

USE PERMIT SECOND DWELLING SUPPLEMENT

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

FILE NO._____

Form must be typed or printed clearly in black or blue ink. This supplement consists of three pages. Please complete the following application supplement and attach to the Use Permit Application. Answer all questions that are related to the proposed use.

- 1. Proposed timeframe for the project and completion of each major phase if applicable (i.e., when structures and improvements will be completed):
- 2. Describe surrounding land uses (e.g., residential, commercial, agricultural, etc.). Please be as specific as possible.

North:	
South:	
East:	
West:	

3. Describe existing structures and improvements including their square footage:_____

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5. Maximum height of proposed Dwelling:_____

6. Describe any existing structures to be removed:

_			_		
7.	Proposed Dwelling Type: C	Conventional Home		Manufactured Home	_*

8. If a manufactured, manufactured date:_____

*Note: Manufactured homes must have been manufactured on or after September 1, 2008, to be placed in a Fire
Responsibility Area designated as a SRA (State Responsibility Area) or a LRA (Local Responsibility Area) with a
"very high" fire hazard designation. If not in an SRA area or a LRA-very high, the date of manufacture can be no more than
20 years prior to the date of building permit application. (Ord. 467-AF)

Type of foundation:	Pier set \Box	Permanent	Other \Box
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9. Proposed Dwelling Dimensions:

Proposed Dwelling Area (sq. ft):

		0 0,	0	- 0	rading at project buildout?
□ Yes	□ No	If yes, approx			b be disturbed by site grading: cres
Quantity of c	ut:	_ cubic yards	Quantity of	fill:	cubic yards
1. Percentage of si	te to be covere	d by impervio	us surfaces (e	e.g., roads, o	driveways, and structures),
including estima	ated imperviou	s surfaces at p	oroject buildo	out:	
Number of prop	osed parking	spaces:			
(Parking requirer	nents are found	at chapter 18.	104 of the Las	sen County	Code.)
Describe surfaci	ing of parking	area:			
2. Describe propos	sed exterior lig	hting, includir	ng location (a	ttach lighti	ng diagram if applicable):
2 Diagon official of] - 4 - 1 - 1 - 1 - 4 1	4		11]
		,			g and proposed improvements.
4. Please indicate i service provider		ing services wi	ili be provide	a to serve t	he project, including name of th
Electricity:				Undergro	ound \Box Overhead \Box
Telephone:				Undergro	ound \Box Overhead \Box
Water Supply:	U	New Y			nity Water □
Number of dy					
•			•		nared Septic System
suitability?	□ Yes	□ No	If yes, pleas	e attach	
Solid Waste	Disposal:				
					s and the distance of the
extension:					
5. Please provide t	he names of th	e following di	stricts, if app	licable:	
High School:					
Community Ser	vices District:				
Water:					

Sewer:_____

Other:_____

16. List all county, state, regional or federal agencies from which a permit or approval is or may be

required, including type of permit required: