



**DEPARTMENT OF RESOURCE MANAGEMENT**  
**Planning Services Division**  
675 Texas Street, Suite 5500, Fairfield, CA 94533

(707) 784-6765 Phone  
(707) 784-4805 Fax  
[www.solanocounty.com](http://www.solanocounty.com)

Bill Emlen, Director  
Michael Yankovich, Planning Manager

## **LAND USE PERMIT**

Land use permits allow the County to evaluate compatibility of businesses or developments with the environment, surrounding community, applicable regulations and Solano County General Plan. Solano County land use permits are approved by decision makers such as Zoning Administrator or Planning Commission. Processing time is approximately 3-6 months.

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### **THE APPLICATION PACKET INCLUDES THE FOLLOWING:**

- SUBMITTAL REQUIREMENTS
- APPLICATION FORM
- CONTACT INFORMATION
- FREQUENTLY ASKED QUESTIONS

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For assistance call (707) 784-6765 and ask for the Planner on Duty. Access the Solano County General Plan, Zoning Code and property zoning information online at [www.solanocounty.com](http://www.solanocounty.com). Click on the Department of Resource Management then Planning Services.

## SUBMITTAL REQUIREMENTS:

- 1 copy of pre-application notes, if applicable.
- 1 copy of completed application form signed by applicant and owner.
- 1 copy of an Assessor's Parcel Map. Outline the subject site in red.

Available at the Assessor's Department located at the County Administration Center (2<sup>nd</sup> floor) or online via [www.solanocounty.com](http://www.solanocounty.com). Click on County's Assessor Recorder Department webpage.

- Development Plans - 5 copies of the Site Plan full sized folded to 8.5" x 11"
- 1 copy of each plan reduced to 8.5" x 11"
- 1 set of photographs of the site and relation to surrounding areas. Minimum of 4 photos.
- Electronic copies of all materials in CD format (pdf or jpeg).
- Filing Fee. Please consult the fee schedule or contact Planning Services at (707) 784-6765 for appropriate filing fees. Cash, ATM/Debit or check made payable to Solano County are accepted.



**DEPARTMENT OF RESOURCE MANAGEMENT  
PLANNING SERVICES APPLICATION FORM**

(707) 784-6765 Phone  
(707) 784-4805 Fax

675 Texas Street Suite 5500, Fairfield, CA 94533

www.solanocounty.com

- Application Type:    New             Extension (maps)             Minor Revision             Map Modification
- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Administrative Permit (AD)    | <input type="checkbox"/> Minor Use Permit (MU)          | <input type="checkbox"/> Sign Permit (SGN)        |
| <input type="checkbox"/> Architectural Review (AR)     | <input type="checkbox"/> Mobilehome Storage Permit (MH) | <input type="checkbox"/> Use Permit (U)           |
| <input type="checkbox"/> General Plan Amendment (G)    | <input type="checkbox"/> Mutual Agreement (MA)          | <input type="checkbox"/> Variance (V)             |
| <input type="checkbox"/> Major Subdivision (S)         | <input type="checkbox"/> Performance Standards (PS)     | <input type="checkbox"/> Waiver (WA)              |
| <input type="checkbox"/> Marsh Development Permit (MD) | <input type="checkbox"/> Policy Plan Overlay (PP)       | <input type="checkbox"/> Zone Text Amendment (ZT) |
| <input type="checkbox"/> Minor Subdivision (MS)        | <input type="checkbox"/> Rezone (Z)                     |   |

**FOR OFFICE USE ONLY**

Application No: \_\_\_\_\_ MR# \_\_\_\_\_ Hrg: AD ZA PC BOS \_\_\_\_\_ Date Filed: \_\_\_\_\_ PInr: \_\_\_\_\_

**Project Name:** \_\_\_\_\_

**Subject Site Information**

Site Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Assessor's Parcel Number (s): \_\_\_\_\_ Size (sq. ft/acre): \_\_\_\_\_

Preferred Property Access by Staff:    OK to access    Call applicant before access    Call owner before access

**Contact Information**

**Property Owner Name:** \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Architect/Engineer/Land Surveyor Company Name:** \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Applicant/Company Name:** \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Other Contacts:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_



### 3 Williamson Act Contract

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A. Is any portion of the property under Williamson Act Contract?  Yes  No

If yes, Contract No. \_\_\_\_\_ please provide a copy.

If yes, has a Notice of Non-Renewal been filed?  Yes  No

*If yes, please provide a copy.*

B. Are there any agricultural conservation, open space or similar easements affecting the use of the project site?  
(such easements do not include Williamson Act contracts)

Yes  No *if yes, please list and provide a copy.*

### 4 Additional Background Information

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A. Does the proposal propose the demolition or alteration of any existing structures on the subject site?

Yes  No *If yes, please describe in the project narrative.*

B. List any permits that are required from Solano County and/or other local, state, federal agencies (i.e. building permit, Department of Fish and Game permits, etc.)

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C. List any known previously approved projects located on the property (i.e. Use Permit, Parcel Maps, etc). Identify the project name, type of project and date of approval.

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D. List any known professionally prepared reports for the project (i.e. biological survey, traffic study, geologic, hazardous materials, etc.)

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E. Does the project involve Housing and Urban Development (HUD) federal funding?  Yes  No  
Is HUD funding anticipated?  Yes  No

If yes, indicate the type of funding (i.e. CDBG grant, HOME, Investment Partnership Program, etc), funding amount, whether awarded or application pending and fiscal year of award or application request.

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H. Is this part of a larger project? If yes, please explain.  Yes  No

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## 5 Existing Conditions

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Describe in general the project site and surrounding properties as they presently exist; including but not limited to, information on existing land uses, unique physical and topographic features, soil stability, plants and animals, cultural, historical, or scenic aspects, and any other information which would assist the Department in understanding the project's environmental setting. Clear, representative color photographs may be submitted to show the project area. Draw in property boundaries on the photographs.

A. Project site:

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B. Surrounding properties:

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C. Existing use of land:

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D. Describe number and type of existing structures:

	Type/Number	Square Feet
Residential		
Agricultural		
Commercial		
Industrial		
Other		

E. Describe existing vegetation on site, including number and type of existing trees.

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F. If in agricultural use, describe type of use or crop (cattle, sheep, hay, vegetables, fruit, etc).

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G. Slope of property:

Flat or sloping (0 - 6% slope) \_\_\_\_\_ acres  
 Rolling (7 - 15% slope) \_\_\_\_\_ acres  
 Hilly (16 - 24% slope) \_\_\_\_\_ acres  
 Steep (> 24% slope) \_\_\_\_\_ acres

H. Describe existing drainage conditions on site. Indicate direction of surface flows, adjacent parcels affected.

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I. Describe land uses on adjacent parcels (specify types of crops if agricultural).

North		South	
East		West	

J. Distance to nearest residence(s) or other adjacent use(s): \_\_\_\_\_ (ft/mi)

K. Describe and indicate location of any power lines, water mains, pipelines or other transmission lines which are located on or adjacent to the property.

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L. Describe number and location of natural creeks or water courses through or adjacent to the property. Specify names (if any). Indicate whether ephemeral (brief flows following rains), intermittent (seasonal flows during wet season), or perennial (year-round flows).

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M. Describe number and location of man-made drainage channels through or adjacent to the property. Specify names, if any.

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N. Identify and describe any on-site or adjacent marshes, wetlands, vernal pools, wet meadows, riparian (i.e. dependant on water bodies) vegetation, etc.:

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O. Are there any unique, sensitive, rare, threatened, or endangered animals, plants, or habitats on the project site or located in close proximity which may be affected by the project?

Yes \_\_\_\_\_ No \_\_\_\_\_ Don't Know \_\_\_\_\_ If yes, please list:

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P. Describe existing vehicle access(s) to property:

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Q. List and describe the nature and location of all existing easements serving or affecting the property, including access, utility, and other public or private easements (see deed or recent preliminary title report).

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R. List and describe any freestanding and attached signage on the property. Describe the dimensions, area and height. Include the location on the site plan.

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## **6 Proposed Changes to the Site**

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A. Topography and grading (attach copy of grading plan showing existing and proposed topography and drainage patterns.)

i. Percent of site previously graded: \_\_\_\_\_%.

ii. Project area (area to be graded or otherwise disturbed): \_\_\_\_\_sq. ft./acres.

iii. Estimate amount of soil to be moved (cut and/or fill):

\_\_\_\_\_ Less than 50 cubic yds<sup>3</sup> \_\_\_\_\_ More than 50 cubic yds<sup>3</sup> \_\_\_\_\_ More than 1000 cubic yds<sup>3</sup>

iv. Estimate amount of soil to be:

Imported \_\_\_\_\_yd<sup>3</sup> Exported \_\_\_\_\_yd<sup>3</sup> Used on site \_\_\_\_\_yd<sup>3</sup>.

B. Number, size and type of trees, and type and quantity of vegetation to be removed. ( size of trees = diameter at 4ft. above grade)

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C. Number, type and use of existing structures to be removed, and removal schedule:

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D. Describe proposed fencing and/or visual screening (landscaping):

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E. Proposed access to project site (road name, driveway location, etc.):

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F. Proposed source and method of water supply:

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G. Proposed method of sewage disposal (specify agency if public sewer):

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H. Provisions for solid/hazardous waste disposal (specify company or agency if applicable):

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I. List hazardous materials or wastes handled on-site:

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J. Duration of construction and/or anticipated phasing:

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K. Will the proposed use be affected by or sensitive to existing noise in the vicinity? If so, describe source (e.g. freeway, industrial) and distance to noise source.

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## **7 Proposed Site Utilization**

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### **A. RESIDENTIAL PROJECTS**

1. Number of structures: Single Family: \_\_\_\_\_ Multi-family: \_\_\_\_\_ Accessory: \_\_\_\_\_

If multi-family, number of units: \_\_\_\_\_ Maximum height: \_\_\_\_\_

2. Signage: Freestanding: \_\_\_\_\_ Dimension(s): \_\_\_\_\_ Area: \_\_\_\_\_ (sq.ft)  
Attached/Wall: \_\_\_\_\_ Dimensions(s): \_\_\_\_\_ Area: \_\_\_\_\_ (sq.ft)

### **B. NON-RESIDENTIAL PROJECTS (Commercial, Industrial, Agricultural, Other)**

1. Lot coverage:

Building coverage: \_\_\_\_\_ (sq.ft) Surfaced area: \_\_\_\_\_ (sq.ft)

Landscaped or open space: \_\_\_\_\_ (sq.ft)

2. Total floor area: \_\_\_\_\_ (sq.ft)

3. Number of stories: \_\_\_\_\_ Maximum height: \_\_\_\_\_ (ft.)

4. Proposed hours of operation:

Days: \_\_\_\_\_

From: \_\_\_\_\_ a.m./p.m to \_\_\_\_\_ a.m./p.m

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Year round:  Yes  No Months of operation: from \_\_\_\_\_ through \_\_\_\_\_

5. Proposed construction schedule:

Daily construction schedule: from \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m.

Days of construction: \_\_\_\_\_

6. Will this project be constructed in phases? Describe:

\_\_\_\_\_  
\_\_\_\_\_

7. Maximum number of people using facilities:

At any one time: \_\_\_\_\_ Throughout day: \_\_\_\_\_

8. Total number of employees: \_\_\_\_\_

Expected maximum number of employees on site: \_\_\_\_\_

During a shift: \_\_\_\_\_ During day: \_\_\_\_\_

9. Number of parking spaces proposed: \_\_\_\_\_

10. Maximum number of vehicles expected to arrive at site:

At any one time: \_\_\_\_\_ day: \_\_\_\_\_

11. Radius of service area: \_\_\_\_\_

12. Type of loading/unloading facilities:

\_\_\_\_\_  
\_\_\_\_\_

13. Type of exterior lighting proposed:

\_\_\_\_\_  
\_\_\_\_\_

14. Describe all anticipated noise-generating operations, vehicles or equipment on-site.

\_\_\_\_\_  
\_\_\_\_\_

15. Describe all proposed uses which may emit odors detectable on or off-site.

\_\_\_\_\_  
\_\_\_\_\_

16. Describe all proposed freestanding and wall signage. Include the dimensions, area and height.

\_\_\_\_\_  
\_\_\_\_\_

## 8 Environmental Checklist

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Indicate the following items applicable to the project or its effects. Discuss in Section 9 all items checked "Yes" or "Maybe". **Attach additional sheets as necessary.**

	YES	MAYBE	NO
A. Change in existing natural features including any bays, tidelands, lakes, streams, beaches, natural landforms or vegetation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Change in scenic views or vistas from existing residential areas, public lands or roads.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Change in scale, pattern or character of general area of project.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Increased amounts of solid waste or litter.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Dust, ash, smoke, fumes or odors on site or in vicinity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Change in ground water quality or quantity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Alteration of existing drainage patterns, or change in surface water quantity or quality.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Change in existing noise or vibration levels.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Construction on filled land or construction or grading on slopes of 25% or more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. Storage, use or disposal of materials potentially hazardous to man or wildlife, including gasoline and diesel fuel. (See Environmental Health Division for assistance or information).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. Increase in demand for public services (police, fire, water, sewer, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L. Increase in fossil fuel consumption (electricity, natural gas, oil, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M. Change in use of or access to an existing recreational area or navigable stream.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N. Change in traffic or vehicular noise on road system in immediate vicinity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Increased hazards for vehicles, bicycles or pedestrians.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P. Removal of agricultural or grazing lands from production.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q. Relocation of people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 9 Additional Information by Applicant

In order to make this application COMPLETE, please submit any additional data, information or special study reports that may be necessary to determine whether the project may have significant effect on the environment or to evaluate any adverse impacts, and to determine how they may be mitigated. Add additional pages as necessary.

## 10 Information Verification - Signed by Owner and Applicant

Owner and Applicant must sign below certifying that all information is to the best of his/her knowledge true and correct.

If the applicant is not the owner of record of all property included in this application, the signature given below is certification that the owners of record have knowledge of and consent to the filing of this application and supporting information. Additionally, the undersigned does hereby authorize representatives of the County to enter upon the above mentioned property for inspection purposes. **This certification acknowledges that if the project exceeds double that of the application fee, applicants are subject to the hourly billing rate of staff time. You will be notified if the project is approaching this threshold.**

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.

Owner signature: \_\_\_\_\_ Date: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

### For Office Use Only

Planning Permit Fee(s)	Environmental Review Fees
_____ \$ _____	Initial Study \$ _____
_____ \$ _____	Archaeological Study (Sonoma State NWIC) \$ _____
_____ \$ _____	Negative Declaration \$ _____
_____ \$ _____	CA Fish and Games (ND or EIR) \$ _____
_____ \$ _____	Initiate EIR \$ _____
_____ \$ _____	Mitigation Monitoring Plan \$ _____
Total \$ _____	Total \$ _____
<b>Total Fees Paid (P + E) \$ _____</b>	Receipt No.: _____ DATE: _____

Staff verify: Zoning: \_\_\_\_\_ GP Land Use & Consistency: \_\_\_\_\_

Comments: \_\_\_\_\_ Staff/Date: \_\_\_\_\_

T:\PLANNING\Planning Templates\Front Counter Application and Instruction Forms\COUNTER FORMS - (O-R-I-G-I-N-A-L-S)\Land Use Permit\Permit Application & Instructions\Land Use Permit - Application.doc(June 23, 2011)