



City of

HUNTINGTON PARK california

COMMUNITY DEVELOPMENT DEPARTMENT

6550 MILES AVENUE

HUNTINGTON PARK, CA 90255

TEL: (323) 584-6210 FAX: (323) 584-6244

PRELIMINARY REVIEW APPLICATION

A. Preliminary Review

The Preliminary Review process is intended to provide potential applicants with informal feedback prior to application submittal. A Preliminary Review is not a prerequisite to formal application submittal and is not intended to substitute or supersede the entitlement process. The Preliminary Review notifies the applicant, in advance, of the requirements of the Planning Division and other City Departments along with recommendations to the Planning Commission.

This review may not include recommendations and requirements from outside agencies (e.g., LA County Fire Department). Staff recommends the applicant contact such agencies directly to obtain their comments.

B. Preliminary Review Submittal Items

1. Preliminary Review Application
2. Three (3) sets of plans. All plans should be submitted on 24" x 36" paper and folded to 8 ½" x 11".
Set of plans shall include the following:

- A. Site Plan
- B. Floor Plan
- C. Elevations

The level of detail provided in the comments from City staff is dependent on the level of information provided on the plans.

3. One (1) CD Rom or USB drive containing all files in digital PDF and/or JPEG formats.
4. Digital photograph copies of site and adjacent properties (i.e. CD Rom or USB drive).

C. Fees:

- A. \$ 930.00 for Preliminary Review (1st and 2nd round of review)
- B. \$ 333.00 (Each additional review)

For further information, please contact the Planning Division by calling (323) 584-6210 or emailing Planning@hpcal.gov, between 7:00 a.m. and 5:30 p.m., Monday through Thursday.



CITY OF HUNTINGTON PARK
Community Development Dept. • Planning Division
6550 Miles Avenue, Huntington Park, CA 90255
Tel. (323) 584-6210 • planning@hpca.gov

PRELIMINARY REVIEW APPLICATION

FOR OFFICE USE ONLY

Date Filed: _____ File No.: _____ Fee/Receipt No.: **\$930.00** Initials: _____

PROJECT ADDRESS OR GENERAL LOCATION: _____

ZONING DESIGNATION: _____

ACCESSOR PARCEL NUMBER: _____

APPLICANT'S INFORMATION

Applicant: _____

Mailing Address: _____

Phone 1: _____ Phone 2: _____ Email: _____

PROPERTY OWNER'S INFORMATION

Property Owner: _____

Mailing Address: _____

Phone 1: _____ Phone 2: _____ Email: _____

REQUESTING PRELIMINARY REVIEW FOR *(check all that apply):*

☐ Conditional Use Permit ☐ Development Permit ☐ Variance

☐ Other (Describe): _____

In detail describe the proposed use and/or proposed development *(attached additional sheets if necessary)*:

CERTIFICATE AND AFFIDAVIT OF APPLICANT: I/We certify that all statements made on this application are true and complete to the best of my knowledge. I/We understand that any false statements may result in denial of the requested permit or revocation of any issued permit. **I/We further certify that I am, or have permission by, the property owner to conduct the proposed development applied for herein.**

Signature of Applicant

Date