



CITY OF FAIRFIELD

MINOR DISCRETIONARY/PLAN REVIEW APPLICATION

Community Development Department

APPLICATION TYPE

MINOR DISCRETIONAL REVIEW PLAN REVIEW

PROJECT DESCRIPTION *Describe in detail. Add additional sheets as necessary*

PROPOSED LOCATION AND APPLICANT INFORMATION

LOCATION OF PROJECT (ADDRESS)	ASSESSOR'S PARCEL NUMBER(s)		
NAME OF PROPOSED PROJECT	APPLICANT EMAIL ADDRESS		
APPLICANT NAME/CONTACT PERSON	PHONE () -	CELL () -	
APPLICANT ADDRESS	CITY	STATE	ZIP
PROPERTY OWNER NAME	PHONE () -	CELL () -	
PROPERTY OWNER ADDRESS	CITY	STATE	ZIP

PROPERTY OWNER'S CONSENT – I declare under penalty of perjury that I am the owner of property involved in this application. I certify that all of the submitted information is true and correct to the best of my knowledge and belief.
(Property owner authorization letter is acceptable).

X _____

SUBMITTAL REQUIREMENTS

MINOR DISCRETIONARY

- Three (3) copies of a site plan (or landscape plan) showing dimensions of all structures and the proposal
- Three (3) copies of existing and proposed elevations specifying exterior materials
- New and Redevelopment Post Construction Stormwater Requirements Questionnaire
- All e-TraKiT online applications shall include all required plans electronically in PDF format as attachments

PLAN REVIEW

- Three (3) copies of a site plan (or landscape plan) showing dimensions of all structures and the proposal

DEPARTMENT USE ONLY

RECEIVED BY	DATE	FEE RECEIVED \$	RECEIPT NUMBER	APPROVED BY	DATE
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CONDITIONS _____
