditional Use Permit (CUP)	❑ Variance (VAR)
❑ Site Plan/Architectural Review (SPR)	❑ Oak Tree Permit (OTP)
❑ General Plan Amendment (GPA)	❑ Zone Change (ZC)
❑ Zoning Ordinance Amendment (ZOA)	❑ Parcel Map (PM)
❑ Amendment to Approved Application (Amendt)	❑ Temporary Use Permit (TUP)
❑ Planning Commission Interpretation (INT)	❑ Modification (MOD)
❑ Tentative Tract Map (TTM)	❑ Pre-Application (PAR)

DESCRIPTION OF THE PROPOSED PROJECT *Include the type of development, number of units, parcel size, square footage of building area, and if an amendment describe request. Attach additional sheets if necessary.*

PROJECT LOCATION	PROPERTY OWNER
Address or location of property:	**Name:**
	Address:
	Phone # **Fax#**
Current Zoning:	**E-mail Address:**
	The undersigned certify record ownership of the property described on the application, and hereby approve the action requested herein.
Assessor's Parcel Number(s):	**Signature** **Date:**
	If there are additional property owners, please use space on back.

APPLICANT	ARCHITECT OR ENGINEER
Name:	**Name:**
Firm:	**Firm:**
Address:	**Address:**
Phone: **Fax:**	**Phone:**
E-mail Address:	**Fax #:**
Signature:	**E-mail Address:**

To Be Completed By City Staff

Fees		Amount
Application Fee(s)	P1	$
Environmental Review (Initial Study)	P1	$
Public Hearing Fee	P1	$
Post PC Hearing Plan(s) Review	P1	$
Administrative-Geological	P1	$
Administrative-Geotechnical	P1	$
Geological/Geotechnical Review Deposit	2105	$
Administrative-Landscape-	P1	$
Landscape Plan Review Deposit	2105	$
Administrative-Oak Tree-	P1	$
Oak Tree Plan Review Deposit	2105	$
Consultant Site Inspection Fee	2105	$
Other (Sign Permit, Map, SPA, GPA, ZOA, ZC)	P1	$
Total		$

Date Received:	Received by:	Case No(s):	Related Cases:

Revised 12/07