## TEMPORARY CONDITIONAL USE PERMIT APPLICATION PACKET

The City of Ripon



**Community Development Department** 

**FILING INSTRUCTIONS:** Complete application must be received by the planning department no later than sixty (60) days prior to the next scheduled planning commission meeting.

**PROCESSING PROCEDURE:** Temporary Use Permit applications are reviewed during a public hearing by the planning commission in accordance with the Development Code, Title 16, Chapter 16.76, and unless otherwise advised by the planning department, applicants or their authorized representatives are required to attend the meeting to present their project to the commission. A copy of the agenda and staff report will be mailed no later than seventy-two (72) hours prior to the commission meeting. Meetings may be held between the applicant and the project review team prior to the completion of the staff report to address issues identified during the review period. Contact the following department(s) and/or Agency(ies) during processing of this application for possible additional requirements: RUSD 209-599-2131; RCFD 209-599-4209; Ripon Eng; Ripon Bldg

**APPLICATION SUBMITTAL REQUIREMENTS**: Unless otherwise determined by the planning department, an application for a temporary use permit must include the following:

- Application and preliminary environmental assessment fees
- □ Vicinity Map (8 ½ x 11)
- □ The property owner of record's name and mailing address and resident's address if property owner is absentee for every property within a 500 foot radius of the project site, measured from the perimeter of the project boundary line(s). Two formats must be provided: 1) self adhesive mailing labels which include property owner of record's name and mailing address, and 2) the assessor parcel number (APN) and the property owner of record's name and mailing address in label format on single sheet, one sided white copy paper.
- Sufficient information in writing, drawings, or pictures to show the detail of the proposed use or building, including but not necessarily limited to:
- Site Plan Diagram one (1) copy in 11" x 17" format and one (1) 8 1/2" x 11" reduction containing the following information:
  - Property owner/applicant (include address and phone number)
  - A workable scale, noted on plan
  - Dimensions: parcel, project area, buildings and all other features including but not limited to parking and landscaping
  - Property lines
  - North arrow, north to top of page
  - Street address of project
  - Existing features: structures to be retained, utility poles, hydrants, pavement, fences, sidewalks, street lights, trees (note on each item whether it is to be removed or retained)
  - Plan lines/elevations (front/rear/both side views)
  - Walkways
  - Parking stall dimensions and driveways (including handicap ramp)
  - New landscaping, perimeter and interior
  - Fence locations (including height and type)
  - Trash areas with enclosures
  - Calculation Table: lot size, floor area, number of parking stalls, landscaped area, lot coverage (%)
  - Delineation of phasing, where applicable
  - Color renderings, indicating type and color of exterior materials, and chips if required by the Planning Director
  - Other appropriate information:
  - Environmental Checklist (complete)
- □ Flash Drive or CD containing PDF's of all submitted documents

**APPEAL PROCEDURE**: Any applicant or person claiming to be directly and adversely affected by any action of the Planning Commission may, within ten (10) days after said action, file a written appeal along with the appropriate fee, with the City Clerk for transmittal to the City Council. Said appeal shall stay the issuance of any permits in connection with the action, pending the decision of the City Council. Upon the receipt of an appeal, the City Council shall, after receiving a report from the Planning Commission, and after at least one (1) Public Hearing, render a decision sustaining, amending, or overruling the Planning Commission action.

Temporary Conditional Use Permit Application				
<b>City of Ripon</b> 259 North Wil Ripon, CA 953 FAX 209-599- Phone 209-59	n Ima Ave., 366 -2685		UPT#_ PEA#_ Comp	or Official Use Only Fee Fee leted App. ( ) Yes ( ) No
PROPERTY (				
Name:	(Print)		Phone No	
	(Street)		(State)	(Zip)
	() Same as Above			_
Name:	(Print)		Phone No	
Address:	(Street)	(City)	(State)	(Zip)
PROJECT SI	TE INFORMATION:			
Address:				
Assessor Par	cel Number (APN):			
Present Zone: Actual Use:			Use:	
Project Descr	iption:			
Special Circu	mstances: () YES () NO	If yes, describe:		
	emporary Permit: (If longer th ested: (Date) From:		onal User Permit ap	
I he	ereby certify, under penalty of pe	erjury, that the informatio	n provided herein is tru	ue and correct.
Signature	of Applicant			Date
Signature of I	Property Owner if Different from	n Above		Date
tompuso doc				E20.01