



CITY OF EL CAJON • PLANNING DIVISION • (619) 441-1741
HISTORIC RESOURCE DESIGNATION
APPLICATION NO. _____

(to be used to designate a property as an Historic Resource)

*Applicant's Name: _____

Address: _____

Street # _____ City _____ State _____ Zip _____
Phone: (____) _____ Fax No. (____) _____

*Property Owner's Name: _____

Address: _____

Street # _____ City _____ State _____ Zip _____
Phone: (____) _____ Fax No. (____) _____

PROPERTY OWNER'S SIGNATURE: _____

*Historic preservation specialist, architect or other applicant representative: _____
License No. _____

Address: _____

Street # _____ City _____ State _____ Zip _____
Phone: (____) _____ Fax No. (____) _____

Subject property is located on the _____ side of _____
between _____ and _____, and addressed as

Assessor's Parcel No. _____

Existing Zoning: _____

General Plan Designation: _____

REQUEST: _____

NOTE: ADDITIONAL REQUIREMENTS ON BACK

*These individuals will receive a copy of the staff report if their complete address is given

CITY USE ONLY

Date Filed: _____ Agenda Date: _____
Received by: _____ Within SP 182? Yes No
Accompanying Tentative Map: _____ Within RDA? Yes No

ADDITIONAL APPLICATION INFORMATION AND REQUIREMENTS

1. Filing fee of \$600.
2. If required, an environmental information form (\$750) or a \$50 document handling fee to post Notice of Exemption (Check payable to the "County Clerk".)
3. Complete and accurate legal description of the subject property.
4. Assessor's Plat Map with subject property identified.
5. Photocopy of grant deed and full chain of title. Name of property owner on deed must correspond with name of applicant unless a letter of authorization is submitted with the application, or unless applicant can produce a lease of 20 years or more.
6. Disclosure Statement (see attached).
7. Description of the proposed historic resource, including special cultural, social, architectural, political, and economic value of an historic nature.
8. Sketches, photographs or drawing and listing in the *1985 SANDAG Historic Preservation Survey* for El Cajon.
9. Statement of condition of structures and proposed rehabilitation, improvements and/or modification and time lines to accomplish.
10. Explanation of any known threats to the improvement or the site.
11. The application must include a site plan (15 copies) prepared as follows:
 - ___A. Maximum sheet size shall be 24" x 36". Please fold maps so that the finished size is no larger than 8 ½" x 11", and so that the title block shows.
 - ___B. Plan shall be to a standard engineer's or architect's scale (minimum 1" = 50').
 - ___C. North arrow oriented to top of page. (Irregularly shaped lots may orient to side if necessary.)
 - ___D. Plan shall include a vicinity map showing at least the adjacent street and the nearest cross street, as well as the nearest arterial.
 - ___E. Title block shall be in lower right hand corner (see attached format).
 - ___F. Plan shall include the location and accurate dimensions of:
 - ___1) All property lines
 - ___2) All easements
 - ___3) All existing and proposed structures, including structures on adjacent property within at least 50 ft. of the subject property
 - ___4) Distances from structures on the subject property to nearest property lines
 - ___5) Distances between buildings on the subject property
 - ___6) All existing & proposed fences or walls
 - ___7) Distances between property lines and centerline of all adjacent street rights-of-way
 - ___8) Existing and any proposed changes to public right-of-way improvements
 - ___9) All on-site parking spaces and driveways with spaces numbered
 - ___10) All areas of proposed landscaping
 - ___11) Any existing or proposed freestanding signs
 - ___12) Proposed on-site lighting
 - ___13) Any other notable project features which affect site design (i.e., common recreation area, trash enclosures, electrical transformers, etc.)
 - ___G. A "Notes" section shall be provided which gives information on:
 - ___1) Gross and net lot area
 - ___2) Lot coverage (square footage and percent)
 - ___3) Square footage devoted to landscaping
12. In addition to the site plan copies listed in the requirement above, provide one reduced version of the site plan (8 ½" x 11") with a note added (if applicable) indicating that the plan is not to scale.

- *13. A scaled, colored drawing of all exterior elevations identifying exterior materials and treatment including the screening of any mechanical equipment. Submit 6 copies in 11" x 17" format. In addition, submit one set of colored elevations (24" X 36") for presentation purposes. For any CUP which requires review by City Council, applicant must submit 12 copies in 11" x 17" format.)

(SEE CHAPTER 17.92 OF THE EL CAJON MUNICIPAL CODE FOR ENTIRE HISTORIC PRESERVATION ORDINANCE). NOTE: IT IS RECOMMENDED THAT THE APPLICATION BE PREPARED BY A QUALIFIED HISTORIC PRESERVATION SPECIALIST.

PROCEDURE

Upon submission of the application, any required environmental documents, applicable filing fees and any other required information and documents to the Planning Division necessary to deem the application complete, the request will be scheduled for a public hearing by the Historic Preservation Commission (usually about 6 weeks from the date of submission). At the public hearing, the Historic Preservation Commission will review the request along with the staff recommendation and any public testimony and make a decision to either: recommend approval or deny the request. After the Historic Preservation Commission has adopted a resolution stating its decision and filed a copy of the resolution with the City Clerk, the applicant or any interested person disagreeing with the decision of the Historic Preservation Commission may appeal to the City Council within ten (10) days. The appeal filing fee must be paid upon submission of the appeal forms to the City Clerk. The City Clerk will schedule a public hearing by the City Council (usually within 4 weeks) to consider the recommendation of the Planning Commission or the appeal. The City Council will either concur with or modify the Historic Preservation Commission's decision and the decision of the City Council is final.

The approved request becomes null and void if it is not exercised within the time limit specified in the resolution or, if no date is specified, within one year from the date of approval of the request.

DISCLOSURE STATEMENT

APPLICANT'S STATEMENT OF DISCLOSURE OF CERTAIN OWNERSHIP INTERESTS ON ALL APPLICATIONS WHICH WILL REQUIRE DISCRETIONARY ACTION ON THE PART OF THE CITY COUNCIL, PLANNING COMMISSION AND ALL OFFICIAL BODIES

The following information must be disclosed:

1. List the names and addresses of all persons having a financial interest in the application.

List the names and address of all persons having any ownership interest in the property involved.

2. If any person identified pursuant to (1) above is a corporation or partnership, list the names and addresses of all individuals owning more than 10% of the shares in the corporation or owning any partnership interest in the partnership.

3. If any person identified pursuant to (1) above is a trust, list the name and address of any person serving as trustee or beneficiary or trustor of the trust.

4. Have you or your agents transacted more than \$250 worth of business with any member of City staff, Boards, Commissions, Committees and Council within the past twelve months or \$500 with the spouse of any such person? Yes _____ No _____

If yes, please indicate person(s), dates, and amounts of such transactions or gifts.

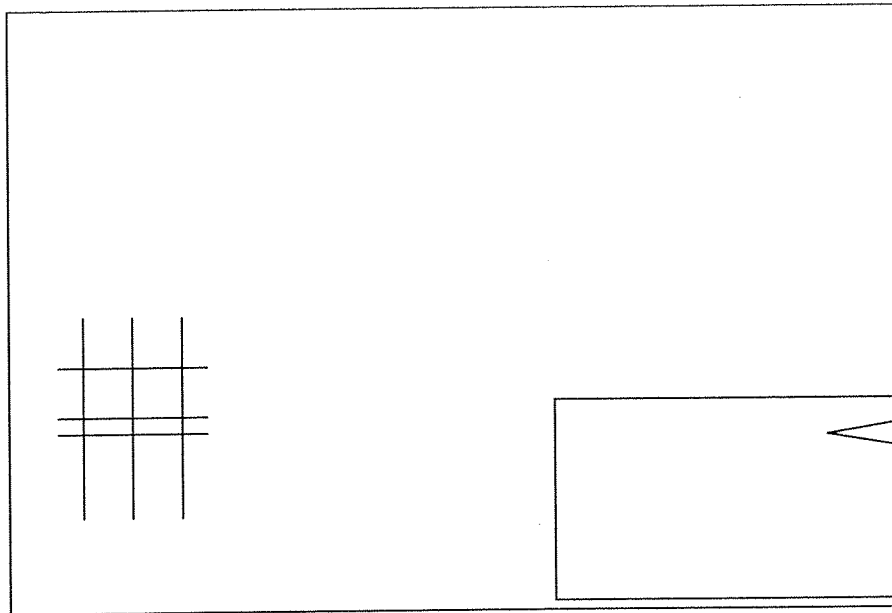
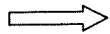
“Person” is defined as “Any individual, proprietorship, firm, partnership, joint venture, syndicate, business trust, company, corporation, association, committee, and any other organization or group of persons acting in concert.” Gov’t Code §82047.

Signature of applicant / date

Print or type name of applicant

NOTE: Attach appropriate names on additional pages as necessary.

VICINITY
MAP



Sheet 1	CITY OF EL CAJON	Sheet 1
HISTORIC RESOURCE DESIGNATION APPLICATION NO. _____		
APPLICANT: _____		
ASSESSOR PARCEL NO(S): _____		
REQUEST: _____ _____		
DRAWN BY: _____		APPROVED BY: _____
ADDRESS: _____ _____		_____
PHONE: _____		DATE: _____