



**MINOR LAND DIVISION APPLICATION**  
**INSTRUCTIONS FOR FILING**

Chapter 11.15 (Ordinance #705)

This application (**plus two copies of the completed 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

APPLICATION TYPE	FLAT FEE	DEPOSIT
<b><u>Tentative Parcel Map:</u></b>		
Planning	\$3,320.00	----
GIS/GPU/ZO Maintenance Fee	\$120.00	----
Hearing Publication/preparation (per hearing)	\$250.00	----
Fire Safe Planning Fee	\$105.00	----
Public Works Fee	\$630.00	----
Environmental Health Fee-Served by Septic:		
2-4 lots + \$22 per lot	----	\$458.00 plus \$131/hr over 3.5 hrs
5+ lots + \$22 per lot	----	\$490.00 plus \$131/hr over 3.7 hrs
Health Fee-Served by Water & Sewer	----	\$261.00 plus \$131/hr over 2.0 hrs
<i>Total Initial Submittal \$4,425 + Appropriate EH Fees*</i>		

<b>ENVIRONMENTAL REVIEW:</b> 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. <i>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.</i> The types of environmental documents and their associated fees are listed below:		
Notice of Exemption	\$150	----
Initial Study & Exemption	\$260	----
Initial Study & Negative Declaration	\$1,095	----
Initial Study & Mitigated Negative Declaration	\$2,625	----
Mitigation Monitoring Plans: Mgmt (+ hourly over 3 hours)	----	\$315.00 + \$105.00/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	----
NOD*	\$50*	----
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>		

<b><u>Revision to Approved Tentative Parcel Map</u></b>		
<b><u>(If Applicable):</u></b>		
Planning Fees	\$1,240.00	----
GIS/GPU/ZO Maintenance F	\$120.00	----
Hearing Publication/preparation (per hearing)	\$250.00	----
Fire Safe Planning Fee	\$105.00	----
Public Works Fees	\$210.00	----
Health Fees-Served by Septic System:		
2-4 lots	----	\$458.00 plus \$131/hr over 3.5 hrs
5+ lots	----	\$490.00 plus \$131/hr over 3.7 hrs
Health Fee-Served by Water & Sewer	----	\$261.00 plus \$131/hr over 2.0 hrs
<i>Total Initial Submittal \$1,925 + Appropriate EH Fees*</i>		

<b>OTHER RELATED FEES</b>		
<b>For All TPMs</b> Tentative Parcel Map Extension	\$180.00	-----

**SUBMITTAL REQUIREMENTS**

1. **Tentative Map Requirements:** One (1) copy of the map sheet 11" x 17" and twenty (20) 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 buildings and structures including location from property lines.
  - h) Names, location, and the right-of-way or easement width of all existing and proposed interior and abutting streets.
    1. If access to the proposed subdivision is other than by an existing county road or state highway, the proposed access easement from an existing county road or state highway shall be shown on the tentative map along with appropriate recording information (book and page or document number). Should no legal access exist to the property, the tentative map shall not be approved until such time as a deeded, insurable, access easement(s) is(are) obtained to the property as may be required by the Yuba County Subdivision Ordinance Code.
    2. The physical characteristics and widths (ie: pavement, gravel, dirt, etc.) of the frontage roadway or access roadway to the property. Show roadside drainage ditches, direction of flow and distance to nearest cross culvert (show diameter and type of culvert), drainage facilities or natural drainage course.
    3. The location of all existing driveways and/or roads, on both sides of the frontage road, within 300 feet of any proposed access road into the subdivision.
    4. Approximate radii of all curves and approximate grades of the existing frontage road or access road and any proposed interior access roads.
  - i) Approximate lay-out, dimensions and area of each proposed parcel and new access roads. Each parcel shall be separately identified by number or letter. Letters shall be used only for parcels being created for combined use of all future owners or for parcels modified by lot line adjustments.
  - 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.
  - l) Proposed drainage for the subdivision from the new parcels and the interior access roads to approved drainage facilities or natural drainage way.
  - m) List of adjacent recorded subdivisions or known proposed subdivisions, lot-line adjustments, or any other application for entitlement, which may or will affect or be affected by the subject application.

2. One copy of the **Assessor's Parcel Map** with the subject site clearly identified.
3. **Photographs** of the site.
4. A **re-grading plan** or a description of the proposed re-grading if there is to be any significant re-grading other than smoothing out the undesirable minor irregularities.
5. **Soil studies if applicable (consult the Yuba County Environmental Health Department). \*\*Note: A public hearing cannot be scheduled for divisions relying on septic systems until soils analysis is performed demonstrating adequate soils exist for sewage disposal on the new parcels or a waiver is obtained.**
6. Two copies 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.
7. **Approved Facilities Park Plan** or Will Serve letter from OPUD for ALL TPM & TSTM projects located within Plumas Lake Specific Plan and/or North Arboga Study Area.
8. This application (**plus two copies of the completed application**)
9. Signed "**Agreement to Pay**" form.
10. 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.
11. Other information as may be required to facilitate a comprehensive evaluation of the application by the Yuba County Staff Development Committee.



Case Number: TPM \_\_\_\_\_

**MINOR LAND DIVISION 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: \_\_\_\_\_

2<sup>nd</sup> Property Owner(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.

**Project Description:**


**Address and Location of Project Site:**

**Assessor's Parcel Number(s):**

**Current Zoning of Property:**

**Size of Property (Acres/Square Feet):**

**Size of Property (Acres/Square Feet):**

**Number and Size of Parcels to be Created:**

**Current Use of Project Site:**

**Proposed Use of Project Site:**

**List other lands-by Assessor's Parcel Number-located within Yuba County and within three (3) miles of the subject property in which the owner of the subject property, or applicant, has or had an interest in:**

**Source and/or name of supplier, quality, and quantity of domestic water**

**Method of sewage disposal and/or name of agency:**

**Does the proposed project require a waiver?**

Yes\_\_\_ No\_\_\_ (If "Yes," a written request and fourteen (14) extra copies of the tentative map must be submitted).

**Additional information that may be helpful or necessary in evaluating this request:**


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**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   
No  Minimum lot size allowed: \_\_\_\_\_ More Info Complete: Yes  No   
Setbacks: F \_\_\_\_\_ R \_\_\_\_\_ S \_\_\_\_\_ C \_\_\_\_\_ Special \_\_\_\_\_ Trakit information complete: Yes  No  OPUD Clearance Yes  No  N/A   
Application reviewed by: \_\_\_\_\_ Date: \_\_/\_\_/\_\_



# 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 # \_\_\_\_\_