

Non-Discretionary Design Review Application Form

Form ID: PER-400

A review for compliance with the Countywide Design Guidelines for development projects located in zones where the proposed use is permitted by right and the proposed associated structures are in compliance with objective development standards.

Project Information:

Project Name: _____

Project Site Address(es): _____

Project Assessor Parcel Number(s): _____

Additional Information. Check the following boxes as applicable:

PC Combining Zone. Check if this project is in the American River Parkway's Parkway Corridor (PC) Combining Zone.

Associated with the following pending or approved project: _____

Applicant Information:

Applicant Name (first and last name): _____

Applicant Company (if applicable): _____

Applicant Address (Street number, street name, city, and ZIP code):

Applicant Phone Number: _____

Applicant Email Address: _____

Owner Information:

Owner Name (first and last name): _____

Owner Company (if applicable): _____

Owner Address (Street number, street name, city, and ZIP code):

Owner Phone Number: _____

Owner Email Address: _____

Other Contact Information:

Other Contact Relation to Project: _____

Other Contact Name (first and last name): _____

Other Contact Company (if applicable): _____

Other Contact Address (Street number, street name, city, and ZIP code):

Other Contact Phone Number: _____

Other Contact Email Address: _____

Billing Party

Select **one** Billing Party: Applicant Property Owner Other Contact

Legal Authority and Consent to File Application – Fee Consent and Other Acknowledgments

An initial below indicates that you understand and agree to the item. If you do not understand an item, please ask the intake planner for an explanation.

___ I agree to pay all fees required to complete processing of this application.

___ I understand that the accompanying fees paid with the non-discretionary design review application is non-refundable.

___ I understand that the application for a non-discretionary design review must comply with all applicable use and development standards of the Sacramento County Zoning Code and Countywide Design Guidelines. In the event applicable use and/or development standards are not met, I understand that discretionary entitlements may be warranted and that the non-discretionary design review is not transferable.

___ I hereby give permission to County staff and other authorized personnel to conduct site inspections if necessary during the processing of this application. I consent to the posting of the address and contact information of all parties to this application on any website maintained by the County of Sacramento (the County).

___ I agree not to alter the physical condition of the property during the processing of this application by removing trees, demolishing structures, altering streams, and/or grading or filling. I understand that such alteration of the property may result in the imposition of criminal, civil or administrative fines or penalties, or delay or denial of the project.

___ I understand that if a non-discretionary design review application is inactive for a period of 90 days, the application will be withdrawn due to inactivity.

____ Applicant shall defend, indemnify and hold harmless the County and its agents, including consultants, officers and employees from any claim, action or proceeding against the County or its agents, including consultants, officers or employees to attack, set aside, void, or annul the approval of this application. This indemnification obligation shall include, but not be limited to, damages, costs, expenses, attorney’s fees, or expert witness costs that may be asserted by any person or entity, including the applicant, arising out of or in connection with the approval of this application, including any claim for private attorney general fees claimed by or awarded to any party against the County, and shall also include the County’s costs incurred in preparing the administrative record which are not paid by the petitioner. The County shall promptly notify the applicant of any claim, action or proceeding. Notwithstanding the foregoing, the County shall control the defense of any such claim, action or proceeding unless the settlement is approved by the applicant and that the applicant may act in its own stead as the real party in interest in any such claim, action or proceeding.

____ PLEASE BE ADVISED THAT THIS APPLICATION IS NOT APPROVED UNTIL THE ULTIMATE HEARING BODY HAS TAKEN ITS FINAL ACTION AND ALL APPEALS EXHAUSTED

Authorizations

The signature below signifies legal authority and consent to file an application in accordance with the acknowledge information from the preceding pages. The signature also signifies that the submitted information and accompanying documents are true and accurate, and that the items initialed above have been read and agreed to.

Applicant Signature: _____ Date: _____

Owner or Owner’s Agent’s Signature: _____ Date: _____

Applications will **not be accepted** without signature(s) of legal property ownership or official agent / authority to file. For a signature by an owner’s agent, an attached Letter of Authorization, Power of Attorney, or Contract to Purchase is required to be attached to this application. Signatures must either be electronic certified signatures (i.e. Adobe and DocuSign) or scanned wet signatures. Signatures using a cursive typeface are not acceptable.

Design Review Narrative

Instructions. Write an explanation of how the proposed project meets the [Sacramento County's Countywide Design Guidelines](#). As desired, attach additional pages or write as a separate letter.