

Pre-Application

Date Received 17/19/20
By Fran
Fee 3735
Case # ##################################

General Information		
APPLICANT Melissa Brannen		Phone 760 10093
Mailing Address 26725 + btwell Rd	Email Molis 976	Ogmail. Com
city Desert Hot Springs	State G	_ zip <u>9724 /</u>
REPRESENTATIVE		Phone
Mailing Address	_Email	
City	_State	Zip
PROPERTY OWNER Steve Jerrils		Phone 949-(032-1)
Mailing Address 23562 PORTER CIR.	Email Steven	erriseatt.net
City LAGUNA NIGUEL	_State	_zip 92677
Project Information		
Project Address 55688 Yucatrail	Yucca Valley	CA 92284
Assessor Parcel Number(s) 0594-04		
Project Location CORNER WGATT	ZAIL & WAM	EGO.
Project Description: PROSPECTIVE	FIED & 1	ACK STORE
ANIMAL-FEED, SUPPLIES, GRA		OO ECO
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Please attach any additional information that is pertinent to the application.

Agreement to Pay All Development Application Fees

In accordance with Town Council Resolution 04-38 the Town collects certain fees based on the actual cost of providing service. The application deposit for this project (as indicated below) may not cover the total cost of processing this application. I/We are aware that if the account has 25% or less remaining prior to completion of the project, staff will notify the undersigned in writing, of the amount of additional deposit required to complete the processing of the application, based on Staff's reasonable estimate of the hours remaining to complete this application process.

Further, I understand that if I do not submit the required additional deposit to the Town within 15 business days from the date of the letter, staff may stop processing of the application and/or not schedule the project for action by the Planning Commission or Town Council.

Any remaining deposit will be refunded to me at time of closeout after I have submitted any required approved project plans and forms, including signed conditions of approval, or upon my written request to withdraw the application.

As the applicant, I understand that I am responsible for the cost of processing this application and I agree that the actual time spent processing this application will be paid to the Town of Yucca Valley

Deposit Paid: \$

Applicant's Signature

Applicants Name (Please print)

Date:

11-11-2012

Town of Yucca Valley
Community Development Department
Planning Division
58928 Business Center Dr
Yucca Valley, CA 92284
760 369-6575 Fax 760 228-0084
www.yucca-valley.org

Owner/Applicant Authorization

Applicant/Representative: I/We have reviewed this completed application and the attached material. The information included with this application is true and correct to the best of my/our knowledge. I/We further understand that the Town may not approve the application as submitted, and may set conditions of approval. Further, I/We understand that all documents, maps, reports, etc., submitted with this application are deemed to be public records. This application does not guarantee approval or constitute a building permit application. Additional fees may be required depending on additional administrative costs.

Signature: Melssa Dleens

Name:

Date: 12/14/27

Property Owner: I/We certify that I/We are presently the legal owner(s) of the above described property (If the undersigned is different from the legal property owner, a letter of authorization must accompany the form). Further, I/We acknowledge the filing of this application and certify that all of the above information is true and accurate. I/We understand that I/We are responsible for ensuring compliance with conditions of approval. I/We hereby authorize the Town of Yucca Valley and or/its designated agent(s) to enter onto the subject property to confirm the location of existing conditions and proposed improvements including compliance with applicable Town Code Requirements. Further, I/We understand that all documents, maps, reports, etc., submitted with this application are deemed to be public records. This application does not guarantee approval or constitute a building permit application. Additional fees may be required depending on additional administrative costs. I am hereby authorizing

to act as my agent and is further authorized to sign any and all documents on my behalf.

Signature:

Name:

Date:

12.11-2022

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