



City of Del Mar
 Department of Planning and Community Development
 1050 Camino del Mar
 Del Mar, CA 92014

Phone: 858-755-9313
 Email: planning@delmar.ca.us
 Counter Hours: M&W 1:00pm - 5:30pm
 Web: www.delmar.ca.us

UNIFORM DEVELOPMENT APPLICATION

PROPERTY INFORMATION:

Property Address:			
Assessor Parcel No. (APN):			
Zoning:		Overlay Zone(s):	
Work proposed in the public right-of-way: <input type="checkbox"/> No <input type="checkbox"/> Yes, note location:			

OWNER / APPLICANT:

Name(s):			
Mailing Address:			
City:		State:	
Phone:		Email:	

AUTHORIZED REPRESENTATIVE: (LETTER OF AUTHORIZATION REQUIRED)

Name:			
Type:	<input type="checkbox"/> Architect/Designer <input type="checkbox"/> Contractor <input type="checkbox"/> Consultant <input type="checkbox"/> Engineer <input type="checkbox"/> Other:		
Del Mar Business License No.:			
Mailing Address:			
City:		State:	
Phone:		Email:	

PROJECT DESCRIPTION (BRIEF):

PERMITS, ACTIONS AND FEES TO BE PREPARED BY STAFF ONLY:

<u>Permits:</u>	<u>Fee</u>	<u>Actions:</u>	<u>Fee</u>
<input type="checkbox"/> ADR Administrative Design Review	_____	<input type="checkbox"/> ADU Accessory Dwelling Unit	_____
<input type="checkbox"/> Minor <input type="checkbox"/> Major		<input type="checkbox"/> COC Certificate of Compliance only	_____
<input type="checkbox"/> ASR Administrative Sign Review	_____	<input type="checkbox"/> CPP Citizens' Participation Program	_____
<input type="checkbox"/> BA Boundary Adjustment with COC	_____	<input type="checkbox"/> D Zoning Determination of Allowable Use	_____
<input type="checkbox"/> BAN Banner Permit	_____	<input type="checkbox"/> DA Development Agreement	_____
<input type="checkbox"/> BP Charitable Bingo Game Permit	_____	<input type="checkbox"/> DA <input type="checkbox"/> Amendment	
<input type="checkbox"/> CDP Coastal Development Permit	_____	<input type="checkbox"/> DSC Determination of Substantial Conformance	_____
<input type="checkbox"/> CUP Conditional Use Permit	_____	<input type="checkbox"/> EA Environmental Assessment	_____
<input type="checkbox"/> CUP <input type="checkbox"/> Modification		<input type="checkbox"/> Initial Study <input type="checkbox"/> EIR	
<input type="checkbox"/> DP Demo Permit	_____	<input type="checkbox"/> GPA General Plan Amendment	_____
<input type="checkbox"/> DRB Design Review Permit	_____	<input type="checkbox"/> HZ Horizontal Zoning Relief	_____
<input type="checkbox"/> < 500 sf <input type="checkbox"/> > 500 sf		<input type="checkbox"/> I Zoning Code Interpretation	_____
<input type="checkbox"/> Misc: _____		<input type="checkbox"/> ILPF In-Lieu Parking Fee Program	_____
<input type="checkbox"/> DRB-S Design Review Sign Permit	_____	<input type="checkbox"/> LCPA Local Coastal Program Amendment	_____
<input type="checkbox"/> EP Encroachment Permit	_____	<input type="checkbox"/> OPP Off-Hours Public Parking	_____
<input type="checkbox"/> Short-term <input type="checkbox"/> Long-term		<input type="checkbox"/> PLZ Plaza Tenant Improvement Review	_____
<input type="checkbox"/> ESP Emergency Shelter Permit	_____	<input type="checkbox"/> SP Specific Plan	_____
<input type="checkbox"/> FDP Floodplain Development Permit	_____	<input type="checkbox"/> SP <input type="checkbox"/> Amendment	
<input type="checkbox"/> Without hardship relief		<input type="checkbox"/> SV Street Vacation	_____
<input type="checkbox"/> With hardship relief		<input type="checkbox"/> TPM Tentative Parcel Map	_____
<input type="checkbox"/> IB Emergency Beach Barrier	_____	<input type="checkbox"/> ≤ 4 New Lots <input type="checkbox"/> Condo Conversion	
<input type="checkbox"/> LC Land Conservation Permit	_____	<input type="checkbox"/> TTM Tentative Tract Map	_____
<input type="checkbox"/> LC <input type="checkbox"/> Administrative		<input type="checkbox"/> ≥ 5 New Lots <input type="checkbox"/> Condo Conversion	
<input type="checkbox"/> MV Mobile Vending Operations Permit	_____	<input type="checkbox"/> TVS Trees, Scenic Views and Sunlight	_____
<input type="checkbox"/> NOI Notice of Intent	_____	<input type="checkbox"/> V Variance	_____
<input type="checkbox"/> NRP News Rack Permit	_____	<input type="checkbox"/> ZA Zoning Code Amendment	_____
<input type="checkbox"/> P Parking Permit	_____	<input type="checkbox"/> Other: _____	_____
<input type="checkbox"/> Off-site <input type="checkbox"/> Shared			
<input type="checkbox"/> RDP Redevelopment Permit	_____	Related Fees:	
<input type="checkbox"/> SEC Sign Encroachment Permit	_____	<input type="checkbox"/> Community (General) Plan/Zoning Update	_____
<input type="checkbox"/> SCP Sidewalk Café Permit	_____	<input type="checkbox"/> Public Notice	_____
<input type="checkbox"/> SPP Shoreline Protection Permit	_____	<input type="checkbox"/> Engineering Review Fees	_____
<input type="checkbox"/> SSP Seawall Setback Permit	_____		
<input type="checkbox"/> TRP Tree Removal Permit	_____	TOTAL FEES DUE:	
<input type="checkbox"/> TUP Temporary Use Permit	_____		
		\$ _____	

Primary File No.: _____

Additional File Nos.: _____

PLANNING DEPARTMENT – UNIFORM DEVELOPMENT APPLICATION
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1) Is development proposed on a vacant parcel? No Yes

2) How many dwellings are currently on the parcel? _____

3) Will the proposed project result in NEW or a CHANGE to the following:

Site floor area ratio (FAR):	<input type="checkbox"/> Yes <input type="checkbox"/> No	Fencing / walls:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Roof structures:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Grading (outside footprint):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exterior walls:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Foundation:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Use of the site / structure:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hardscape / paving:	<input type="checkbox"/> Yes <input type="checkbox"/> No

4) Will the proposed project result in NEW or REHABILITATED landscaping:

New Landscaping:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Landscaped Area: _____ S.F.
Rehabilitated Landscaping:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Landscaped Area: _____ S.F.
Existing to Remain Untouched:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Landscaped Area: _____ S.F.

5) Based on the information provided above, please provide a detailed project description and explain the scope of the entire project, including the type of use and structure(s) proposed, number of stories, building materials, grading, fencing and/or hardscape improvements (attach additional sheets if necessary).

6) Is the parcel involved in any current code enforcement cases?

No Yes, describe violation: _____

7) To the best of your knowledge, answer the following supplemental questions (staff can assist if needed):

Is the parcel located within the appeal jurisdiction of the California Coastal Commission?

No Yes

Is the parcel located in/adjacent to a wetland, floodplain, beach, wildland urban area, or other sensitive area?

No Yes, describe location: _____

Does the project involve maintaining any existing structural or use non-conformities on the site such as setbacks, multiple accessory structures, floor area, insufficient parking, etc.? If so, please describe:

PROPERTY OWNER AND AUTHORIZED REPRESENTATIVE CERTIFICATIONS

I certify that I am presently the legal owner of the above-described property. I, the undersigned owner (and, when applicable, the authorized agent acting on behalf of the owner) of the property herein described, hereby make application for approval of the plans submitted and made a part of this application in accordance with the provisions of the City of Del Mar ordinances. I understand that during review of the project, additional permits and/or actions may be required. I hereby certify that the information given is true and correct to the best of my knowledge and belief.

I understand that the requested approval is for my benefit (or that of my principal). Therefore, if the City of Del Mar grants the approval, with or without conditions, and that action is challenged by a third party, I will be responsible for defending against this challenge. I, therefore, agree to accept this responsibility for defense at the request of the City and also agree to defend, indemnify and hold the City of Del Mar harmless from any costs, claims or liabilities arising from the approval, including, without limitation, any award of attorney’s fees that might result from the third party challenge.

I acknowledge that plan sets may be reproduced and distributed to City representatives and members of the public for project review purposes only.

I grant permission to the City to conduct site visits necessary to investigate the proposed project.

PROPERTY OWNER SIGNATURE PROPERTY OWNER NAME (PRINT) DATE

REPRESENTATIVE SIGNATURE REPRESENTATIVE NAME (PRINT) DATE



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Trees, Scenic Views and Sunlight Questionnaire

TREE / VEGETATION – OWNER’S PROPERTY INFORMATION:

Owners Name:

Site Address:

Mailing Address:

Assessor’s Parcel Number:

Zone:

Overlay Zone:

Approximate distance from the applicant’s property:

The applicant shall complete the following information. No application will be deemed complete unless all sections are answered in full. Attach additional pages if necessary.

1. Describe the **Primary Living Area** of your residence. Describe the scenic view that is being obstructed and the specific tree/vegetation that is causing the obstruction. If the tree/vegetation is obstructing sunlight from reaching the Primary Living Area or solar energy system of the residence, please describe:

2. Explain the steps you have taken to resolve this matter with the tree/vegetation owner. Please provide documentation of these actions. [Note: Early neighbor consultation and attempts to resolve the problem using Mediation Services are required prior to any consideration by the Planning Commission.]

3. The Planning Commission will only consider applications regarding scenic views and/or sunlight access that existed at the time you purchased or occupied the subject property or in the last ten years, whichever is shorter. Please describe all (required) evidence you have submitted to document the date and extent of the unobstructed view or amount of sunlight reaching your Primary Living Area or solar energy system. Also, please provide evidence that documents the date of property purchase.



City of Del Mar Planning Department Submittal Checklist

TSVS – TREES, SCENIC VIEWS, AND SUNLIGHT

The following list of documents is exhaustive, and the items noted below are typically required as part of an application. **Planning Department staff can assist you in determining which items will be required for your submittal** (staff highly recommend a pre-application conference be scheduled with staff to review the project submittal requirements). **Please note that all applications materials must be submitted in digital format.**

Submittal Requirements

- Uniform Development Application – *applicant signature required*
- Supplemental Questionnaire – *applicant signature required*
- Floor Plan of the Applicant’s Primary Living Area (PLA)
The plan must depict the direction of the Scenic Views and/or floor plan and building elevation plans depicting the source of Sunlight (e.g., windows, doors, or other transparent surfaces)
- Photographic Evidence
Photos must depict pre-existing scenic views and/or access to sunlight from the Applicant’s Primary Living Area (PLA) and must have been taken after the date the Applicant acquired Applicant’s property or within ten (10) years before the Application submittal, whichever is sooner. In addition, photos must also depict the alleged obstruction of scenic views and/or sunlight – photographs must have been taken on or around the time of Application submittal.
- Shade Study
Must demonstrate the amount and duration of the alleged Obstruction of Sunlight from a PLA or Solar Energy System (for Applications alleging Obstruction of Sunlight only)
- Tree Survey of the Subject Tree(s)
Survey must be signed and/or stamped by a Certified Arborist providing the following information, which may be subject to review and approval by the City’s Arborist:
 - Species, common name and variety of the Subject Tree(s);
 - Physical measurements of the Subject Tree (s) (e.g., height and trunk circumference at two (2) feet above the natural grade);
 - Approximate age of the Subject Tree (s);
 - Overall health and structural condition of the Subject Tree (s);
 - Life expectancy and suitability for preservation of the Subject Tree (s);
 - Desired Restorative Action, anticipated impact of such Restorative Action on the Subject Tree (s), and recommended maintenance activities (if any) for the long-term preservation of Applicant’s Scenic Views and/or Sunlight; and
 - Other recommendations for management of the Subject Tree(s) and/or pertinent information related to the Subject Tree(s)
- Proof of Mediation Efforts
In accordance with DMMC 23.51.040(B), the view applicant shall also submit documentation to the City demonstrating the following:
 - Applicant contacted the Tree Owner and made reasonable efforts to resolve the dispute alleging obstruction of Scenic Views and/or Sunlight, including, at a minimum, offering to engage in mediation.
 - Proof of Applicant’s efforts to meet and confer with the Tree Owner shall include:

- Documented attempts offering to participate in mediation (via certified mail, e-mail exchanges, text messages, etc.);
- An explanation of whether such offers to participate in mediation were declined in writing by the Tree Owner, or if mediation was unsuccessful between the parties.

Applicant Certification

I certify that the attached application contains the items required. I understand that additional information may be needed to process my application and if any of the items are missing or found deficient, the application will be deemed incomplete, may be rejected, or may constitute grounds for revocation of any permit issued.

Signature (View Applicant)

Date

Print Name