

Certificate of Exemption or Exclusion from a Coastal Development Permit

Permanent Record
Microfilming Required

Permit #: PLN _____
Permit #: BLD _____

1. Basic Information

Owner
Name: _____
Address: _____
_____ Zip: _____
Phone, W: _____ H: _____
Email Address: _____

Applicant
Name: _____
Address: _____
_____ Zip: _____
Phone, W: _____ H: _____
Email Address: _____

2. Project Information

Project Description:

Assessor's Parcel Number(s):

Existing water source:
 Utility connection _____
 Well _____

Proposed water source:
 Utility connection _____
 Well _____

Staking of well location and property lines are required.
 Provide site plan depicting location and all trees.
 Will this require any grading or vegetation/tree removal? Yes No

If Yes, additional permits may be required. Such as: Tree Removal Permit, Grading Permit, Land Clearing Permit, Coastal Development Permit.

3. Signatures

We have reviewed this form as completed above and the basis for this exemption or exclusion. The information herein and the basis for exemption or exclusion are true and correct to the best of our knowledge and we hereby agree to carry out this project in accordance with the terms of the exemption/exclusion category selected on reverse. We also understand and agree that any exemption or exclusion issued for a water well and/or storage tank in the single family exclusion area will be invalidated in the event the future house, the well, and/or storage tank requires a variance.

.....
Owner Date Applicant Date

(Both Owner and Applicant must sign unless this Application for Exemption or Exclusion accompanies a Building Permit Application for which the Applicant is an agent for the Owner acceptable to the Building Inspection Section.)

Staff Use Only

4. Basis of Exemption or Exclusion

Use attached review sheet to determine basis of exemption and whether project qualifies. Review basis of exemption with applicant/owner and initial appropriate category below:

- Initial**
- | | |
|--|--|
| <p><input type="checkbox"/> A. Improvements to Existing Single Family Residence. [PRC 30610(a), CCR13250, ZR 6328.5(a)]</p> <p><input type="checkbox"/> B. Improvements to Existing Structure Other Than Single Family Residence or Public Works Facility. [PRC 30610(b), CCR13253, ZR 6328.5(b)]</p> <p><input type="checkbox"/> C. Existing Navigation Channel. [PRC 30610(c), ZR 6328.5(c)]</p> <p><input type="checkbox"/> D. Repair or Maintenance Activity. [PRC 30610(d), CCR13252, ZR 6328.5(d)]</p> <p><input type="checkbox"/> E. Single Family Residence Categorical Exclusion Area. [PRC 30610(e), CCR13240, AB 643, ZR 6328.5(e)]</p> | <p><input type="checkbox"/> F. Agriculturally-Related Development Categorical Exclusion Area. [PRC 30610(e), CCR13240, ORDERS E-79-7 and E-81-1, ZR 6328.5(e)]</p> <p><input type="checkbox"/> G. Utility Connections. [PRC 30610(f), ZR 6328.5(f)]</p> <p><input type="checkbox"/> H. Replacement of Structures Following Disasters. [PRC 30610(g), ZR 6328.5(g)]</p> <p><input type="checkbox"/> I. Emergency Activities. [PRC 30611, ZR 6328.5(h)]</p> <p><input type="checkbox"/> J. Lot Line Adjustment. [ZR 6328.5(i)]</p> <p><input type="checkbox"/> K. Land Division for Public Recreation Purposes. [ZR 6328.5(l)]</p> |
|--|--|

5. Well Inspection - All Coastal Zone Areas

- Required Not Required

Inspection made by: _____ Date of Inspection: _____

Yes	No
<input type="checkbox"/>	<input type="checkbox"/> Removal of trees?
<input type="checkbox"/>	<input type="checkbox"/> If Yes, is tree removal permit included?
<input type="checkbox"/>	<input type="checkbox"/> Trimming of trees?
<input type="checkbox"/>	<input type="checkbox"/> Excessive removal of vegetation?
<input type="checkbox"/>	<input type="checkbox"/> Excessive grading? (If Yes, CDP is required)
<input type="checkbox"/>	<input type="checkbox"/> Erosion control plan required?

Approval of Permit is subject to the following: (check if applicable)

- Submittal and Approval of a Tree Removal Permit
- Submittal and Approval of a Grading Permit
- Submittal and Approval of an Erosion Control Plan
- Submittal and Approval of a Coastal Dev. Permit

6. Approval

I have reviewed the above-described project and have determined that it meets all criteria for the exemption/exclusion checked above.

Exemption/Exclusion is approved.

 Planning Department _____ Date _____

Project is subject to the following condition(s) of approval:

7. Processing

- | | |
|---|--|
| <p><input type="checkbox"/> Fee collected</p> <p><input type="checkbox"/> Original Certificate of Exemption to Building Inspection file.</p> <p><input type="checkbox"/> Copies of Certificate of Exemption to:</p> <ol style="list-style-type: none"> 1. Applicant/Owner. 2. Planning Department Exemption Binder. | <ol style="list-style-type: none"> 3. Any relevant Planning or Building Inspection files. 4. California Coastal Commission, 45 Fremont Street, Suite 2000, San Francisco, CA 94105 <p><input type="checkbox"/> Update Permit*Plan Case Screen and Activities</p> |
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