

City of Irwindale

Planning Department

Site Plan & Design Review Application **Administrative Approval**

City Use: _____

Date _____ Case No. _____

Code Sections _____

Receipt No. _____ By _____

This Application is Complete: _____
Planner Date

Please complete this form thoroughly to provide us with all the information necessary to complete the review process. The acceptance of the Application as Complete does not preclude the City from requesting further studies or information expanding on the submitted material in order to fully evaluate the proposal. If you need assistance, please contact the Planning Department at (626) 430-2209, from 8:00 am to 6:00 pm, Monday thru Thursday

General Information (Please print or type)

Project Name (if any) _____

Project Address _____

Nearest Cross Streets: N/S of _____ E/W of _____

Assessor's Parcel Number(s) _____ Site Area (Sq. Ft./Acres) _____

Lot Frontage (Ft.) _____ Lot Depth _____ Current Land Use _____

Existing Zoning _____ General Plan Land Use Designation _____

Detailed Proposed Use of the Property _____

Applicant's Name _____

Mailing Address _____ Phone _____

City _____ Zip _____ Fax _____

E-Mail Address _____

City Use:

Submittal Check List

General Application
Development Plans
Environmental Questionnaire
Hazardous Waste and Substances Statement
Section 17.90.060 and 17.90.110 Requirements as applicable for Wireless
Communications Facility
Filing Fee

Submittals Received	Planner	Date
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