



Community & Economic Development Dept.
 2222 M Street, 2nd Floor
 Merced, CA 95340
TEL: (209) 385-7654
WEB: countyofmerced.com/planning

ZONING CLEARANCE

FILING REQUIREMENTS CHECKLIST

STEP 1	APPLICATION SUBMITTAL. Application submittal, at a minimum, shall include the items listed below. Incomplete submittals will not be accepted. Within 30 days of submittal, staff will review the application and will notify you, in writing, whether your application has been deemed complete or incomplete and indicate any necessary required information. Incomplete applications cannot be processed.
<input type="checkbox"/> APPLICATION	Completed Planning Permit Application with wet-ink or e-signatures. Application must be signed by all property owners or accompanied by documentation to authorize an empowered signee.
<input type="checkbox"/> COMPANION PAGE	Completed Zoning Clearance Companion Page .
<input type="checkbox"/> FILING FEE	Full payment of filing fee, based on latest adopted Fee Schedule .
<input type="checkbox"/> ENVIRONMENTAL FORM	Completed Environmental Form .
<input type="checkbox"/> SITE PLAN	Two (2) copies of a 11" x 17" site plan and 8.5" x 11" site plan (see Minimum Plan Requirements).
<input type="checkbox"/> FLOOR PLAN	Two (2) copy of floor plans (see Minimum Plan Requirements).
<input type="checkbox"/> DIGITAL COPIES	All submittal items saved on a CD or flash drive in a PDF format.
STEP 2	APPLICATION PROCESSING
CEQA	Staff will determine if the project is subject to environmental review under the California Environmental Quality Act (CEQA) and related additional fees.
REFERRALS	Staff will refer the application to applicable local, State, and Federal agencies for review and comments. Applicants may be invited to a meeting with County agencies to discuss project implementation.
STEP 3	PERMIT ISSUANCE. The Director will Issue a Zoning Clearance if the request complies with all Zoning Code provisions applicable to the proposed land use or structure.
STEP 4	SITE PLAN & DESIGN REVIEW. The proposed use may be subject to Site Pan Design Review if the project involves: <ul style="list-style-type: none"> ● Non-Residential New Construction ● Non-Residential Additions and Modifications ● Other Non-Residential Construction (Facades/exterior improvements, landscaping, parking lot modifications, fences/walls, and/or roof pitch changes) ● Outdoor Dining areas ● Joint/Shared or Off-Site Parking Plans ● Signage Applications may be processed concurrently or after the Zoning Clearance is issued (See Site Plan & Design Review Filing Requirement Checklist).



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ENVIRONMENTAL FORM

PROJECT INFORMATION & EXISTING CONDITIONS

Describe the project, including any new construction, demolition, relocation, phasing, and/or plans for expansion:

List and describe any other related local, state, and federal agencies permits/approvals:

Describe the natural characteristics on-site and nearby, include information on topography, natural slope, vegetation, drainage, soil stability, habitat, and any cultural, historical, or scenic resources:

FOR NEW CONSTRUCTION, ADDITIONS, AND REMODELS

By-Product	Estimated Generation:	Delivery/Disposal System	
Water:	_____ gpd	<input type="checkbox"/> Well	<input type="checkbox"/> Public Services District
Sewage:	_____ gpd	<input type="checkbox"/> Septic System	<input type="checkbox"/> Public Services District
Storm Water:	_____ cu.ft		
Solid Waste:	_____ cu.yd/day	gpd = gallons per day, cu.ft = cubic feet, cu.yd = cubic yard	

Grading			
Excavation:	_____ cu.yd	Fill:	_____ cu.yd
Dirt Exported:	_____ cu.yd	Dirt Imported:	_____ cu.yd

Describe construction timeline, equipment, and impacts (odor, noise, roadway/sidewalk closures):

DOES THE PROJECT INVOLVE:	YES	NO
1. Change in existing environmental features (vegetation, lakes, streams, rivers, hills, or ground contours)	<input type="checkbox"/>	<input type="checkbox"/>
2. Change in scenic views or vistas from existing residential areas or public lands or roads.		
3. Change in pattern, scale or character of the general area of project.	<input type="checkbox"/>	<input type="checkbox"/>
4. Significant amounts of solid waste or litter.	<input type="checkbox"/>	<input type="checkbox"/>
5. Change in dust, ash, smoke, fumes or odors in the vicinity.	<input type="checkbox"/>	<input type="checkbox"/>

STAFF USE ONLY

Project #: _____ Applicant: _____

