

CERTIFICATE OF COMPLIANCE APPLICATION

FILING FEE: \$600 (plus Recorder's fees)
DEPARTMENT OF PLANNING AND BUILDING SERVICES

707 Nevada Street, Suite 5 · Susanville, CA 96130-3912 (530) 251-8269 · (530) 251-8373 (fax) www.co.lassen.ca.us

Form must be typed or printed clearly in black or blue ink. All sections must be completed in full.

This application consists of one page; only attach additional sheets if necessary.

FILE NO.

TI	page, only attach additional sheets	11 11000000011 1 1 1 1 1 1 1 1 1 1 1 1	
Property Owner/s		Property Owner/s	
Name:		Name:	
Mailing Address:		Mailing Address:	
City, ST, Zip:		City, ST, Zip:	
Telephone:	Fax:	Telephone:	Fax:
Email:		Email:	
<u> </u>			
Applicant/Authorized Representative*		Agent (Land Surveyor/Engineer/Consultant)	
Same as above:		Correspondence also sent to:	
Name:		Name:	
Mailing Address:		Mailing Address:	
City, ST, Zip:		City, ST, Zip:	
Telephone:	Fax:	Telephone:	Fax:
Email:		Email:	License #:
Project Address or Specific Location:			
Deed Reference: Book:	Page:	Year: Doc#:	
Zoning:		General Plan Designation:	
Parcel Size (acreage):		Section: Township:	Range:
Assessor's Parcel Number(s):			
Project Description:			
SIGNATURE OF PROPERTY OWNER(S): I HEREBY ACKNOWLEDGE THAT: I have read this application and state that the information given is both true and correct to the best of my knowledge. I agree to comply with all County ordinances and State laws concerning this application.		*SIGNATURE OF APPLICANT/AUTHORIZED REPRESENTATIVE (Representative may sign application on behalf of the property owner only if Letter of Authorization from the owner/s is provided).	
Date:		Date:	
Date:		Date:	