



City of BELL GARDENS

7100 Garfield Avenue • Bell Gardens, California 90201 • 562.806.7700 • Fax 562.806.7720 • www.bellgardens.org

CONDITIONAL USE PERMIT APPLICATION Planning Division

Permit Fee:

Conditional Use Permit	\$450
Conditional Use Permit (ABC)	\$900
Microwave Station	\$3,800

PROJECT ADDRESS OR GENERAL LOCATION

Dirección del proyecto

APP #

APPLICANT/APPLICANT'S REPRESENTATIVE

Nombre del solicitante o representante

DATE REC'D

MAILING ADDRESS *Dirección*

REC'D BY

CITY/STATE/ZIP CODE *Ciudad/Estado/Zona Postal*

TELEPHONE *Teléfono*

PROPERTY OWNER *Nombre del propietario*

OWNER MAILING ADDRESS *Dirección del propietario*

CITY/STATE/ZIP CODE *Ciudad/Estado/Zona Postal*

OWNER TELEPHONE NUMBER *Teléfono del propietario*

CURRENT ZONING & LAND USE OF THE SUBJECT SITE

Office Use Only

- PAID (\$450) _____
- PAID (\$900 ABC) _____
- PAID (\$3,800 MS) _____

APPLICANT'S REQUEST

It is hereby requested that the Bell Gardens Planning Commission grant a Conditional Use Permit for the development or use on this property as stated in this application. Please describe the proposed development or use in full detail.

APPLICANT'S STATEMENT OF FACTS

According to the Bell Gardens Municipal Code, the Planning Commission must make certain findings before approving a Conditional Use Permit. To assist the Commission in making these findings, please answer the following questions.

1. Is the proposed location of the Conditional Use Permit in conformance with the purposes and objectives of the zoning district in which the site is located? If not, give reasons for application.

2. Is the proposed location of the Conditional Use Permit in conformance with the Bell Gardens General Plan? Specify.

3. Will the proposed Conditional Use Permit be detrimental to the public health, safety and welfare or materially injurious to properties or persons?

4. Will the traffic generated by the proposed Conditional Use Permit overload the capacity of the surrounding street system?

AFFIDAVIT

STATE OF CALIFORNIA)
COUNTY OF LOS ANGELES) SS
CITY OF BELL GARDENS)

I, _____, being duly sworn, depose and say that I am the applicant in the foregoing application, that I have read the foregoing application and know the content thereof and state that the same is true and correct to the best of my knowledge. Furthermore, all information and data submitted to the City of Bell Gardens in support of my application is true and correct to the best of my knowledge.

APPLICANT (SIGNATURE)

ADDRESS

CITY/STATE/ZIP

PHONE

I, _____, the owner (if other than the applicant) of the real property involved in this application, do hereby consent to the filing of this application.

OWNER (SIGNATURE)

ADDRESS

CITY/STATE/ZIP

PHONE

Subscribed and sworn to before me this _____ day of _____, _____.

Notary Public
County of Los Angeles
State of California

CONDITIONAL USE PERMIT FILING PROCEDURE

The Conditional Use Permit procedure is intended to provide some reasonable flexibility in the City's zoning regulations and to help achieve the objectives of the Bell Gardens General Plan. Selected uses in each zoning district are allowed only subject to the issuance of a Conditional Use Permit because of their unique site development requirements and operating characteristics. These uses require special consideration in order to maintain compatibility with surrounding uses. The Conditional Use Permit process is intended to afford an opportunity for broad public review and evaluation of these requirements and characteristics and to provide adequate mitigation of any potentially adverse conditions. The Planning Commission may impose conditions to cover any aspect of the development of the site and may impose limitations on the operation of the proposed use.

PROCEDURE

1. Preliminary review of proposed project.
2. Upon completion of the preliminary review, submit the Conditional Use Permit application and filing materials to the Community Development Department at least sixty (60) days prior to the Planning Commission meeting date.
3. City prepares all required documentation pursuant to the California Environmental Quality Act (CEQA) Guidelines. Public hearing notices are mailed by the City to surrounding property owners.
4. Planning Commission reviews the proposed project. Planning Commission meets the third Wednesday of each month at 7:00 P.M. at City Hall, 7100 Garfield Avenue, Bell Gardens. **THE APPLICANT AND/OR HIS REPRESENTATIVE MUST BE PRESENT AT ALL PUBLIC HEARINGS.**
5. If the Conditional Use Permit is denied by the Planning Commission, the applicant may appeal to the City Council within 15 days from the Planning Commission meeting pursuant to the provisions of Section 9.58.090 of the Bell Gardens Zoning Ordinance.

FINDINGS FOR APPROVAL

Section 9.50.050 of the Bell Gardens Zoning Ordinance states the following regarding approval or denial of a Conditional Use Permit:

9.50.050 Basis for Approval or Denial of a Conditional Use Permit

The Commission shall consider applications for a Conditional Use Permit and may approve with such conditions as are deemed necessary a conditional use which will not jeopardize, adversely affect, endanger or otherwise constitute a nuisance to the public health, safety or general welfare, or be materially detrimental to the property of other persons located in the vicinity of such use.

- A. In making such determination, the Commission shall find that the proposed use is in general accord with the following principles and standards:
 1. The use shall not be in substantial conflict with the General Plan for the area and shall comply with the standards of the Zoning Ordinance unless appropriate findings for a Variance can be made.

2. The use shall not jeopardize, adversely affect, endanger, or otherwise constitute a nuisance to the public health, safety, or general welfare.
3. The site for a proposed conditional use is adequate in size, shape, and topography to accommodate the yards, walls, fences, parking and loading facilities, landscaping and other development features prescribed in this Ordinance, or as required by the Commission as a condition in order to integrate said use with the uses in the neighborhood.
4. The site for the use is served by highways or streets adequate in width and improved as necessary to carry the kind and quantity of traffic such use would generate.
5. The site is served by the required utilities, including electricity, and water supply of qualities and pressures required by the fire codes to provide adequate fire protection.
6. (For Alcoholic Beverage Uses only) The public interest, convenience, and necessity require that the use be approved at the subject location.

FILING REQUIREMENTS

- ____ 1. Application completed, signed and notarized.
- ____ 2. Environmental information form completed and signed.
- ____ 3. Ten sets of plans drawn to scale, neat and legible, to include but not limited to:
 - a. Vicinity map
 - b. Site Plan
 - c. Floor Plan
 - d. Building Elevations
- ____ 4. One set of plans reduced to 8 ½ by 11" (black and white).
- ____ 5. Applicant must also submit the site plan, floor plans, and building elevations on colored presentation boards and CD.
- ____ 6. Sample color and material board.
- ____ 7. For a Conditional Use Permit relating to ABC license, please indicate all existing businesses that sell alcohol within a 700 foot radius from property, i.e., markets, restaurants, bars, etc. Provide a radius map indicating properties within 700 feet of the subject property (radius must be drawn from all four corners or exterior boundaries of the subject site. The mailing labels must include the names and addresses of all property owners located within 700 feet, as well as the type of business and ABC license. The labels must be consecutively numbered. The numbers on the map must correspond to the numbers on the mailing labels. The map must also be submitted on a CD. The applicant must submit two sets of labels and a copy of the property ownership list. The applicant must submit a notarized affidavit signed by the person who prepared the radius map and labels. The names and addresses may be obtained from:

- a. Los Angeles Tax Assessors Offices
Los Angeles Office; Hall of Administration
500 West Temple Street, Room 291
Los Angeles, CA 90012
(213) 974-3363
8:00 A.M. – 4:00 P.M., M-F
 - b. A Licensed Mapping Company
 - c. The City of Bell Gardens for a fee of \$302
- _____ 8. Radius map indicating properties within 500 feet of the subject property. The radius map must include all names of streets and block numbers. The radius must be drawn from all four corners or exterior boundaries of the subject site with the name and addresses of all property owners located within 500 feet. Applicant must submit an 8 ½ by 11" copy of the radius map. The map must also be submitted on a CD. The applicant must submit two sets of labels and a copy of the property ownership list. The labels must be consecutively numbered and these numbers must correspond to the numbers on the property ownership list. The applicant must submit a notarized affidavit signed by the person who prepared the radius map and labels. The names and addresses may be obtained from:
- a. Los Angeles Tax Assessors Offices
Los Angeles Office; Hall of Administration
500 West Temple Street, Room 291
Los Angeles, CA 90012
(213) 974-3363
8:00 A.M. – 4:00 P.M., M-F
 - b. A Licensed Mapping Company
 - c. The City of Bell Gardens for a fee of \$302
- _____ 9. Filing fees
- _____ 10. A copy of the latest Title Report.

All required documents must be filed with the Planning Division at least sixty (60) days prior to the Planning Commission meeting.

Questions and/or further information may be addressed to the Planning Division at Bell Gardens City Hall, 7100 Garfield Avenue, Bell Gardens, CA 90201; (562) 806-7700, extension 7724 during business hours, Monday – Thursday, 7:30 A.M. to 6:00 P.M.

INCOMPLETE APPLICATION PACKAGES WILL NOT BE ACCEPTED

SAMPLE AFFIDAVIT
CERTIFIED PROPERTY OWNERS LIST

STATE OF CALIFORNIA)
CITY OF BELL GARDENS) SS
COUNTY OF LOS ANGELES)

I, _____, hereby certify that the attached list contains the names and addresses of all persons to whom all property is assessed as they appear on the latest available assessment roll of the County of Los Angeles within the area described in the attached application and for a distance of five hundred (500) feet from the exterior boundaries of property legally described on the attached application.

DATE

NAME

Subscribed and sworn to before me this _____ day of _____, _____.

NOTARY PUBLIC

SAMPLE PROPERTY OWNERS LIST

6227-026-900
Name
Address
City, State, Zip

6227-026-900
Name
Address
City, State, Zip

6227-026-900
Name
Address
City, State, Zip

6227-026-900
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SAMPLE VICINITY MAP

