

CERTIFICATE OF CONDITIONAL USE APPLICATION

FILING FEE: \$119.00

DEPARTMENT OF PLANNING AND BUILDING SERVICES

707 Nevada Street, Suite 5 · Susanville, CA 96130-3912 (530) 251-8269 · (530) 251-8373 (fax) www.co.lassen.ca.us

Form must be typed or printed clearly in black or blue ink. All sections must be completed in full.

This application consists of one page; only attach additional sheets if necessary.

FILE NO.

Property Owner/s	Property Owner/s
Name:	Name:
Mailing Address:	Mailing Address:
City, ST, Zip:	City, ST, Zip:
Telephone: Fax:	Telephone: Fax:
Email:	Email:
Applicant/Authorized Representative*	Agent (Land Surveyor/Engineer/Consultant)
Same as above:	Correspondence also sent to:
Name:	Name:
Mailing Address:	Mailing Address:
City, ST, Zip:	City, ST, Zip:
Telephone: Fax:	Telephone: Fax:
Email:	Email: License #:
Project Address or Specific Location:	
Deed Reference: Book: Page:	Year: Doc#:
Zoning:	General Plan Designation:
Parcel Size (acreage):	Section: Township: Range:
Assessor's Parcel Number(s):	
Project Description:	
SIGNATURE OF PROPERTY OWNER(S): I HEREBY ACKNOWLEDGE THAT: I have read this application and state that the information given is both true and correct to the best of my knowledge. I agree to comply with all County ordinances and State concerning this application.	REPRESENTATIVE (Representative may sign application on behalf of the property owner only if Letter of Authorization from the owner/s is
Date:	Date:
Date:	Date: