

# **DESIGN REVIEW (DR) APPLICATION**

**PREPARED BY:**

Planning Division  
Community Development Department  
City of Baldwin Park

January 24, 2022



**DESIGN REVIEW**

**CITY OF BALDWIN PARK  
14403 E. PACIFIC AVE.  
BALDWIN PARK, CA 91706  
(626) 813-5261**

**APPLICATION INFORMATION**

Name of Applicant(s) \_\_\_\_\_  
 Applicant's mailing address \_\_\_\_\_  
 Phone No. \_\_\_\_\_ Email address \_\_\_\_\_  
 Owner(s) of Record \_\_\_\_\_  
 Owner's Address \_\_\_\_\_

**PROJECT INFORMATION**

Location \_\_\_\_\_  
 Assessor's Parcel Number(s) \_\_\_\_\_ Existing Zoning for Parcel \_\_\_\_\_  
 Gross Lot Size \_\_\_\_\_ S.F. Lot Coverage (building footprint/net lot size) \_\_\_\_\_ S.F.  
 Building Height \_\_\_\_\_ FT Number of Bedrooms \_\_\_\_\_  
 Existing Building Square footage \_\_\_\_\_ Proposed Building Square Footage \_\_\_\_\_  
 Purpose of Request \_\_\_\_\_

**CERTIFICATION STATEMENT:**

I/We understand that the DR Plan review shall be charged at a flat rate of \_\_\_\_\_ which will include two (2) revisions. After which I understand I will be charged a fee based hourly rate of staff time + actual cost of City Attorney if applicable. Should my fees be depleted at any time prior to the completion of the process, the process will be suspended until additional deposits, the amount of which shall be determined by the City Planner, are made. Failure to provide additional funds within ten (10) days after notification of depletion shall be cause for withdrawal of this application. I also understand that prior to the issuance of any future building permit(s) associated with this application, all fees must be collected and deposit accounts settled. Further I/we acknowledge the filing of this application and certify that all of the above information is true and accurate and that I/we have familiarized myself/ourselves with the relevant provisions of the Baldwin Park Zoning Code.

\_\_\_\_\_  
Signature

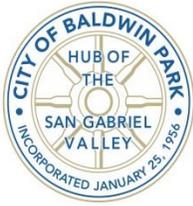
\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

	<b><u>Submittal Requirements</u></b>	<b><u>Quantity</u></b> <b>(All submittal materials shall be submitted electronically)</b>
	Architectural Plans (Site plan, Floor plan, Elevations)	One (1) PDF Copy
	Window and door Schedule	On floor plan page
	Color and materials legend	On elevations page
	Notarized Owner's Affidavit	One (1) PDF Copy

File No. \_\_\_\_\_ Fee: \_\_\_\_\_ Received By: \_\_\_\_\_ Date \_\_\_\_\_



# OWNER'S AFFIDAVIT

I/We \_\_\_\_\_ the undersigned, hereby declare under the penalty of perjury that I am the owner of the property involved in this request, and hereby authorize \_\_\_\_\_ to file an DESIGN REVIEW APPLICATION on the property located at \_\_\_\_\_ in the City of Baldwin Park for \_\_\_\_\_ (type of development).

\_\_\_\_\_  
Property Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Property Owner's Name (Printed)

\_\_\_\_\_  
Property Owner's Address

## **ACKNOWLEDGMENT**

\_\_\_\_\_  
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.  
\_\_\_\_\_

STATE OF CALIFORNIA  
COUNTY OF LOS ANGELES  
CITY OF BALDWIN PARK

On \_\_\_\_\_, before me, \_\_\_\_\_, a Notary Public, personally appeared \_\_\_\_\_, who proved to me on the basis satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

\_\_\_\_\_  
(Name and Notary Commission No.)