



City of Santa Barbara MASTER APPLICATION

*** STAFF USE ONLY ***	
BLD 20	_____
FIR 20	_____
PBW 20	_____
PLN 20	_____
PRT 20	_____
SGN 20	_____
Other	_____

Project Address: _____

A.P.N./Street Segment ID: _____ Land Use Zone: _____

Existing Condition/Current Use _____

New Addition Remodel Repair Demo Change of Use Grading Other

Residential: # of Bldgs. _____ # of Stories _____ # of Units _____ Commercial: # of Bldgs. _____ # of Stories _____ Const. Type _____

BLD/PLN/SGN Project Description: _____

Proposed Use/Occupancy: _____ Construction Valuation \$: _____

Constr. D&C Encroachment Haul Route O.D.L.A. Parking Waiver Water Course Wells Other

PBW Project Description: _____

_____ Valuation \$: _____

IMPORTANT: Please check box next to name of person listed below whom we should contact regarding this application.

Owner of Property: _____
(Name) (Mailing Address) (City, State, Zip)

E-mail Address: _____ Phone: _____

Applicant: _____
(Name) (Mailing Address) (City, State, Zip)

E-mail Address: _____ Phone: _____

Architect/Designer: _____
(Name) (Mailing Address) (City, State, Zip)

E-mail Address: _____ Phone: _____

Engineer: _____
(Name) (Mailing Address) (City, State, Zip)

E-mail Address: _____ Phone: _____

Contractor: _____
(Name) (Mailing Address) (City, State, Zip)

E-mail Address: _____ Phone: _____

Tenant/Other (specify): _____
(Name) (Mailing Address) (City, State, Zip)

E-mail Address: _____ Phone: _____

Proposed Size

New Commercial Building: _____ sq. ft.

New Residential Building: _____ sq. ft.

Addition: _____ sq. ft.

Remodel/Tenant Improvement: _____ sq. ft.

Carport/Patio Cover: _____ sq. ft.

New Deck: _____ sq. ft.

New Fencing: _____ sq. ft.

New Paving: _____ sq. ft.

Grading: _____ cu. yd.

Other (specify): _____

Existing Size

Lot: _____ x _____ = _____ sq. ft.

Main Building: _____ sq. ft.

Other (specify): _____ sq. ft.

PLANNING STAFF USE ONLY

- ARCHITECTURAL BOARD OF REVIEW (ABR)
- COASTAL REVIEW: EXCLUSION, EXEMPTION OR REC TO CCC
- ENVIRONMENTAL REVIEW
- HISTORIC LANDMARKS COMMISSION REVIEW (HLC)
- MINOR ZONING EXCEPTIONS
- PLANNING COMMISSION REVIEW (PC)
- PRE-APP. REVIEW TEAM (PRT)
- PROPERTY PROFILE (FOR COMMERCIAL PROPERTIES)
- SIGN COMMITTEE REVIEW
- SINGLE FAMILY DESIGN BOARD (SFDB)
- STAFF HEARING OFFICER (SHO)
- ZONING LETTER (TYPICALLY FOR FINANCIAL INSTITUTIONS)
- OTHER _____

I, the undersigned, understand approval of this project does not waive any requirements, laws, or ordinances of the City of Santa Barbara. All statements contained herein, including all documents and plans submitted in connection with this application, are true and accurate to the best of my knowledge.

Signature: _____ Date: _____
(Applicant)

I hereby authorize the above named contact person to act as my agent in all matters pertaining to this application.

Signature: _____ Date: _____
(Property Owner)