

City of Duarte COMMUNITY DEVELOPMENT DEPARTMENT

1600 Huntington Drive Duarte, C- 91010

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www.accessduarte.com

Planning Submittal Checklist

DROUGHT ADDRESS	BUGINESS MARAS
PROJECT ADDRESS:	BUSINESS NAME:
APPLICANT NAME:	APPLICANT PHONE NUMBER:
GENERAL INSTRUCTIONS	
Application Pre-Screening It is highly recommended that a planner conduct a pre-submittal screening of your project in order to determine which checklist items you will need to provide for your specific project. The <i>Planning Submittal Checklist</i> serves as a guide. A planner will meet with you and answer any questions regarding City processes, estimated timing, fees, and requirements listed on the <i>Planning Submittal Checklist</i> . You may call (626) 357-7931 to schedule an appointment to meet with a Planner.	
Application Submittal	
Make an appointment with the Planning Division when you are ready to formally submit your complete application. A Planner will be assigned to your project and will meet with you to review your plans, collect fees, and ensure that you have provided all necessary materials to complete a thorough review of your project. After you submit your application, the Planning Division will review your plans with the appropriate City Divisions. Your assigned Planner will contact you to review any comments including those by other City Divisions. In some cases, it may be necessary to set-up a meeting with your project team and City representatives, before the Planning Division can proceed with your project.	
SUBMITTAL CHECKLIST	SUPPLEMENTAL MATERIALS CHECKLIST
☐ Master Application ☐ Application Fee(s) ☐ Project Description (on Master Application or typed on 8 ½"x 11" paper) Describe type of business/services Day/Hours of Operation # Employees/Shift ☐ Plans (To Scale, 24" x 36" max.) #Sets Site Plan Floor Plan Roof Plan Elevations Landscape Plan Irrigation Plan Lighting Plan Sign(s) Fence/Wall Plan Grading Plan Drainage Plan Other On a CD, emailed in PDF format, or saved on a non-returnable flash drive Reduced to 8 ½"x 11" or 11" x 17" paper Letter of Authorization if applicant is agent for property owner Other	 □ Property Owners List (600' radius) _Two sets of mailing labels based on LA County Assessor's Roll _One photocopy of mailing labels _Certified to be correct and true with provider's signature □ Vicinity Map (600' radius) _Showing each lot or portion thereof within the 600-foot radius _Show by appropriate designations which property is owned by which owner (letters or numbers on both Vicinity Map and Property Owner's List) □ Tenant List (for multi-tenant buildings/centers) _List business name, use, address, & square footage of each unit _Provide the number of on-site parking stalls (regular and ADA) □ Security Plan (After Hours, ABC, and Entertainment Uses) _Describe existing or proposed security measures (i.e. cameras, training for age/identification check for sale of alcohol, etc.) □ Photo Simulations and/or Renderings □ Other
OFFICE USE ONLY CHECK ALL THAT APPLY: Staff Review Director Review Date: ARB Date: Date: Date: Commission: Date: Case No(s):	
Complete Date:	_