

MARIPOSA COUNTY SINGLE FAMILY RESIDENTIAL DEVELOPMENT PERMIT APPLICATION

PERMIT # _____

Project Parcel/Assessor Parcel No. (APN) _____ Acreage: _____

Parcel Map No. _____ Lot No. _____ Survey Map No. _____ (if known)

Property Owner: _____ Work Phone _____ Home Phone _____

Mailing Address _____ Zip _____

Email _____

Applicant: _____ Work Phone _____ Home Phone _____

Mailing Address _____ Zip _____

Email _____

Contractor: _____ Work Phone _____ Home Phone _____

Mailing Address _____ Zip _____

Email _____ License No: _____

Project Address: _____
(address must be posted for inspection request)

Job Description (grading, house, septic, well, garage, etc.):

Number of bedrooms: Existing _____ Proposed _____ Total _____

Water Source: (circle) Well Spring Public Water System Other _____

Sewage System: (circle) Sewer Septic Tank/Leach Field Other _____

Existing Parking Spaces _____ Proposed _____ Structure Height _____

Value of Project: \$ _____

Please give detailed driving directions:

Existing development on property, existing structures, present use of property:

Will the structure be used for business purposes (such as a home business, vacation rental, B&B, etc.)?

Yes No If yes, explain _____

Prior Planning Commission Actions? Yes No; Describe: (LLA, Etc.) _____

As owner of the property or applicant, the information provided above is true and accurate to my knowledge.

Signature: _____ Date: _____

Planning Sign-off
Approved: _____ Date: _____

Environmental Health Sign-off
Approved: _____ Date: _____

ELIGIBILITY FOR EXPRESS PERMIT

[For Office Use Only]

EXPRESS _____

1. Project parcel / APN **must** have prior building permit: [Prior Permit No: _____]
2. Project parcel **not** located in: Mariposa's HDRO or DRO* / Scenic Highway Overlay (SHO)* / Coulterville's HDRO or DRO*
[Planning confirmation of eligibility _____]

*unless the requested permit is for interior renovations only, OR is residential only in the Mariposa's DRO

HEALTH APPROVAL: Approved: _____ Not Approved _____ Date: _____ Signature: _____
Comments: _____

Development Permit Sign-Off Checklist: PLANNING

Zoning _____ Land Use _____ Specific Plan (if applicable) _____ LCA: _____
 Overlay District _____ Other _____ Elevation _____
 Number of Dwellings: Existing _____ Proposed _____
 Non-conforming: Existing Square Feet _____ Proposed Square Feet _____

Type of use:

Existing _____
 Proposed _____
 Non-conforming _____

Parking:

Existing Square Feet _____ Proposed Square Feet _____
 Existing Number of Spaces _____ Proposed Number of Spaces _____

Parcel Legality

- Parcel is listed in "previously Issued building permit" logbook
- Parcel is part of a recorded Parcel Map or Record of Survey (when intent is to subdivide), subdivision/Lot: _____
- Parcel was created prior to Map Act (March 4, 1972); Deed Reference: _____
- Remainder recorded prior to May 6, 1986; Parcel Map Reference: _____
- Gift Deed Parcel created prior to July 31, 1980; Deed Reference: _____
- Gift Deed Parcels created after July 31, 1980 but before April 1, 1993 with either a certificate of compliance or certificate of development; Document No. _____

Required Setbacks: Front _____ Rear _____ Side ____/____ Road _____ Drainage _____

Proposed Setbacks: Front _____ Rear _____ Side ____/____ Road _____ Drainage _____

Height Limitation: _____ **Proposed Height:** _____

Parcel Specific Setbacks and Easements on Parcel Map, Record of Survey or Special Permit?

Yes No (If Yes, explain) _____

_____ Lot Line Adjustment _____ Variance _____ Use Permit Det.
 _____ Use Permit _____ Home Enterprise/RHI _____ Other

Comments: _____

Approved: _____ **Not Approved:** _____ **Date** _____ **Signature** _____