



TA _____

TEXT AMENDMENT

PLEASE COMPLETE THE FOLLOWING INFORMATION (REQUIRED) :**PROJECT ADDRESS** _____

ZONE CLASSIFICATION _____

APPLICANT(S) NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

E-MAIL ADDRESS _____

TELEPHONE NO. _____

PROPERTY OWNER(S) NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

E-MAIL ADDRESS _____

TELEPHONE NO. _____

*****PLEASE ANSWER THE QUESTIONS ON PAGE 2*****

THE APPLICANT AND PROPERTY OWNER HEREBY DECLARE UNDER PENALTY OF PERJURY THAT ALL THE INFORMATION SUBMITTED FOR THIS APPLICATION IS TRUE AND CORRECT._____
APPLICANT'S SIGNATURE_____
DATE_____
PROPERTY OWNER'S SIGNATURE_____
DATE

DATE FILED _____ RECEIPT NO. _____ PAID _____ RECEIVED BY _____

PLEASE ANSWER THE FOLLOWING QUESTIONS:

- 1. What is your text amendment request (specifically identify section(s) of the text proposed for change and outline the change proposed by this application).**

SUPPORTIVE COMMENT: Explain how the proposed text amendment would provide for meeting the public necessity, convenience, general welfare and good zoning practice. Additional supportive comment or material may be attached.

FILING REQUIREMENTS

In order for this application to be processed without delay, the application must include all of the following materials. To ensure that your application package is complete, please check-off the boxes next to the required application materials.

- ☐ Completed application form
- ☐ An Ownership Disclosure is required if the property is owned by a corporation, partnership, trust, or non-profit. The disclosure must reveal the agent for service of process or an officer of the ownership entity. The disclosure must list the names and addresses of all the owners and you must attach a copy of the current corporate articles, partnership agreement, trust, or non-profit document, as applicable.
- ☐ Filing Fee - \$5,992
- ☐ Environmental Information Form and Fee

AFFIDAVIT

STATE OF CALIFORNIA
CITY OF ARCADIA
COUNTY OF LOS ANGELES

I, _____ hereby certify that the
(print name)

attached list contains the names and addresses of all persons to whom all property is assessed as they appear on the latest available equalized assessment roll of the County of Los Angeles, within the area described on the attached application and for the required distance of notification from the exterior boundaries of the property described on the attached application. I also certify that the subject site described on the attached application contains no illegal lot splits or other divisions of land not specifically authorized by the City of Arcadia.

I certify under penalty of perjury that the foregoing is true and correct.

Signature: _____

Date: _____



FILE NO. _____

ENVIRONMENTAL INFORMATION FORM

PLEASE COMPLETE THE FOLLOWING INFORMATION (REQUIRED) :

PROJECT LOCATION _____

APPLICANT(S) NAME _____

MAILING ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

E-MAIL ADDRESS _____

TELEPHONE NO. _____

PROPERTY OWNER(S) NAME _____

MAILING ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

E-MAIL ADDRESS _____

TELEPHONE NO. _____

LIST AND DESCRIBE ANY OTHER RELATED PERMITS AND OTHER PUBLIC APPROVALS REQUIRED FOR THIS PROJECT INCLUDING THOSE REQUIRED BY CITY, REGIONAL, STATE AND FEDERAL AGENCIES:

ZONING: _____ **GENERAL PLAN DESIGNATION:** _____

*****PLEASE COMPLETE THE PROJECT DESCRIPTION INFORMATION ON PAGE 2*****

THE APPLICANT AND PROPERTY OWNER HEREBY DECLARE UNDER PENALTY OF PERJURY THAT ALL THE INFORMATION SUBMITTED FOR THIS APPLICATION IS TRUE AND CORRECT.

APPLICANT'S SIGNATURE

DATE

PROPERTY OWNER'S SIGNATURE

DATE

DATE FILED _____ **RECEIPT NO.** _____ **PAID** _____ **RECEIVED BY** _____

PROJECT DESCRIPTION:

1. Proposed use of site (project description):

2. Site Size: _____ Sq. Ft. _____ Acre(s) _____

3. Square footage per building:

4. Number of floors of construction:

5. Amount of off-street parking provided:

6. Proposed scheduling of project:

7. Associated projects:

8. Anticipated incremental development:

9. If residential, include the number of units, schedule of unit sizes, range of sale prices or rents, and type of household sizes expected:

10. If commercial, indicate the type, i.e. neighborhood, city or regionally oriented, square footage of sales area, and loading facilities, hours of operation:

11. If industrial, indicate type, estimated employment per shift, and loading facilities:

12. If institutional, indicate the major function, estimated employment per shift, estimated occupancy, loading facilities, and community benefits to be derived from the project:

13. If the project involves a variance, conditional use permit or zoning application, state this and indicate clearly why the application is required:

14. Are the following items applicable to the project or its effects? Discuss below all items checked yes (attach additional sheets as necessary).

YES NO

- | | | | |
|--------------------------|--------------------------|-----|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 21. | Change in existing features of any hills, or substantial alteration of ground contours. |
| <input type="checkbox"/> | <input type="checkbox"/> | 22. | Change in scenic views or vistas from existing residential areas or public lands or roads. |
| <input type="checkbox"/> | <input type="checkbox"/> | 23. | Change in pattern, scale or character of general area of project. |
| <input type="checkbox"/> | <input type="checkbox"/> | 24. | Significant amounts of solid waste or litter. |
| <input type="checkbox"/> | <input type="checkbox"/> | 25. | Change in dust, ash, smoke, fumes or odors in vicinity. |
| <input type="checkbox"/> | <input type="checkbox"/> | 26. | Change in ground water quality or quantity, or alteration of existing drainage patterns. |
| <input type="checkbox"/> | <input type="checkbox"/> | 27. | Substantial change in existing noise or vibration levels in the vicinity. |
| <input type="checkbox"/> | <input type="checkbox"/> | 28. | Is site on filled land or on any slopes of 10 percent or more? |
| <input type="checkbox"/> | <input type="checkbox"/> | 29. | Use or disposal of potentially hazardous materials, such as toxic substances, flammable or explosives |
| <input type="checkbox"/> | <input type="checkbox"/> | 30. | Substantial change in demand for municipal services (police, fire, water, sewage, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | 31. | Substantial increase in fossil fuel consumption (electricity, oil, natural gas, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | 32. | Relationship to a larger project or series of projects |
| <input type="checkbox"/> | <input type="checkbox"/> | 33. | Has a prior environmental impact report been prepared for a program, plan, policy or ordinance consistent with this project? |
| <input type="checkbox"/> | <input type="checkbox"/> | 34. | If you answered YES to question no. 33, may this project cause significant effects on the environment that were not examined in the prior EIR? |

Environmental Setting

35. Describe (on a separate sheet) the project site as it exists before the project, including information on topography, soil stability, plants and animals, any cultural, historical or scenic aspects. Describe any existing structures on the site, and the use of the structures. Attach photographs of the site. (Snapshots or Polaroid photos will be accepted.)
36. Describe (on a separate sheet) the surrounding properties, including information on plants, animals, any cultural, historical or scenic aspects. Indicate the type of land uses (residential, commercial, etc.), intensity of land use (one-family, apartment houses, shops, department stores, etc.), and scale of development (height, frontage, set-backs, rear yards, etc.). Attach photographs of the vicinity. Snapshots or Polaroid photos will be accepted.

Certification

I hereby certify that the statements furnished above and in the attached exhibits present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements, and information presented are true and correct to the best of my knowledge and belief.

Date _____

(Signature)

For _____

PLEASE NOTE

Pursuant to California Fish and Game Code Section 711.4, the following filing fees may be imposed, as applicable, by the California Department of Fish and Game to defray the costs of managing and protecting California's vast fish and wildlife resources. For further information, see http://www.dfg.ca.gov/habcon.ceqa_changes.html

Related Fees

- Certified Regulatory Program - \$1,401.75
- Negative Declarations and Mitigated Negative Declaration - \$2,968.75
- Environmental Impact Report - \$4,123.50