



**COMMUNITY AND ECONOMIC DEVELOPMENT DEPARTMENT  
PLANNING DIVISION**

P.O. Box 1609, Mammoth Lakes, CA 93546  
 Phone: (760) 965-3630 Fax: (760) 934-7493  
 Email: [planning@townofmammothlakes.ca.gov](mailto:planning@townofmammothlakes.ca.gov) Website: [www.townofmammothlakes.ca.gov](http://www.townofmammothlakes.ca.gov)

**PLANNING SERVICES REVIEW APPLICATION**

- *Business Hours: Monday-Thursday 8:00 am - 12:00 noon, 1:00 pm - 5:00 pm, Fridays By Appointment Only*
- *Applications are accepted by appointment only and must be complete.*
- *Incomplete applications will not be accepted.*

**Property/Development:**

Property Address: \_\_\_\_\_ Assessor Parcel Number \_\_\_\_\_

Name of Development: \_\_\_\_\_ Zone \_\_\_\_\_ Lot \_\_\_\_\_ Tract \_\_\_\_\_

**Applicant/Owner Contact Information:**

|                             |                     |                      |   |                     |            |
|-----------------------------|---------------------|----------------------|---|---------------------|------------|
| <i>Applicant/Agent Name</i> |                     |                      | <i>Property Owner (if different from Applicant)</i> |                     |            |
| <i>Email Address</i>        | <i>Phone Number</i> | <i>Email Address</i> |   | <i>Phone Number</i> |            |
| <i>Mailing Address</i>      |                     |                      | <i>Mailing Address</i>                              |                     |            |
| <i>City</i>                 | <i>State</i>        | <i>Zip</i>           | <i>City</i>   | <i>State</i>        | <i>Zip</i> |

**Description of Request (attach additional sheets if necessary):**

# REQUIRED APPLICATION MATERIALS

## **PLANNING SERVICES REVIEW SUMMARY**

The purpose of the Planning Services Review is to provide a formalized review process for Planning-related requests that do not apply to any of the other Town Planning permits, but utilizes a significant amount of staff hours and thereby warrants additional billing.

## **APPLICABILITY**

The Planning Services Review application can be used to fulfill various requests, including but not limited to:

1. Director's Interpretation;
2. Zoning Verification Letter/Rebuild Letters;
3. Alcohol Beverage Control License Review;
4. Permit to increase square footage of hardscape or driveways;
5. Staff time spent on pre-application review requests subsequent to initial comments and meeting; and/or
6. Other requests that staff determine appropriate for Planning Services Review.

## **ALL APPLICATIONS MUST INCLUDE:**

- \$500 deposit; Only the largest deposit is required for a project with multiple cost accounted components.
- Processing Agreement Form (Found here: <https://www.townofmammothlakes.ca.gov/174>)
- Based on the nature of the request, Staff will determine if additional information and materials are needed such as a current title insurance commitment/preliminary title report, written narrative, project fact sheet, site plan, or other plans and specifications.

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*I CERTIFY UNDER PENALTY OF PERJURY that I am: \_\_\_ legal owner(s) of the subject property (all individual owners must sign as their names appear on the deed to the land), \_\_\_ authorized to sign on behalf of the owner(s) (proof of authorization to sign must be provided), AND THAT THE FOREGOING IS TRUE AND CORRECT.*

▶ \_\_\_\_\_  
Date Name (Print) and Signature of Property Owner or Agent

▶ \_\_\_\_\_  
Date Name (Print) and Signature of Property Owner or Agent

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*(For Staff Use Only)*

Date Received:

Permit Number: