PRELIMINARY REVIEW APPLICATION
P-14

Apply for this permit online

Community Development
Planning Division
1635 Faraday Avenue
(442) 339-2610
www.carlsbadca.gov
Refer to **IB-114** for more information

INSTRUCTIONS: Online applications require no appointments. Complete and sign Section 1 & 2 (APPLICATION, CONTACT AND CERTIFICATION). Have an existing online account? Visit the online portal (https://eg.carlsbadca.gov/), search the application under 'Apply for Development Permits' and follow the application steps. New to online permits or no online account? Click here and scroll to the bottom to sign up. Following initial application review, you'll receive email notification of fees due per the Master Fee Schedule. Review begins once fees are paid.

Assessor's Parcel Number(s):

Description of proposal (add attachment if necessary):

1. APPLICATION

Would you like to orally present your proposal to your assigned staff planner/engineer? ☐ **Yes** ☐ **No**

Please list the staff members you have previously spoken to regarding this project. Please state "N/A" if not.

FOCUS AREA(S): ☐ Site Design ☐ Land Use ☐ Architecture ☐ Zoning Interpretations ☐ Engineering Standards ☐ Other

2. CONTACT & CERTIFICATION

OWNER NAME (Print):	APPLICANT NAME (Print):
MAILING ADDRESS:	MAILING ADDRESS:
CITY, STATE, ZIP:	CITY, STATE, ZIP:
TELEPHONE:	TELEPHONE:
EMAIL ADDRESS:	EMAIL ADDRESS:
I CERTIFY THAT I AM THE LEGAL OWNER AND THAT ALL THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. _____ _____ SIGNATURE* DATE ***Owner's signature indicates permission to conduct a preliminary review for a development proposal.**	I CERTIFY THAT I AM THE LEGAL REPRESENTATIVE OF THE OWNER AND THAT ALL THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. _____ _____ SIGNATURE DATE

CITY USE ONLY
Project Number: **Development Number:**

FEE REQUIRED/DATE FEE PAID:

RECEIVED BY: