



City of Ojai
Community Development Department

MISCELLANEOUS PERMIT

The Director shall be empowered to approve those projects, which, in his or her opinion, are minor in nature.

MINIMUM SUBMITTAL REQUIREMENTS:

- 1 Completed Application Form Signed by the Property Owner
- 1 Written project description
- 2 Site Plans if applicable
- 2 Exterior Building Elevation Plans if applicable
- Photographs of Site and Adjacent Buildings if applicable
- Fees:
 - Fee - Address Change/Assignment *Single Address*: \$225.00
 - Fee - Address Change/Assignment *Multiple Addresses*: \$450.00 + \$225 per hour
 - Fee - Deed Restriction: \$225.00
 - Fee - Zoning or Flood Hazard Letter: \$450.00
 - Land Use *Determination / Interpretation* by Director: \$225.00
 - Land Use *Determination / Interpretation* by Planning Commission: \$450.00 + \$225 per hour
 - Time Extension: \$450.00 + \$225 per hour
 - Other: \$225.00

INCOMPLETE APPLICATIONS OR POOR QUALITY GRAPHICS WILL NOT BE ACCEPTED

PLANS:

All plans must be drawn at standard Architect or Engineer's scale and the scale must be noted on the plans. The Designer's/Architect's/Engineer's name, address, phone number, and State License Number (if applicable, see next page) shall be noted on the plans. All plans shall be folded in sets, to a size no greater than 8 1/2 inches x 14 inches. **Rolled plans will not be accepted.**

Photographs:

- Color photographs of the existing site mounted on 8 1/2 inch x 11 inch paper/board(s)

Optional Items:

- Depending on the scope or complexity of the project, the applicant may wish to submit, or the Planning Division may request other items to help describe the project.

WHERE TO FILE:

Community Development Department
Ojai City Hall
401 S. Ventura Street
Ojai, CA 93023

OFFICE HOURS:

8:00 am to 5:00 pm
Monday through Friday
(805) 646-5581 ext. 112



City of Ojai
Community Development Department

MISCELLANEOUS PERMIT APPLICATION

Project Address: _____

Applicant(s) Name: _____

Address: _____

Telephone/Fax/E-mail: _____

Property Owner(s) Name: _____

Address: _____

Telephone/Fax/E-mail: _____

Signature of Property Owner _____ **Date** _____

Project Description (Attach additional sheets if necessary): _____

ATTACH ADDITIONAL INFORMATION IF NEEDED TO DESCRIBE PROJECT IN DETAIL.

For staff use only:

APPROVED BY:

Project No.: _____

Zoning: _____

Community Development Director,
City Planner or Associate Planner

APN: _____

Submittal Date: _____

Approval Date: _____

