



# REZONE APPLICATION

PLANNING FILING FEE: \$2,085  
 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. \_\_\_\_\_

|                                      |                                      |
|--------------------------------------|--------------------------------------|
| <b>Property Owner/s</b>              | <b>Property Owner/s</b>              |
| Name:                                | Name:                                |
| Mailing Address:                     | Mailing Address:                     |
| City, ST, Zip:                       | City, ST, Zip:                       |
| Telephone:                      Fax: | Telephone:                      Fax: |
| Email:                               | Email:                               |

|   |   |
|---|---|
| <b>Applicant/Authorized Representative*</b> | <b>Agent (Land Surveyor/Engineer/Consultant)</b>      |
| Same as above: <input type="checkbox"/>     | Correspondence also sent to: <input type="checkbox"/> |
| Name:                                       | Name:   |
| Mailing Address:                            | Mailing Address:                                      |
| City, ST, Zip:                              | City, ST, Zip:  |
| Telephone:                      Fax:        | Telephone:                      Fax:                  |
| Email:                                      | Email:                      License #:                |

|  |       |                                  |                                       |
|--|-------|----------------------------------|---------------------------------------|
| <b>Project Address or Specific Location:</b> |       |                                  |                                       |
| <b>Deed Reference:</b> Book:                 | Page: | Year:                            | Doc#:                                 |
| <b>Zoning:</b>                               |       | <b>General Plan Designation:</b> |                                       |
| <b>Parcel Size (acreage):</b>                |       | Section:                         | Township:                      Range: |

|                                     |       |       |       |
|-------------------------------------|-------|-------|-------|
| <b>Assessor's Parcel Number(s):</b> | -   - | -   - | -   - |
| -   -                               | -   - | -   - | -   - |

|   |                         |
|---|-------------------------|
| <b>Present Zoning:</b>  | <b>Proposed Zoning:</b> |
| <b>General Plan Amendment Required:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>General Plan Amendment Submitted:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>*Staff Initial:</b> |                         |
| <b>Project Description:</b>   |                         |
|   |                         |

|  |  |
|--|--|
| <b>SIGNATURE OF PROPERTY OWNER(S): I HEREBY ACKNOWLEDGE THAT:</b> 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. | <b>*SIGNATURE OF APPLICANT/AUTHORIZED REPRESENTATIVE</b> (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:  |

**See associated process form for required attachments and instructions.**