



# CITY OF DEL REY OAKS

Use Permit:  
Choose all that  
Apply

- Conditional
- Minor
- Home Occupational
- Signage
- Auxiliary Building

Variance:  
Yes  
No

Architectural Review Type:  
Residential  
Commercial

Applicants Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Telephone#: \_\_\_\_\_ APN #: \_\_\_\_\_

Lot #: \_\_\_\_\_ Block: \_\_\_\_\_ Subdivision: \_\_\_\_\_

### INSTRUCTIONS:

1. Briefly, using as much detail as possible, describe the nature of your permit request.
2. For variance request, also include in writing A, B & C of section 17.44.020 along with a details plot plan.

Check here if additional materials are attached.

\_\_\_\_\_  
Applicant's Signature

I HAVE RECEIVED A COPY OF THE CITY'S FLAGGING/NETTING POLICY AND UNDERSTAND THE REQUIREMENTS THAT MUST BE MET Initial Here \_\_\_\_\_

\*\*\*\*\*

*-FOR OFFICE USE ONLY-*

APPLICATION # \_\_\_\_\_ DATE: \_\_\_\_\_

FEE CASH/CHECK/CC # \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_

DATE SCHEDULED FOR CONSIDERATION \_\_\_\_\_

APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_