



Planning & Building Department

401 Grove Street
 Healdsburg, CA 95448
 707.431.3346
 www.cityofhealdsburg.org

Planning Permit Application

Last Updated: November 18, 2019

Please print or type

Project name _____ Project address _____

APN(s) _____

Application Type(s)

Case Number(s)

- | | | | |
|--|-------------------------------------|--------------------------------|--|
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> P/C | <input type="checkbox"/> Staff | _____ |
| <input type="checkbox"/> Design Review | <input type="checkbox"/> P/C | <input type="checkbox"/> Staff | <input type="checkbox"/> Prelim. _____ |
| <input type="checkbox"/> General Plan Amendment | <input type="checkbox"/> Text | <input type="checkbox"/> Map | _____ |
| <input type="checkbox"/> Heritage Tree Removal Permit | | | _____ |
| <input type="checkbox"/> Land Use Code Amendment | <input type="checkbox"/> Text | <input type="checkbox"/> Map | _____ |
| <input type="checkbox"/> Lot Line Adjustment | <input type="checkbox"/> Lot Merger | | _____ |
| <input type="checkbox"/> Modification to previous approval | <input type="checkbox"/> P/C | <input type="checkbox"/> Staff | _____ |
| <input type="checkbox"/> Sign Permit/Program | <input type="checkbox"/> P/C | <input type="checkbox"/> Staff | _____ |
| <input type="checkbox"/> Subdivision Map | <input type="checkbox"/> Major | <input type="checkbox"/> Minor | _____ |
| <input type="checkbox"/> Variance | <input type="checkbox"/> P/C | <input type="checkbox"/> Staff | _____ |
| <input type="checkbox"/> Planning Commission Workshop | | | _____ |
| <input type="checkbox"/> Other _____ | | | _____ |

Brief project description _____

Applicant _____ **Property Owner** _____

Contact _____ Contact _____

Mailing address _____ Mailing address _____

City, state, zip _____ City, state, zip _____

Telephone no. _____ Telephone no. _____

E-mail _____ E-mail _____

Design Firm _____ **Engineer** _____

Contact _____ Contact _____

Mailing address _____ Mailing address _____

City, state, zip _____ City, state, zip _____

Telephone no. _____ Telephone no. _____

E-mail _____ E-mail _____

Please complete reverse side

Additional recipients of project correspondence

If you desire project correspondence and notice of meetings to be sent to parties other than the Applicant and Property Owner, please list their names, address and telephone numbers below.

Name	Address	E-Mail address
_____	_____	_____
_____	_____	_____

Owner Acknowledgements

I declare under penalty of perjury that I am the owner of said property. I certify that all of the submitted information is true and correct to the best of my knowledge and belief. I understand that any misrepresentation of submitted data may invalidate any approval of this application.

Property Owner Signature(s)	_____	Date _____
	_____	Date _____

Applicant Acknowledgements

I declare under penalty of perjury that I have written authority from property owner to file this application. I certify that all of the submitted information is true and correct to the best of my knowledge and belief. I understand that any misrepresentation of submitted data may invalidate any approval of this application.

Applicant Signature(s)	_____	Date _____
	_____	Date _____

Partnerships & Corporations

In the case of a partnership, all general and limited partners shall be identified. In the case of a corporation, all shareholders owning 10% or more of the stock and all officers and directors shall be identified.

Name	Address	Signature
_____	_____	_____
_____	_____	_____

Applicant Indemnification Agreement

As part of this application, the applicant agrees to defend, indemnify, release and hold harmless the City of Healdsburg, its agents, officers, attorneys, councilmembers, employees, boards, and commissions from any claim, action or proceeding brought against any of the foregoing individuals or entities, the purpose of which is to attack, set aside, void or annul any approval of the application or related decision, or the adoption of any environmental documents which relate to the approval.

This indemnification shall include, but is not limited to, all damages, costs, expenses, attorney fees or expert witness fees that may be asserted by any person or entity, including the applicant, arising out of or in connection with the approval of the application or related decision, whether or not there is concurrent, passive or active negligence on the part of the City, its agents, officers, attorneys, councilmembers, employees, boards, and commissions.

If for any reason, any portion of this indemnification agreement is held to be void or unenforceable by a court of competent jurisdiction, the remainder of the agreement shall remain in full force and effect.

I have read and agree with all of the above.

_____	Date _____
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Applicant's printed name

Applicant's signature