

City of Pomona Planning Division

PLANNING APPLICATION FORM

505 S. Garey Avenue, Pomona, CA 91766 Planning Counter Hours: Monday through Thursday 8 AM to 5 PM City Hall Hours: Monday through Thursday 7:30 AM to 6 PM (909) 620 – 2191

	OFFICE USE ONLY
CASE NO:	
DATE RECEIVED:	
RECEIVED BY:	

MAJOR PROJECTS	Time Extension	
Appeal *	Variance	
Change of Zone	Wireless Communication Permit, Major	
Conditional Use Permit	MINOR PROJECTS	
Development Plan, Conceptual	Determination of Similarity	
Development Plan, Final	Development Review (Pre-Application)	
Development Plan Review (PCSP Area)	Master Sign Program	
Environmental Assessment	Minor Deviation Variance	
General Plan Amendment	Outdoor Dining Permit	
General Plan Conformity	Sign Permit	
Oak Tree Permit, Major*	Site Development Permit (DPSP Area), Minor	
Public Use Permit	Wireless Communication Permit, Administrative	
Sign Permit Variance	Wireless Communication Permit, Minor	
Site Development Permit (DPSP Area), Major	Other:	
Specific Plan Amendment		
Tentative Parcel Map	 * See Planning Division Staff for additional application Requirements. 	
Tentative Tract Map		
PROJECT IN	IFORMATION	
roject Address:		
ssessor's Parcel #(s):		
oning (Existing):		
eneral Plan Designation:		
and Use (Existing):		

	PROJECT	INFORMATION (CONT.)
Project Descript	ion:	
	CONTACT	T INFORMATION
	Name:	INFORMATION
APPLICANT	Phone/Email:	
ALL EIGAIN	Address:	
PROPERTY	Name:	
OWNER Phone/Email:		
	Address:	
	at the foregoing statements and information best of my knowledge.	on are true and that any submitted material, statements or plan designs
	Applicant's Signature	Date
All application	s require a property owner's affidavit. Pleas	se see the Planning Division Application Matrix for Notary requirements.
STATE OF CALIF		Y OWNER'S AFFIDAVIT
COUNTY OF LOS)SS	
OF PROPERTY I CONTAINED ANI	NVOLVED IN THIS PETITION, AND THA	LY SWORN, DEPOSE AND SAY, THAT I/WE AM/ARE THE OWNER(S) IT THE FOREGOING STATEMENTS AND ANSWERS HEREIN MITTED, ARE IN ALL RESPECTS TRUE AND CORRECT TO THE
SWORN TO BEF	ORE ME THIS SIGNED:	
DAY OF	·	ADDRESS:
		CITY:
NOTARY PUBLIC	;	TELEPHONE: