



City of Fontana Planning Division

(909) 350-6717

Application For Building Relocation

For Division Use Only

B.R. #: _____ Submittal Date: _____
Contractor #: _____ Related File #: _____
Computer I.D. #: _____ Received By: _____

Applicant Information

Property Owner _____ Phone: _____
Mailing Address: _____
Applicant: _____ Phone: _____
Mailing Address: _____
E-Mail Address: _____
Type of Building To Be Moved: _____
Proposed Location of Building: _____
Present Location of Building: _____
Existing General Plan Designation: _____ Zoning: _____

Property Owner(s) Affidavit

I/We, _____
(Please Print Name(s))

Being duly sworn, depose and say that I am/ We are the owner(s) of the entire property involved in this application and I/We hereby give permission for the filing of this application.

(Signature(s)) (Printed Name(s))

The property Owners Affidavit MAY NOT be signed by an agent or attorney but MUST be signed by the owner of the property, or owners of a corporation authorized to sign official documents for the corporation, before a Notary Public. **(Please attach Notary Acknowledgment)**

Applicant's Affidavit

I/We have familiarized myself/ourselves with requirements of the City Planning Division with respect to preparing and filing this application and that the foregoing statements and answers herein contained are in all respects true and correct to the best of my/our knowledge and belief. I/We understand that this application represents a preliminary submittal and will not be recognized as "Officially Filed" until a "Notice of Official Filing" is issued by the Planning Division.

Applicant's Signature _____ Date: _____
Type/Print Name: _____

PLANNING DIVISION

SUBMITTAL REQUIREMENTS FOR BUILDING RELOCATION

The following items are required to be submitted at the time of application. However, prior to actual filing all applicants are encouraged to contact the Planning and Building and Safety Divisions to schedule a pre-filing meeting at which time assistance can be provided regarding form and content of submittals as well as information regarding City ordinances and policies.

- A. Site Plan (10 copies) fully dimensioned and including the following:
 - 1. Scale, north arrow, and vicinity map;
 - 2. Location of all property lines, dedicated right-of-ways, and easements on the site. If no easements, state so on plans;
 - 3. Location, size, shape, height and use of all other structures on the site including buildings, curbs and walls;
 - 4. All paved areas, including parking areas, driveways and walks;
 - 5. Exterior lighting (for commercial and industrial projects only);
 - 6. Locations of signs and other graphics (for commercial and industrial projects only);
 - 7. Roof lines (for commercial and industrial projects only);

- B. Elevations (10 copies, plus one colored) showing the exterior appearance of each building from each direction. Typical may be used when more than one structure is of the same design. (For a single-family residence, color photograph of the structure may be used instead of the 10 copies of elevations.)

- C. Floor Plan (10 copies) showing the dimensions and use of each room as well as the location of all windows and doors.

- D. Preliminary grading plan (10 copies) showing the existing topography and proposed grades on site boundaries. Also, any existing trees with trunks greater than four inches in diameter must be shown on this plan. (For commercial and industrial projects only.)

- E. Preliminary landscape plan (10 copies) to include (For commercial and industrial projects only):
 - 1. Name list of typical plants materials.
 - 2. Size range of plant materials.
 - 3. General plant locations.

Site plans, preliminary grading plans, preliminary landscape plan, elevations and floor plans described in A, B, C, D and E above must contain a high degree of clarity. They should be submitted on one or more sheets of paper measure at least 17" x 22" but should not exceed 30" x 36". The required scale for the site plan is 30 feet to the inch. Floor plans and elevations may use typical architectural scale. To adequately depict the required information, more than one sheet may be necessary.

The plans should be stapled together at the left margin and compiled into ten (10) sets in the following order:

- ✓ Site Plan
- ✓ Preliminary Grading Plan
- ✓ Preliminary Landscape Plan
- ✓ Elevations
- ✓ Floor Plans

The ten sets of plans should then be folded 8 ½" x 11".

F. Filing Fee



CITY OF FONTANA
 Planning Division
 8353 Sierra Avenue, Fontana CA 92335
 (909) 350-7640

UNIFORM APPLICATION PART 1

GENERAL INFORMATION (Print or Type)

Name of Proposed Project:	Staff Use Only
Project Location:	Master Case No.:
Assessor's Parcel No.(s):	Related Case No.:
Applicant's Name:	PAM No.:
Address:	Phone:
Legal Property Owner's Name (if different from above):	Mobile:
Address:	Email:

TYPE OF REVIEW REQUESTED (Please Check All Applicable Boxes)

- | | | |
|---|---|--|
| <input type="checkbox"/> Agreements
<input type="checkbox"/> Annexations
<input type="checkbox"/> Adult Oriented Business
<input type="checkbox"/> Appeal
<input type="checkbox"/> Administrative Site Plan
<input type="checkbox"/> Building Relocation
<input type="checkbox"/> City Council Interpretation
<input type="checkbox"/> Conditional Use Permit
<input type="checkbox"/> Density Bonus
<input type="checkbox"/> Director's Determination
<input type="checkbox"/> Design Review Project | <input type="checkbox"/> Design Review Sign
<input type="checkbox"/> General Plan Amendment
<input type="checkbox"/> Home Occupation Permit
<input type="checkbox"/> Lot Line Adjustment
<input type="checkbox"/> Municipal Code Amendment
<input type="checkbox"/> Minor Use Permit
<input type="checkbox"/> Pre-Application Meeting Request
<input type="checkbox"/> Planning Commission Interpretation
<input type="checkbox"/> Specific Plan
<input type="checkbox"/> Tentative Parcel Map
<input type="checkbox"/> Tentative Tract Map | <input type="checkbox"/> Temporary Use Permit
<input type="checkbox"/> Variance
<input type="checkbox"/> Zone Change
<input type="checkbox"/> Zoning/Re-Build Letter
<input type="checkbox"/> Subtype: _____

<input type="checkbox"/> Other: _____

_____ |
|---|---|--|

PROJECT DESCRIPTION

Detailed Description of Proposed Project (Attach Additional Sheets if Necessary):

OWNER CERTIFICATION

I certify that I am presently the legal owner of the above-described property. Further, I acknowledge the filing of this application and certify that all of the above information is true and correct. (If the undersigned is different from the legal property owner, a notarized letter of authorization signed by the legal property owner must accompany this form.)

Signature:	Date:
Print Name and Title:	

Date/Time Received	Received By	Receipt No.
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UNIFORM APPLICATION PART 2

THE FOLLOWING INFORMATION MUST BE COMPLETED AND SUBMITTED WITH NEW APPLICATIONS:

(Print or Type)

Contact Person (Please specify Name, Company, Title):

Staff Use Only

Master Case No:

Address:

Phone:

Mobile:

Email:

Additional Contact Person (Please specify Name, Company, Title):

Address:

Phone:

Mobile:

Email:

Architect:

Address:

Phone:

Mobile:

Email:

Engineer:

Address:

Phone:

Mobile:

Email:

Landscape Architect:

Address:

Phone:

Mobile:

Email:

Payer of Fees:

Address:

Phone:

Mobile:

Email: