



CITY OF PALM SPRINGS

Department of Planning Services
3200 E. Tahquitz Canyon Way, Palm Springs, CA 92262
Tel 760-323-8245 – FAX 760-322-8360

For Staff Use Only

Case Number: _____

In-Take Planner: _____

Date: _____

ADMINISTRATIVE MINOR MODIFICATION PLANNING / ZONING GENERAL INFORMATION FORM

PLANNING ENTITLEMENTS REQUESTED:

Administrative Minor Modification
HSPB Action
Parcel Map / Tract Map
Variance

Change of Zone
Major Architectural
Planned Development District

Conditional Use Permit
Minor Architectural
Single-Family Architectural

TO THE APPLICANT: Please fill out information requested below and attach the appropriate supplemental application.

Project Site Information:

Project Address: _____ APN: _____

Project Name: (Name of Condo or HOA) _____

Zone: _____ GP: _____ Section/Township/Range: ____/____/____

Description of Project:

Property Owner Information:

Property Owner's Name: _____

Property Owner's Signature: _____

Property Owner's Address: _____

Property Owner's Phone #: _____ FAX: _____

Property Owner's Email: _____

Project Manager, Contractor, Owner's Representative:

Company / Agent's Name: _____

Agent's Signature: _____

Agent's Mailing Address: _____

Agent's Owner's Phone #: _____ FAX: _____

Agent's Owner's Email: _____



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PLANNING DEPARTMENT APPLICATION ADMINISTRATIVE MINOR MODIFICATION

TO THE APPLICANT: Fill out a General Information Cover Form first and attach this supplemental information sheet.

Is the proposed project:

- | | | |
|--|------------------------|---------------------------------|
| Conservation Area (MSHCP) | Abut State Highway 111 | Downtown Parking Combining Zone |
| Historic Designation / District | Specific Plan | Resort Combining Zone |
| Water Course / Floodplain | Hillside Lot | Noise Impact Zone |
| On the Agua Caliente Band of Cahuilla Indian Reservation Land | | |
| Fall within the Riverside County Airport Land Use Commission Review Area | | |

General Information:

Common Name of Project: _____

When did present owner acquire the property: _____

Relationship to larger project: _____

Existing use of project site: _____

Residential Projects:

Proposed building square footage: _____ Net Lot Area: _____

Number of dwelling units: _____ Number of stories: _____ Height: _____ ft.

Largest single building: (sq. ft.) _____ Number of stories: _____ Height: _____ ft.

Describe recreational facilities: _____

Parking spaces required: _____ Number provided: _____
(Per PSZC 93.06)

Commercial Projects:

Proposed building square footage: _____ Net Lot Area: _____

Type of uses and major functions: _____

Square footage of building area devoted to each proposed use: _____

Number of stories: _____ Height: _____ ft.

Largest single building: (sq. ft.) _____ Number of stories: _____ Height: _____ ft.

Parking spaces required: _____ Number provided: _____
(Per PSZC 93.06)

Hours of operation: _____

Maximum number of clients, patrons, shoppers at one time: _____

Maximum number of employees at one time: _____

Area and percent of total project devoted to:

Building	_____ sq. ft.	_____ %
Paving including streets or drives:	_____ sq. ft.	_____ %
Landscaping, Open, Recreation:	_____ sq. ft.	_____ %
TOTAL PROJECT AREA	_____ sq. ft.	_____ %



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General Information:

Describe type of modification and special circumstance necessitating this application.

The Zoning Ordinance Section 94.06.01(b)(2) sets forth criteria used by Staff in determining if the proposal based upon evidence presented will not have a detrimental effect on neighboring properties. The following four (4) questions are related to required findings that will be used in the decision process. Please respond to each of them by indicating how they are applicable to the property in question.

1. Is the proposed Administrative Minor Modification consistent with the General Plan?

2. Explain how neighboring properties will not be adversely affected as a result of the approval of the minor modification.

3. Explain why the approval will not be detrimental to the health, safety, or general welfare of the persons residing or working on the site or in the vicinity.

4. Explain why the approval is justified by environmental features, site conditions, location of existing improvements, or historic development patterns of the property or neighborhood.



**CITY OF PALM SPRINGS
PLANNING DEPARTMENT APPLICATION
ADMINISTRATIVE MINOR MODIFICATION**

APPLICANT'S REQUIRED MATERIAL CHECKLIST

The following items must be submitted before an Administrative Minor Modification application will be accepted. Please check off each item to assure completeness.

<u>Applicant Only</u>	<u>City Use Only</u>
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Application Information:

- General Information Form + Administrative Minor Modification Form
- Justification Letter

Site Information:

- Site Plan: 24" x 36" (4 copies folded)
- Site photographs: 8 ½" x 11"

Architectural Information:

- Building Elevations: 24" x 36" (4 copies folded)
- Color and material sample board
- Electronic copy of plans and color exhibits in PDF image format (max 5 MB)

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189



A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)

County of _____)

On _____ before me, _____,
Date Here Insert Name and Title of the Officer

personally appeared _____
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____



California All-Purpose Acknowledgment

The so-called “all-purpose” acknowledgment wording, as prescribed in California Civil Code Section 1189(a), is mandatory for all acknowledgments taken in the state, whether the acknowledger is signing as an individual or a representative (partner, corporate officer, attorney in fact, trustee, etc.).

Law permits California Notaries to use an out-of-state acknowledgment form on a document that will be filed in that other state or U.S. jurisdiction, but only if “the form does not require the Notary to determine or certify that the signer holds a particular representative capacity or to make other determinations and certifications not allowed by California

law” (Civil Code Section 1189(c)).

Still, however, any acknowledged document notarized and filed or recorded in California must bear only an all-purpose certificate.

State law requires the “all-purpose” certificate wording to be used exactly as it appears in statute.

The optional section at the bottom can deter alteration of the document or fraudulent reattachment of this form to an unintended document. The insertions in this section are not required by law. Failure to fill out this section will not affect the validity of the certificate.

Instructions:

- 1 NAME OF COUNTY** where Notary performs notarization.
- 2 DATE OF NOTARIZATION.** Actual month, day and year on which signer(s) appear(s) before Notary.
- 3 NAME & TITLE OF NOTARIZING OFFICER.** In the case of a Notary, “Notary Public” would be the title.
- 4 NAME(S) OF SIGNER(S)** appearing before Notary. Initials and spelling of names should agree with name(s) signed on document and ID card.
- 5 NUMBER AND GENDER OF SIGNER(S).** **Cross out** letters and words that do not apply — person(s), name(s), is/are, he/she/they, his/her/their, capacity(ies), signature(s) — or **circle** words that apply, to agree with number and gender of signer(s) in space 4.
- 6 SIGNATURE OF NOTARY** exactly as name appears on commissioning papers, in space 3 and in seal.
- 7 NOTARY SEAL IMPRINT**, clearly and legibly affixed.

SPACES 8–15 ARE OPTIONAL.

Omission of information here will not affect the document’s validity. However, completing these spaces can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

- 8 TITLE OR TYPE OF DOCUMENT** notarized, such as “Grant Deed.”
- 9 DATE OF DOCUMENT** notarized. Most but not all documents will have a date, usually at the top or following the signature. If none, insert “No Date.”
- 10 NUMBER OF PAGES** in the notarized document. This may point out fraudulent addition or removal of pages. Do not count the certificate as a page. However, the certificate will be regarded as a page by recording officials in assessing recording fees.

- 11 SIGNER(S) OTHER THAN NAMED IN SPACE 4.** Since all signers might not be named on the same notarial certificate, insert name(s) of signer(s) here that appear(s) or will appear on other certificates — as many as space allows. If there are a large number of signers, a notation such as “Mary Smith and 28 other signers” will suffice. If none, insert “no other signers.”
- 12 NAME(S) OF SIGNER(S)** from space 4 whose capacity and represented entity follow.
- 13 CAPACITY CLAIMED BY SIGNER.** **Check appropriate box** to indicate whether signer is signing as individual (on his or her own behalf), or as corporate officer (indicate corporate title), partner (indicate whether “limited” or “general” partner), attorney in fact, trustee, guardian/conservator, or in another capacity.
- 14 DESCRIPTION OF OTHER CAPACITY(IES).** A single capacity, such as “executor,” may be indicated here; or a multiple capacity, such as “corporate officer signing for partnership in which corporation is partner.”
- 15 NAME OF PERSON OR LEGAL ENTITY** that signer is representing. It could, for example, be the name of an absent person represented by attorney in fact. It could be the name of a condominium association, such as “Blue Lagoon Condo Assn.” Or it could be multiple entities, such as “XYZ Corp., partner in Mutual Enterprises, a partnership.”

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of Los Angeles)

On July 19, 2012 before me, Pat R. Jones, Notary Public
Date Here Insert Name and Title of this Officer
personally appeared Michael T. Smith
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person~~s~~ whose name~~s~~ is/are subscribed to the within instrument and acknowledged to me that he~~she/they~~ executed the same in his~~her/their~~ authorized capacity~~(ies)~~, and that by his~~her/their~~ basic signature~~s~~ on the instrument the person~~s~~ or the entity upon behalf of which the person~~s~~ acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature Pat R. Jones
Signature of Notary Public

7 
Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document: Grant Deed Document Date: July 19, 2012

Number of Pages: One Signer(s) Other Than Named Above: No other signers

Capacity(ies) Claimed by Signer(s)

Signer's Name: Michael T. Smith Signer's Name: _____

Corporate Officer — Title(s): _____ Corporate Officer — Title(s): _____

Partner — Limited General Partner — Limited General

Individual Attorney in Fact Individual Attorney in Fact

Trustee Guardian or Conservator Trustee Guardian or Conservator

Other: _____ Other: _____

Signer Is Representing: _____ Signer Is Representing: _____

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JUSTIFICATION LETTER ADMINISTRATIVE MINOR MODIFICATION

A Justification Letter explaining your application will be included in the materials reviewed by the Planning Commission; multiple related applications may be addressed in a single comprehensive letter. This letter may be prepared by the applicant or a representative. The following format is provided to assist you in the preparation of this letter.

Project Description:

Please provide a detailed description of the project. Include items such as intended use of the property; possible environmental impacts; and architectural changes.

Information:

Please provide the following information and any other that will assist Planning Staff in making their decision:

- Reason for request
- Special circumstances associated with request
- How the project will not impact adjacent properties

Findings:

Please describe in detail how the project meets/supports existing City regulations for ALL of the findings of approval of each application type per the Palm Springs Zoning Ordinance.

The Justification Letter must have original signature of named owner, applicant or representative identified as such.

Note: Palm Springs Zoning Code (PSZC) Finding Sections as follows:

- Administrative Minor Modification: 94.07.00(B)(2)
- Change of Zone: 94.07.00(A)
- Conditional Use Permit: 94.02.00(B)(6)
- Minor / Major Architectural: 94.04.00(D)
- Planned Development District: 94.02.00(B)(6)
- Variance: 94.06.00(B)

PSZC can be found on the Planning Services web page at www.palmspringsca.gov