

# **MINOR SUBDIVISION APPLICATION PACKET**

## **The City of Ripon**



*Community Development Department*

**FILING INSTRUCTIONS:** Complete applications must be received by the planning department no later than sixty (60) days prior to the next scheduled planning commission meeting.

**PROCESSING PROCEDURE:** Minor Subdivision applications are reviewed during a public hearing by the planning commission in accordance with the Development Code, Title 16, Chapter 16.100, and unless otherwise advised by the planning department, applicants or their authorized representatives are required to attend the meeting to present their project to the commission. A copy of the agenda and staff report will be mailed no later than seventy-two (72) hours prior to the commission meeting. Meetings may be held between the applicant and the project review team prior to the completion of the staff report to address issues identified during the review period. **Contact the following department(s) and/or Agency(ies) during processing of this application for possible additional requirements:** · SJ County COG 209-468-3913 · Ripon Engineering Dept 209-599-2108 · Ripon Consolidated Fire Dist. 209-599-4209 · SJC Air Pollution Control Dist. 209-545-7000

**APPLICATION SUBMITTAL REQUIREMENTS:** Unless otherwise determined by the planning department, an application for tentative parcel map must include the following:

- Application and preliminary environmental assessment fees
- The property owner or record's name and mailing address and resident's address if property owner is absentee for every property within a 500 foot radius of the project site, measured from the perimeter of the project boundary line(s). Two formats must be provided: 1) self adhesive mailing labels which include property owner of record's name and mailing address, and 2) the assessor parcel number (APN) and the property owner of record's name and mailing address in label format on single sheet, one sided white copy paper.
- Vicinity Map (8 ½ x 11)
- Site Plan Diagram: Five (5) copies at 18" x 24" folded to approximately 8 ½ x 11" and one (1) 8 ½" x 11" reduction containing the following information:
  - Date, north point, scale and sufficient description to define the location and boundaries of the proposed reparceling;
  - Name and address of recorded owner or owners;
  - Name and address of the subdivider;
  - Name and business address of the person who prepared the map;
  - Locations, names, and existing width of all adjoining and contiguous highways, streets and ways;
  - Location and character of all existing and proposed street improvements;
  - The widths, location and purposes of all existing and amended easements;
  - Method of serving individual parcels to be created with utilities;
  - Lot layout, dimensions of each lot and lot numbers;
  - The outline of any existing buildings to remain in place and their locations in relation to existing or proposed street and lot lines.
- Preliminary Title Report
- Executed Development Agreement (If required)
- Legal Description
- Flash Drive or CD containing all submitted documents

**APPEAL PROCEDURE:** Any applicant or person claiming to be directly and adversely affected by any action of the Planning Commission may, within ten (10) days after said action, file a written appeal along with the appropriate fee, with the City Clerk for transmittal to the City Council. Said appeal shall stay the issuance of any permits in connection with the action, pending the decision of the City Council. Upon the receipt of an appeal, the City Council shall, after receiving a report from the Planning Commission, and after at least one (1) Public Hearing, render a decision sustaining, amending, or overruling the Planning Commission action.

# Minor Subdivision Application

## City of Ripon

259 North Wilma Ave.,  
Ripon, CA 95366  
FAX 209-599-2685  
Phone 209-599-2108

### For Official Use Only

PM# \_\_\_\_\_ Fee \_\_\_\_\_

PEA# \_\_\_\_\_ Fee \_\_\_\_\_

Completed App. ( ) Yes ( ) No

---

---

**PROPERTY OWNER:**

Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone No. \_\_\_\_\_  
(Print)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

---

---

**APPLICANT:** ( ) Same as Above

Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone No. \_\_\_\_\_  
(Print)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

**PROJECT SITE INFORMATION:**

Address: \_\_\_\_\_

Assessor Parcel Number (APN): \_\_\_\_\_ General Plan Designation: \_\_\_\_\_

Present Zone: \_\_\_\_\_ Actual Use: \_\_\_\_\_

Project Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special Circumstances: ( ) YES ( ) NO If yes, describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



I hereby certify, under penalty of perjury, that the information provided herein is true and correct.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Property Owner if Different from Above

\_\_\_\_\_  
Date