



# MASTER APPLICATION FORM

Planning & Permitting Department, 175 North Garfield Avenue, Pasadena, CA 91109

PROJECT ADDRESS: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

PROJECT DESCRIPTION: (Please describe demolitions, alterations and any new construction).  
\_\_\_\_\_  
\_\_\_\_\_

Assessor Parcel Number (s): \_\_\_\_\_

## APPLICANT/OWNER INFORMATION

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone #: (daytime) \_\_\_\_\_ fax #: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_ Company: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone #: (daytime) \_\_\_\_\_ (evening) \_\_\_\_\_ fax #: \_\_\_\_\_

## EXISTING PROPERTY INFORMATION

Zoning: \_\_\_\_\_ General Plan Designation: \_\_\_\_\_

Square footage of property: \_\_\_\_\_

Dimensions of property: \_\_\_\_\_

Paving square footage: \_\_\_\_\_

Open space/landscaping square footage: \_\_\_\_\_

Number of parking spaces: \_\_\_\_\_

Average slope of land if over 15%: \_\_\_\_\_

Geological hazards (e.g. seismic fault): \_\_\_\_\_

PROJECT #: \_\_\_\_\_

-FOR OFFICE USE ONLY-

Activity #: \_\_\_\_\_ Description: \_\_\_\_\_

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Date application/ submittals received: \_\_\_\_\_ Received by: \_\_\_\_\_ Date of Meeting: \_\_\_\_\_

Date application completed: \_\_\_\_\_ Historic Architectural Research Evaluation Required? (yes/no)

Public Arts Required? (yes/no)