



Case Number: EA \_\_\_\_\_

**ENVIRONMENTAL ASSESSMENT APPLICATION**  
**INSTRUCTIONS FOR FILING**

Chapter 11.10

This application and all necessary submittal requirements must be properly completed and have original signatures of the applicant(s) and property owner(s). **All fees and application materials must be received at the time of filing.**

**FILING FEE SCHEDULE**

Revised 1/2012

**ENVIRONMENTAL REVIEW:** All projects are subject to environmental review in accordance with the California Environmental Quality Act (CEQA). This environmental review is required in order to determine if the project will have an impact on the environment. *You will be notified of the environmental determination and any fees associated with completing the environmental review once the initial review of your project has been completed.* The types of environmental documents and their associated fees are listed below:

APPLICATION TYPE	FLAT FEE	DEPOSIT
<b>Environmental Assessment:</b>		
Hearing Publication/preparation (per hearing)	\$250.00	----
GIS/GPU/ZO Maintenance Fee	\$120.00	----
Notice of Exemption	\$150.00	----
Initial Study & Exemption	\$260.00	----
Initial Study / Negative Declaration	\$1,095.00	----
Initial Study & Mitigated Negative Declaration	\$2,625.00	----
Mitigation Monitoring Plans: Mgmt + hourly over 3 hrs	----	\$315.00 + \$105./hr. over 3 hrs.
EIR or EIS	----	Deposit is based on contract (full cost)
EIR Management Fee	----	10% deposit of contract (\$105/hr)
NCIC (SB18 cultural resources)	\$75.00	----
NOD*	\$50.00*	----
Department of Fish & Game Fees*	\$2,101.50/\$2,919.00*	----
<i>*You must pay the fee that is in place at time of recordation</i>		

**TO BE COMPLETED BY THE PLANNING DEPARTMENT**

Date Filed: _____	By: _____
TPM Fee Paid: _____	EA Fee Paid: _____
Receipt Number: _____	
Notes: _____	
For Department Use Only	
GP Designation: _____	Zoning Designation: _____
Chapter: _____	Property Owner Verified: _____
Yes <input type="checkbox"/> No <input type="checkbox"/> Minimum lot size allowed: _____	More Info Complete: Yes <input type="checkbox"/> No <input type="checkbox"/>
Setbacks: F _____ R _____ S _____ C _____	Special _____
Trakit information complete: Yes <input type="checkbox"/> No <input type="checkbox"/>	OPUD Clearance Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Application reviewed by: _____	Date: ___/___/___

**SUBMITTAL REQUIREMENTS**

1. **Site Plan:** One (1) copy of the map sheet 11" x 17" and three (3) copies of the map sheets 18" x 26" and folded to a size of no greater than 7" x 10" prior to acceptance. The plan must be drawn to scale and clearly indicate all dimensions and other pertinent information including the following:
  - a) Name and address of owner of record, sub-divider and engineer/surveyor.
  - b) Date of preparation.
  - c) Current Assessor's Parcel Number(s).
  - d) Property Dimensions and Acreage.
  - e) A scale and north arrow.
  - f) A location/vicinity map identifying the project site within an identifiable geographic area.
  - g) The location and dimensions of all existing and proposed buildings and structures including location from property lines.
  - i) Location of any easements
  - j) Location and nature of all utilities including septic tanks, leach fields, and community sewage systems and potable water sources (ie: wells, storage tanks, etc) in accordance with the requirements of the Yuba County Environmental Health Department.
  - k) Lines indicating the direction of the slope of the land and the approximate percent of grade, including all drainage features. Areas subject to inundation or overflow shall be so indicated. Contours shall be provided where the slope of the land is equal or greater than 10% on any portion of the subject site.
2. One copy of the **Assessor's Parcel Map** with the subject site clearly identified.
3. **Photographs** of the site.
4. One copy of a **Preliminary Title Report** or Parcel Map Guarantee which has been issued in the name of the current owner within the last six (6) months.
5. Signed "**Agreement to Pay**" form.
6. Consult with the various Community Development & Services Agency Departments to determine if other submittal requirements are applicable. Some areas within the County have unique submittal requirements such as areas covered by a specific plan or community plan.
7. Other information as may be required to facilitate a comprehensive evaluation of the application by the Yuba County Staff Development Committee.

**PART II:**  
**PROJECT INFORMATION**

1. Address and Location of Project Site:

2. Assessor's Parcel Number(s):
---------------------------------

3. Current Zoning of Property:
--------------------------------

4. Existing Use:
------------------

5. Proposed use of site/project description:

6. If the project involves a variance, conditional use permit, or rezoning application; identify which is applicable and why it is required:

7. List and describe any other permits and/or approvals required from state, federal, and/or other local jurisdictions:

**PART III:  
PROJECT INFORMATION**

**ENVIRONMENTAL SETTING:**

1. Describe the project site as it exists today, including information on topography, soil stability, plant and animal life, and any cultural, historical or scenic aspects. Describe any and all structures on the site including the use of said structures. Attach photographs of the site.

2. Describe surrounding properties including information on plant and animal life and on any cultural, historical or scenic aspects. Also provide information on the types of land uses present (residential, commercial, etc.) and the intensity of those uses (single-family, apartments, shops, department stores, etc.) Attach photographs.
North:
South:
East:
West:

**SPECIFIC ITEMS OF IMPACT:**

Describe in as much detail as necessary any potential impacts, either project specific or cumulative, in the following areas of concern (Please attach additional sheets if necessary):

1. Earth/Soils (Creation of unstable earth conditions, disruptions/compaction, increase in wind erosion, etc.):

2. Air (generation of pollutants, creation of objectionable odors, etc.):

3. Water: (changes in absorption rates, exposure of people/property to flood hazards, etc.):

4. Plant Life and Animal Life (changes in diversity or reduction in any rare or unique species/plants):

5. Noise (increase in noise or exposure of people to severe noise):

6. Population (alteration of location, distribution, density, or growth rate):

7. Transportation/circulation (generation of additional traffic, creation of hazards to other vehicles or pedestrians):

8. Human Health (creation or exposure of people to potential health hazards):

9. Utilities:
a. Existing/proposed solid waste collection (individual disposal, private carrier, city, etc.):
b. Liquid waste disposal (septic tank-leach system, private collection system, etc.):
c. Water supply (domestic well, irrigation district, private company, etc.):
d. Source(s) of energy:

ADDITIONAL INFORMATION:

Please provide any additional information that may be helpful in evaluating the projects potential for having environmental impacts:



Case Number: EA \_\_\_\_\_

**ENVIRONMENTAL ASSESSMENT APPLICATION**

**File in Person to: Yuba County Community Development & Services Agency – Planning Department  
915 8<sup>th</sup> Street, Suite 123, Marysville, CA 95901  
(530) 749-5470 main \* (530) 749-5434 fax**

**NOTE: APPLICATIONS THAT ARE NOT COMPLETELY FILLED OUT AND WHICH DO NOT HAVE ALL THE REQUIRED SUBMITTALS WILL NOT BE ACCEPTED FOR FILING. STAFF'S ACCEPTANCE OF THE APPLICATION OR DEEMING THE APPLICATION COMPLETE DOES NOT IMPLY THAT STAFF WILL RECOMMEND APPROVAL\_\_\_\_\_ (INITIAL) OR THAT YOU WILL RECEIVE APPROVAL FROM THE HEARING BODY.**

**Contact Information:**

*Please check the appropriate box below.*

**BILL TO** PROPERTY OWNER APPLICANT ENGINEER OTHER: (must submit contact information)

Applicant(s):  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street City/State/Zip  
Phone: (Business) \_\_\_\_\_ (Home) \_\_\_\_\_ Email: \_\_\_\_\_

Property Owner(s):  
Applicant(s):  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street City/State/Zip  
Phone: (Business) \_\_\_\_\_ (Home) \_\_\_\_\_ Email: \_\_\_\_\_

Developer(s):  
Applicant(s):  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street City/State/Zip  
Phone: (Business) \_\_\_\_\_ (Home) \_\_\_\_\_ Email: \_\_\_\_\_

Engineer/Surveyor:  
Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street City/State/Zip  
Phone: \_\_\_\_\_ (Fax) \_\_\_\_\_ Email: \_\_\_\_\_

**APPLICANT'S/OWNER'S\* DECLARATION UNDER PENALTY OF PERJURY**

(Must be signed by the Applicant and the Property Owner)

*I am (we are) the owner(s) of the property that is the subject of this application and I (we) have completed this application and all other documents and maps required herein, or have permitted the person(s) identified as the Applicant on Page 1 of this application to do so on my (our) behalf. Owner and/or Applicant hereby certify that the information and statements made herein are, in all respects, true and correct to the best of my (our) knowledge and belief.*

*I (we) also declare under penalty of perjury that the foregoing is true and correct as evidenced by my (our) signature(s) below.*

**Property Owner(s):**

Print: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Applicant(s):**

Print: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

\*Note: If the owner or applicant is other than an individual(s), a copy of a Resolution from the corporation or partnership agreement authorizing this application must be attached hereto.



# Community Development & Services Agency

915 8th Street, Suite 125, Marysville, CA 95901

Phone: (530) 749-5430 Fax: (530) 749-5424

Web: http://: www.co.yuba.ca.us

## Agreement to Pay Form for Project #: \_\_\_\_\_

### RECITALS

The costs to provide specific project related services are billed to the applicant at an hourly rate pursuant to the Yuba County Ordinance Code Chapter 13. As listed in the fee schedule of Chapter 13, the fees for services that have an applicable hourly rate have the word "deposit" beside the fee amount. This initial deposit amount and an original completed Agreement to Pay Form must be submitted to the Community Development and Services Agency (CDSA) in order for services to begin and be assessed at the specified hourly rate. The herein fees are intended to compensate CDSA for staff time and/or consultant time spent on the applicant's project.

Any person acting on behalf of the property owner for the work referenced below shall be requested to present documentation evidencing that they are the owner's representatives. This may include Power of Attorney, a notarized statement from the property owner or a copy of a contractual arrangement.

### TERMS OF AGREEMENT

I/We understand that Yuba County Ordinance Code Chapter 13 requires a deposit for services and CDSA will bill as services are rendered against that deposit. I/We agree to pay any required additional deposit(s) to maintain a positive deposit balance. I/We understand that all services by CDSA will cease for this project if the deposit is depleted to zero balance and a request for an additional deposit payment has not been fulfilled by the applicant within 30 days of the request. I/We further understand that until CDSA receives written notification of a change in the information provided below, I/We am/are responsible for payment for all services performed by CDSA. I/We understand that upon completion of the project any unused portion of the deposit will be returned to the applicant at the billing address on file or to any written change of address on file with CDSA.

In the event there is an outstanding balance due for the project and the request for payment is 90 days or more past due, I/We agree to allow and hereby consent to the delinquent payment amount being made by the Yuba County Board of Supervisors for placement of a lien on the property equal to the past due amount plus additional penalties as described in Yuba County Ordinance Code Chapter 13.

SITE INFORMATION	BILLING INFORMATION
APN:	Project Name:
Property Owner/Business Name:	Applicant:
Address:	Address:
Telephone:	Telephone:

*I declare under penalty of perjury under the laws of the State of California that I am the property owner or that I am authorized to enter into this fee agreement on his/her behalf. I have read the conditions concerning CDSA Fees and I understand that in the event that the billing party I have indicated does not pay required fees, I will be responsible for payment and failure to pay could result in a judgment or other lien being placed on the above referenced property. I further agree to advise CDSA in writing should I no longer be associated with the above referenced project/property and identify the new responsible party.*

Signature \_\_\_\_\_ Dated: \_\_\_\_\_ CDL# \_\_\_\_\_  
Printed Name \_\_\_\_\_ Telephone # \_\_\_\_\_