



San Bernardino County

Land Use Services Department, Planning Division
San Bernardino County Government Center
385 N. Arrowhead Ave., San Bernardino, CA 92415-0187
15900 Smoke Tree Street; Hesperia, CA 92345
San Bernardino Office – (909) 387-8311 High Desert Office – (760) 995-8140
Fax (909) 387-3223 Fax (760) 995-8167

CERTIFICATE OF COMPLIANCE — MULTIPLE LOT INFORMATION SHEET AND APPLICATION

Deposit: \$5,960.00 for the “initial deposit.” (J606)

This process is used to legalize five (5) or more parcels that are contiguous and were created at the same time by the same person. It too may impose any necessary conditions to provide the appropriate improvements.

GENERAL PROCEDURES

1. Submit application and fees – County staff will use the checklist to determine whether your application may be accepted. The County’s standard Land Use Application shall be used and is contained in this packet.
2. Determination of Application Completeness – County staff will determine whether the materials you have submitted are adequate or if additional materials or reports are required. You will be notified in writing if any additional materials are required.
3. Environmental Action Determination – County staff will prepare an Environmental Initial Study in compliance with the California Environmental Quality Act (CEQA). It is through the Initial Study that the determination is made as to what type of environmental determination will be required. If an Environmental Impact Report (EIR) is required, staff will contact you to explain the process and the costs.
4. Application processing – The project planner will have the project and materials reviewed by all appropriate County Departments and Agencies. Any required corrections, questions or revisions to the plans or other materials will be reviewed by the project planner and then provided to you.
5. Recommendations, conditions of approval and final report – The project planner will prepare these materials for consideration by either the Director of Land Use Services or Planning Commission.

CHECKLIST OF SUBMITTAL MATERIALS

Please use this checklist as you assemble the materials for the submittal of your application. County staff will use the checklist to determine whether your application is acceptable for submission. **If your submittal package does not contain all of the information listed below, your application will not be taken in and receipted for processing.** If you have any questions about the items requested or if you wish to obtain information on processing schedules, please call the Application Intake Center at (909) 387-8311 or (760) 995-8140.

Section A – Fees/Deposit

1. _____ Check or money order made payable to “San Bernardino County” in the amount of **\$5,960.00** for the “initial deposit.” (J606)
2. _____ Receipt from the appropriate fire jurisdiction of payment of required review fees.
3. _____ Receipt from the Environmental Health Services Division (DEHS) of payment of required review fees. Contact DEHS at (800) 442-2283 for fee amount, applicability and payment prior to application submittal.

“Actual Cost Initial Deposit” – The basic review fees for this application are charged on an “actual cost” basis. Your application money is deposited into an account and the reviewing staff records the time spent processing your application. Your account is then charged for the staff time at established hourly rates (\$94 to \$190/hr.). You are responsible for all charges made to the account. If account funds are depleted an additional deposit will be required. If an additional deposit is required it must be paid to allow staff to continue processing. Any failure to pay the required deposit will result in suspension and possible termination of the review process. For more information on fees, please contact County Planning.

Section B - County Documents

4. _____ **Two copies** of a completed Land Use Application Questionnaire.
Only two copies of the application are required for the initial filing of this application. Revisions may or may not be required. When Application Intake Center staff determines that the application is complete, you will be required to submit additional copies of the application. The specific number of copies to be submitted will be determined at that time.
5. _____ Completed Hazardous Waste Site Certification form contained in this packet.
6. _____ **Two copies** of the Adequate Service Certification for water and sewer service. Please use the forms (A, W1, W2, S1 and S2) at the end of this packet.

Section C – Other Documents

7. _____ **Two copies** of Tentative Subdivision Map (per check list); folded accordion style, 8 x 10 1/2".
Only two copies of the Tentative Subdivision Map are required for the initial filing of this application. Revisions may or may not be required. When Application Intake Center staff determines that the map is complete, you will be required to submit additional copies of the Tentative Subdivision Map. The specific number of copies to be submitted will be determined at that time.
8. _____ **One copy** of the Tentative Subdivision Map reduced to 11" X 17".
9. _____ **Two copies** of current Preliminary Title Report for each lot or parcel, obtained from a title company that is not more than 60 days old.
10. _____ **One copy** of the appropriate assessor's map. This may be obtained from the Assessor's Office.

Section D - Special Studies

11. _____ **Two copies** of the preliminary drainage study.

Section E - Tentative Subdivision Map Checklist

Map shall be drawn to an Engineer's scale. A scale of 1" = 100' is preferred, but in no case should the scale be smaller than 1" to 200'. Entire tract and all information must be on one sheet. A remainder parcel larger than twenty (20) acres need not be drawn to scale.

The following information must appear on the tentative map. Incomplete maps will not be accepted for filing.

1. _____ Official Stamp Area and Plan Identification: A 4 inch by 14 inch area in the upper right hand side of the map shall be left blank and labeled “Official Use Only.” The lower right hand corner of the map shall contain the following information in this order: a) Assessor's Parcel Number(s) (APN:); b) Tract number (may be obtained from County Recorder, 387-8306) “Tract _____” c) the names, addresses and telephone numbers of the applicant, representative, recorded Property Owner(s) (if different from applicant), and map preparer and d) map preparation date and any revision date(s).
2. _____ The Registered Civil Engineer or Licensed Land Surveyor shall sign, seal, and provide their California registration or license number and the date of expiration of such license or registration.
3. _____ Names, addresses and telephone numbers of the record owner, subdivider and the engineer or surveyor preparing the map.
4. _____ List the names, addresses and telephone numbers of public utility companies which will serve the tract, including water supply and method of sewage disposal, telephone company and cable television company.
5. _____ North point, scale, date, boundary line and dimensions of the project. The direction of the north arrow should be shown pointing towards the top or right hand side of the map.

6. _____ Show entire assessor's parcel, and identify any remainder portion, and any contiguous properties under common ownership (whole or partial ownerships).
7. _____ Legal description of the land included within the proposed tentative map.
8. _____ The lot layout, the approximate dimensions of each lot (ditto marks not acceptable) and a number for each lot in consecutive numbers (circle last lot number). Any portion of property in common contiguous ownership not included in the division shall be labeled as a remainder parcel.
9. _____ Indicate the approximate acreage, the number of numbered lots, number of lettered lots and lot density proposed by the subdivision. Indicate acreage of any remainder parcel and total acreage of project, including numbered, lettered and remainder parcels.
10. _____ Existing and proposed zoning by lot numbers and/or lettered lots.
11. _____ Proposed use of any lettered lots.
12. _____ The number of lineal feet of new streets.
13. _____ Land Use district classification and development uses of adjoining property, including across any streets. Indicate distance from property line to any structures that are within 15 feet of property line.
14. _____ Front and side street building setback lines, delineated on the map, including dimensions.
15. _____ Locations, names and existing width of all adjoining highways, streets, alleys and/or ways. If none exist, indicate access to property.
16. _____ The approximate gradient or centerline profile for each proposed highway, street, easement and drainage improvement shown on the tentative map.
17. _____ The width and locations of all recorded and/or proposed easements, dedication of streets or rights-of-way.
18. _____ Approximate radius of all centerline curves on highways, streets or ways.
19. _____ The location, width and direction of flow of all water courses and the approximate location of all areas subject to flood waters, overflow or inundation.

Topographic information shall be required where the preliminary drainage study indicates that the subject property is affected by a tributary watershed area that is:

- (a) 320 acres or greater in the desert area.
- (b) 160 acres or greater in the valley area.
- (c) 40 acres or greater in the mountain area.

20. _____ Locate, by distance from existing and proposed property lines and other above ground structures, the placement on the property of all existing structures and other man-made features including buildings, utility poles, fences, driveways, signs, existing wells, sewers, septic systems (including leach lines), culverts, bridges, drain pipes, fire hydrants and/or sand, gravel or other excavations within the tentative tract. Indicate which existing structures will remain and which will be removed.
21. _____ The accurate contour of the land shall be delineated at intervals of not more than two (2) feet if the slope of the land is less than ten percent (10%) and of not more than five (5) feet if the slope of the land is ten percent (10%) or greater.

Topographic information shall be obtained by aerial or field survey done under the supervision of a licensed land surveyor or registered civil engineer. [Elevations shall be based upon 1927 datum and the bench shall be one accepted by the County Surveyor.]

22. _____ Vicinity map of the area showing the proposed tract in relation to any adjacent tracts, established roads, landmarks, etc., so that site can be easily located. Indicate the proposed access route to the site from nearest public maintained road.
23. _____ In a subdivision consisting of a condominium project or a planned development, the tentative map shall show the approximate location of all building envelopes and other structures to be erected by dashed lines [with no unit or space numbers, sidewalks, parking areas, etc., shown.]
24. _____ Preliminary grading as per enclosed instructions. If slope is less than 5%, show pad elevations with toe and foot of slope if they exceed three (3) feet. If lot sales only, note on map.
25. _____ Show all regulated native trees or plants on the site. Highlight any of these trees or plants that are within 100 feet of any area that will be disturbed by a proposed roadway, building site or other land disturbing activity. Highlight all regulated trees or plants that are proposed to be removed in accordance with San Bernardino County Code Title 8, Division 9. If no regulated trees or plants exist on site, indicate this by a note on the map.

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LAND USE APPLICATION QUESTIONNAIRE

Complete all sections of this application. Please refer to the checklist contained in the information packet for complete information on submittal requirements. The information furnished in this application will be used in evaluating your project pursuant to the California Environmental Quality Act (CEQA). If you believe an item does not apply to your project, mark it "N/A". Do not leave any blank spaces. If you have any questions about items requested on this form, please call the Application Intake Center at (909) 387-8311. **Please use no more than four lines to answer any question. If more space is needed, use Attachment A on page 5 of this application questionnaire.**

APPLICATION TYPE: _____ **T.T.P.M.#:** _____
[Take "type" from the top of the cover sheet, i.e. "Conditional Use Permit," "Tentative Tract," etc. (if a tentative map is involved include the map number)]

All Assessor's Parcel Numbers (APNs): _____

Section 1 - Applicant Data

Applicant Name: _____
Firm Name: _____
Address: _____
City: _____ Zip: _____
Phone: _____ FAX No.: _____ E-Mail: _____

Section 2 – Property Owner Data (If same as above check)

Property owner(s) of record: _____
Firm Name: _____
Address: _____
City: _____ Zip: _____
Phone: _____ FAX No.: _____ E-Mail: _____

Section 3 – Representative Data (If same as above check)

Representative's Name: _____
Firm Name: _____
Address: _____
City: _____ Zip: _____
Phone: _____ FAX No.: _____ E-Mail: _____

Section 4 – Architecture/Engineering Representative Data (If same as above check)

Representative's Name: _____
Firm Name: _____
Address: _____
City: _____ Zip: _____
Phone: _____ FAX No.: _____ E-Mail: _____

To be completed by County Staff: Filing Date: _____ Project No.: _____ JCS Project No.: _____

Section 5 – Project Description and Location/Legal Data

Briefly describe the project and use:

Land Use District: _____

Overlay Districts: _____

Legal Description: Township: _____ Range: _____ Section: _____

USGS Quad Name: _____

Location: Community: _____ Nearest cross street: _____

Street name: _____ Side of street: _____

Site Size (Gross acres or square footage): _____ Number of lots: _____

Site Address: _____

Proposed Development Area: _____

Size of Proposed Buildings: _____

Previously approved land use applications for this site: _____

Are you filing other land use applications for this site at this time? Yes No

If yes, please list other application types _____

UTILITIES:

Water: _____
(Name of Provider)

Is the site presently served? Yes No

If an extension is necessary, how long will it be? _____

Are any existing or proposed wells within 200 feet from any existing or proposed liquid waste disposal system?

Yes No If yes, attach an explanation

If this is a Tentative Map application, how many service connections have already been made to the existing water system? _____

Sewage Disposal: Septic? Yes No

Sewer : _____
(Name of Provider)

Is the site presently served? Yes No

If an extension is necessary, how long will it be? _____

If septic system/leach lines are proposed or existing, attach information showing proposed or existing location and how the size of the sewage disposal area was determined

Gas: _____
(Name of Provider)

Is the site presently served? Yes No

If an extension is necessary, how long will it be? _____

Electricity: _____
(Name of Provider)

Is the site presently served? Yes No

If an extension is necessary, how long will it be? _____

Phone: _____
(Name of Provider)

Is the site presently served? Yes No

If an extension is necessary, how long will it be? _____

Cable TV: _____
(Name of Provider)

Is the site presently served? Yes No

If an extension is necessary, how long will it be? _____

Section 6 - Environmental Setting

Be sure to answer all of the questions. This information is necessary to evaluate the project under the California Environmental Quality Act (CEQA). You must provide additional information for any answers marked "yes" or "uncertain" in a letter of explanation attached to this application.

1. When do you anticipate starting construction? _____

2. Will grading be required? Yes No

If so, how many cubic yards will be cut? _____ How many cubic yards will be filled? _____

3. Is the project phased? Yes No

If yes, describe the phasing: _____

4. If residential, indicate the number of units or lots. _____

5. If commercial, provide information describing the type of commercial activity proposed, along with square footage of sales area and loading facilities.

6. If industrial, attach information indicating type of industrial activity proposed, square footage of building, estimated employment per shift and loading facilities.

7. If institutional, attach information indicating major function, estimated employment per shift estimated occupancy and loading facilities.

8. Will the use require truck activity? Yes No

If yes, give truck type(s) and number of axles : _____

What is the gross weight of each vehicle: _____

YES **NO** **UNCERTAIN**

9. Will the project change scenic views or vistas from existing residential areas, public lands or roads?

10. Will there be a change in dust, ash, smoke, fumes or odors in the vicinity of the project?

11. Has the site been surveyed for historical, paleontological or archaeological resources?

12. Is the site on filled land or on slope of 10 percent or more?

13. Will there be the use or disposal of potentially hazardous materials, such as toxic substances, flammables, or explosives?

14. Will there be a change in lake, stream, or ground water quality or quantity, or alteration of existing drainage patterns?

15. Will there be any substantial change in existing noise or vibration levels in the vicinity?

16. Will there be a substantial change in demand for public services (police, fire, water, sewage, etc.)?

17. Has a traffic study been prepared for this site or has the site been included in another traffic study?

18. Will the project generate significant amounts of solid waste or litter?

19. Will the project change any existing features of hills or make substantial alteration of ground contours?

20. Will there be a substantially increase in fossil fuel consumption (electricity, oil, natural gas, etc.)?

21. Is there a relationship to a larger project or series of projects?

22. List any previous environmental documents or technical studies prepared for this site:

23. Describe the project site, as it exists before project implementation, including information on topography, soil stability, plants and animals, and any cultural, historical, or scenic aspects. On an attachment describe any existing structures on the site, and the use of the structures.

24. On an attachment, describe the surrounding properties, including information on plants and animals and any cultural, historical, or scenic aspects. Indicate the type of land use (residential, commercials, etc.), intensity of land use (single family dwelling(s), apartment houses, shops, department stores, etc.), and scale of development (height, frontage, set-back, rear yard, etc.). Attach photographs of the vicinity.

Attachment A

(Please use this form to amplify any answer. Be sure to identify which question is being amplified.)

APPLICATION CERTIFICATE

ALL OWNERS OF RECORD MUST SIGN THIS CERTIFICATE: (Attach it to the application)

List Assessor's Parcel Number(s) of the project property:

List Assessor's Parcel Number(s) of all property contiguous to the project property, which is owned or beneficially controlled by the individual(s) signing this Certificate: If there are no contiguous properties under the same ownership, STATE "NONE"—**do not leave blank.**

The undersigned owner(s) or officer(s) in the organization owning the lands for which this application is made, states that he/she or the organization is aware that the application is being filed with the San Bernardino County Planning Division, and certifies under penalty of perjury that the County applications forms have not been altered and that the information contained in this application is true and correct. I (We) acknowledge that additional materials may be necessary to provide to the Planning Division once the preliminary review of the specifics of the project has been initiated.

I (We) further agree that if any information contained in this application proves to be false or incorrect, the County of San Bernardino and any special purpose or taxing district affected thereby are and shall be released from any liability incurred if a certificate of compliance is or has been issued on basis of this application. I understand that under such circumstances any such certificate shall be null and void and shall be returned to the County for cancellation.

If this is an actual cost application, the applicant agrees to pay all accumulated charges for this project. For any type of application, the applicant also agrees to defend, indemnify and hold harmless the County, its agents, officers and employees from any claim, action or proceeding attacking or seeking to set aside, void or annul the approval of all or part of the matters applied for, or any other claim, action or proceeding relating to or arising out of such approval. This requirement includes the obligation to reimburse the County, its agents, officers and employees for any court costs or attorney fees which the County, its agents, officers or employees are required by a court to pay as a result of such claim, action or proceeding. The County agrees to notify the applicant of any such claim, action or proceeding promptly after the County becomes aware of it. The County agrees to cooperate in the defense provided by the applicant. The County may, at its own expense, participate in the defense of the claim, action or proceeding, but such participation will not relieve the applicant of applicant's defense and indemnification obligations.

Any persons signing with Power of Attorney for others must print the names of those individuals in the signature block and attach a notarized copy of the Power of attorney.

(Print) (APPLICANT OR LEGAL AGENT)

Signature Date

REGISTRATION NO.
(IF R.C.E. OR LICENSED LAND SURVEYOR)

(Print) (OWNER(S) OF RECORD)*

Signature Date

(Print) (OWNER(S) OF RECORD)*

Signature Date

(Print) (OWNER(S) OF RECORD)*

Signature Date

*If property is owned by corporation, partnership or other group signee should indicate corporate position or title and submit substantiating documentation (e.g. incorporation certificate).

HAZARDOUS WASTE SITE CERTIFICATION

This certificate must be submitted with all Development Case Applications except for legislative acts such as General Plan Land Use District changes.

INSTRUCTIONS

The applicant for this development project shall consult the most current list of identified hazardous waste sites at <http://www.calepa.ca.gov/SiteCleanup/CorteseList/default.htm> to determine whether the development project is located on a site included on the list.

CERTIFICATION

The undersigned owner, applicant or legal representative of the lands for which this development project application is made, hereby certifies under penalty of perjury, and in accordance with Section 65962.5(e) of the Government Code of the State of California that he (she) has consulted the most current and appropriate Hazardous Waste and Substances Sites (Cortese) List and further certifies that the site of the proposed development project:

Is not located on a site which is included on the Cortese List dated: _____

OR

Is located on a site included on the Cortese List dated: _____.

List all of the Assessor Parcel Numbers (APNs) of the project property:

Printed Name of Person Certifying this Review

Signature of Person Certifying this Review

Date

ADEQUATE SERVICE CERTIFICATION WATER AND SEWER INFORMATION SHEET AND APPLICATION

Certification that adequate water and sewer service is available for a development project is required to be submitted along with the application for most development projects. Please refer to the Information Sheet Checklist of Submittal Materials for the specific type of development application you are submitting to determine whether this completed Adequate Service Certification packet must be submitted.

The Adequate Service Certification package is designed to certify the availability of adequate water supply, sewage disposal and fire protection for your project.

INSTRUCTIONS:

The following summary of adequate service certification forms lists the appropriate forms to be utilized to ensure the availability of adequate water/sewer services. Project specifics will determine the applicability forms.

SUMMARY OF ADEQUATE SERVICE CERTIFICATION FORMS

PROPERTY INFORMATION

- (1) **Form A** The applicant shall complete the form and provide a copy to each certifying agency.

WATER

- (2) **Form W1** This form be completed when the proposed project is located within the service area boundaries of a water service utility. The water service utility will either certify that adequate facilities exist to satisfy domestic water service requirements or that financial arrangements have been made with the applicant to provide that capability.
- (3) **Form W2** This form shall be utilized when the proposed project is not located within the service area boundaries of a water service entity and a water well will be utilized as the domestic water source. The Department of Public Health, Division of Environmental Health Services will complete this form.

SEWER

- (4) **Form S1** This form shall be completed when the proposed project is located within the service area boundaries of a sewer service entity. The sewer service entity will either certify that adequate facilities exists to satisfy sewerage requirements of financial arrangements have been made with the applicant to provide that capability. This form will also indicate that the proposed connection to the sewer service facility will not result in sewage flows which will exceed the sewage facility's design capacity.
- (5) **Form S2** This form will be utilized for on-site sewerage, when a sewer service entity is not available to service the proposed project. The County Department of Public Health, Division of Environmental Health Services shall complete this form.

FORM A

**PROPERTY INFORMATION FOR
ADEQUATE SERVICE CERTIFICATION**

Applicant completes the following information for subject property:

Applicant Name: _____

Mailing Address: _____

Phone: (____) _____ FAX No.: (____) _____ E-Mail: _____

Proposed Use/Project: _____

Tentative Tract/Parcel Number: _____

Assessor's Parcel Numbers: _____

Property Address: _____

Community: _____

Property Legal: Tract No. _____ Lot No. _____ Block No. _____

The following is a summary of the forms and when they are utilized to receive adequate service certification for the proposed project:

- | | |
|--|--------------------|
| 1. Proposed Water Service Utility Connection | Form A and Form W1 |
| 2. Proposed On-Site Well | Form A and Form W2 |
| 3. Sewer Service Utility Connection | Form A and Form S1 |
| 4. Proposed On-Site Sewage Disposal | Form A and Form S2 |

**FORM W1
PUBLIC WATER SERVICE CERTIFICATION**

Applicant Name _____ **APNs** _____

This certifies that the above referenced property is within the service area boundaries of this water service utility and that:

Service Information: (Check one)

- There are currently existing adequate source, storage and distribution line capacities to provide potable water to the referenced site in sufficient quantities to satisfy the domestic water service and fire protection requirements of the proposed use. The water mains to serve each proposed service connection are currently installed and operable.
- Financial arrangements have been made to install water mains for each proposed service outlet and any other necessary facilities to insure that the proposed use will have adequate source, storage and distribution line capacities to satisfy the domestic water service and fire protection requirements of the proposed use.
- It is financially and physically feasible to install water service facilities that will provide adequate source, storage and distribution line capacities for each proposed service connection that will satisfy the domestic water service and fire protection requirements of the proposed use.

Easement Information: (Check one)

- This agency has known water lines or easements on the subject property but they do not conflict with the proposed use as currently designed.
- The agency has water lines and/or easements on the subject property which conflict with the proposed project as currently designed. Applicant must revise plans and resubmit them to this agency for approval.

Fire Flow Information:

The proposed water system will provide:

- Gallons per minute 20 pounds per square inch for minimum _____ hour(s) duration.

There have been _____ service connections to the existing system. (For Tentative Map applications only.)

Please attach a description and plot map illustrating any affected water lines or easements and sign back page.

This commitment is subject to the ordinances, resolutions, regulations, rules, policies, procedures, standards and rate schedules of this water service agency and the applicant has agreed to the conditions of service including payment for the installation of the required on-site and off-site capital improvements outlined on the attached list (If any, please attach list). All water service facilities can and will be installed prior to construction of the proposed use and will comply with the California Waterwork Standards and applicable Fire Code and local Fire Code and local Fire agency regulations for fire flow. This commitment is subject to County approval of all necessary permits/applications and shall expire one (1) year from the following date.

Utility Manager or Designee Date

Water Service Agency Name: _____

Address: _____

Phone No.: () _____

**FORM W2
PRIVATE WATER SERVICE - (FOR DEHS TO COMPLETE)**

Applicant Name _____ **APNs** _____

The County Department of Public Health, Division of Environmental Health Services finds that:

- The subject property has a water well approved for use by the proposed project.
- Water system plans have been approved by the fire authority and DEHS.
- DEHS has reviewed a ground water (hydrologic) report prepared for the subject property and signed by a Registered or Certified Engineering Geologist or Civil Engineer which indicates there is sufficient quantity and quality of the proposed use.
- (Other) _____

This commitment shall expire one (1) year from the following date.

Signature—DEHS

Date

**FORM S1
SEWER SERVICE CERTIFICATION**

Applicant Name _____ **APNs** _____

To be completed by the Sewering Agency.

This certifies that the property referenced on Form A is within the service area boundaries of this sewerage agency and that: (check applicable).

- There are currently existing sewer trunk lines(s) of adequate capacity to provide sewerage service and such service will not exceed the design capacity of the lines.
- There are not currently existing sewer trunk line(s) of adequate capacity. However, it is financially and physically feasible to install sewer trunk lines that will permit adequate service to the referenced property.
- (Other) _____

This agency will commit to providing sewerage service to the referenced project subject to all applicable ordinances, resolutions, regulations, rules, policies, procedures, standards and date schedules. The applicant has agreed to the conditions of service including payment for the on-site and off-site capital improvements outlined on the attached list. (If any, please attach list). All sewer service facilities can and will be installed prior to occupancy of the proposed use and will comply with all federal, state, and country laws and regulations.

This commitment is subject to county review and approval of all necessary permits/applications, and shall expire on the following date _____ which represents the end of the three (3) year project approval period. Applicant must refile certification request if project extension of time request is filed.

By: _____ Date: _____

Title: _____

Name of Sewering Agency: _____

Address: _____

Phone No.: () _____

Please attach a description or plot plan showing existing or proposed sewer trunk line(s) to the referenced property.
.....

To be completed by the Publicly Owned Treatment Works (POTW) Waste Management Authority.

- This certifies that the above referenced property's proposed connection to this Publicly Owned Treatment Works will not result in sewage/septage flows which will exceed the plant's design capacity.
- This agency cannot certify that the referenced property's connection to this Public Owned Treatment Works will not result in sewage/septage flows which will exceed the plant's design capacity.

The waste management authority (does/does not) have adequate facilities to accept the sewage from the referenced property (circle one).

(Other) _____

By: _____ Date: _____

Title: _____

Name of POTW/Landfill: _____

Address: _____

Phone No.: () _____

Please attach a separate sheet describing the plant or landfill design capacity, sewage/sludge disposal capacity and existing excess capacity and the current number of committed connections, the current number of sewage commitments with their cumulative anticipated total flow.

The Department of Public Health, Division of Environmental Health Services has reviewed the above reference submittal:

- The referenced project is adequately serviced.
- The referenced project is not adequately serviced
- (Other) _____

cc: Planning Division DEHS _____ Date _____
California Regional Water Quality Control Board

**FORM S2
ONSITE SEWAGE DISPOSAL CERTIFICATIONS**

Applicant Name _____ **APNs** _____

The County Department of Public Health, Division of Environmental Health Services finds that:

- The subject property is in an area for which the department has sufficient information to assign sewage disposal design rate in compliance with the percolation report waiver criteria.
- The subject property has a percolation report which has EHS approval. The report contains sufficient information for the design of an on-site disposal system for the proposed use of the property.
- The subject property is required to have a percolation report for EHS review and approval.
- Existing septic system shall be certified by a qualified professional (P.E., C.E.G., REHS, C-42 contractor) that the system functions properly, meets code, and has the capacity required for the proposed project.

DEHS

Date

cc: Planning Division