

PARCEL MAP WAIVER APPLICATION SUBMITTAL INSTRUCTIONS

In accordance with Section 9-3.302 of the City of Thousand Oaks Municipal Code, the Director of the Community Development Department may waive the filing of a parcel map, upon finding that the proposed division complies with all requirements as set forth in the Code Section above.

This application package is to be **submitted in person** at the Community Development Department public counter, located at 2100 E. Thousand Oaks Boulevard, Thousand Oaks, California, 91362. **Please follow the application submittal instructions detailed below. Failure to complete the application package as required may result in your package being rejected at time of submittal.**

Additionally, once your application is filed, the City has 30 days to review all submitted items and determine if it is complete for processing. If it is not accepted as complete for processing, you will be notified in writing of the missing information. You must resubmit the additional items which triggers another 30-day review period.

1. **Application:** The application shall be typed or printed legibly, in blue or black ink, with all requested information completed. The application must be submitted with an original signature before your application will be accepted as complete for processing.
2. **Filing Fee/Deposit:** The Thousand Oaks Municipal Code requires that a fee be paid at the time of filing to cover the costs incurred in processing the application. Refer to the City's Fee Schedule or contact the Community Development to determine the current filing fee.
3. **Title Report & Assessor Parcel Map:** One copy of the Title Report for the subject property and one copy of the Assessor Parcel Map depicting the subject lots must be submitted with your application.
4. **Plans:** Submit each plan listed below in bound sets as follows: 5 sets of plans (two bound/stapled rolled sets in 36" x 48" size, three bound/stapled sets in 11" x 17" size). (The City reserves the right to request more copies of plans in order to efficiently process your application package.)
 - A map of the land drawn to a scale not less than 1"=100' and showing the dimensions and area of existing lots and the dimensions and area of each proposed resulting lot.
 - Location of all existing structures, easements, improvements, oak trees and/or other legally protected trees; distances to existing property lines.

- Additional information as may be required by the City to determine compliance of your request with the Thousand Oaks Municipal Code.

All plans shall display the Title Block in the lower right-hand corner as well as a North Arrow. ***Only plans collated into sets will be accepted.***

5. **Electronic Files:** Submit a CD containing a .pdf version of all plans submitted with this application.
6. **Supplemental Information:** may be requested during processing in order to adequately process your case.





PROJECT #: _____

Community Development Department

2100 Thousand Oaks Boulevard • Thousand Oaks, CA 91362
Planning Division • Phone 805/449.2323 • Fax 805/449.2350 • www.toaks.org
Building Division • Phone 805/449.2500 • Fax 805/449.2575 • www.toaks.org

PARCEL MAP WAIVER APPLICATION AND AFFIDAVIT

I. PROPERTY OWNER INFORMATION (list all property owners/attach additional sheets if needed)

Name (person and title if applicable): _____

Company/Organization (if applicable): _____

Address: _____ Phone: (____) _____

City/State/Zip: _____ Fax: (____) _____

Email: _____ Mobile: (____) _____

Name (person and title if applicable): _____

Company/Organization (if applicable): _____

Address: _____ Phone: (____) _____

City/State/Zip: _____ Fax: (____) _____

Email: _____ Mobile: (____) _____

Name (person and title if applicable): _____

Company/Organization (if applicable): _____

Address: _____ Phone: (____) _____

City/State/Zip: _____ Fax: (____) _____

Email: _____ Mobile: (____) _____

Name (person and title if applicable): _____

Company/Organization (if applicable): _____

Address: _____ Phone: (____) _____

City/State/Zip: _____ Fax: (____) _____

Email: _____ Mobile: (____) _____

II. APPLICANT INFORMATION (The person/organization/entity the projects is being completed for.)

Name (person and title if applicable): _____

Company/Organization (if applicable): _____

Address: _____ Phone: (____) _____

City/State/Zip: _____ Fax: (____) _____

Email: _____ Mobile: (____) _____

III. PROJECT COORDINATOR/APPLICANT'S REPRESENTATIVE INFORMATION

Name (person and title if applicable): _____
Company/Organization (if applicable): _____
Relationship of Project Coordinator to Applicant: _____
Address: _____ Phone: (____) _____
City/State/Zip: _____ Fax: (____) _____
Email: _____ Mobile: (____) _____
Project is being done for Company/Organization: _____

IV. PROPERTY INFORMATION

Assessor's Parcel No.(s): _____

Street address (if not available, location description): _____

Current zoning of the property is: _____ as shown on the Thousand Oaks Zoning Map, Section(s) _____

Is this a gated community? Yes No

The **EXISTING** dimensions of each lot involved with the subject Parcel Map Waiver are as follows: (ATTACH SUPPLEMENTAL SHEET IF NECESSARY)

Lot No.	Lot Dimensions	Area in Square Feet	# of Acres
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The **PROPOSED** dimensions of each lot involved with the subject Parcel Map Waiver are as follows: (ATTACH SUPPLEMENTAL SHEET IF NECESSARY)

Lot No.	Lot Dimensions	Area in Square Feet	# of Acres
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The resulting lot(s) will receive access from which street/avenue: _____
Describe the nature of the subject Parcel Map Waiver and reasons for filing: _____



VI. AFFIDAVIT*

I declare under penalty of perjury, that I/we, _____,
am/are the (circle one) property owner, attorney of the property owner, or person with power of
attorney from the property owner for the property listed above, and that the foregoing is true and
correct, and that I am legally authorized to submit this application on behalf of the property
owner.

Executed at (city) _____, California, this _____ day of
_____, 20_____.

Printed Name and Title

Signature

***IF THE PROPERTY OWNER/APPLICANT** is a Corporation, the names, addresses and titles of all
officers of the Corporation shall accompany this application. If the property owner/applicant is a General
Partner, the name and address of all General Partners shall accompany this application.

(For Department Use Only)

Fee \$ _____ Date received: _____ Received by: _____

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RECORDING REQUESTED BY AND
WHEN RECORDED, MAIL TO:

City of Thousand Oaks
CITY CLERK'S DEPARTMENT
2100 Thousand Oaks Boulevard
Thousand Oaks, California 91362

(Space Above This Line for County Recorder's Use)

NOTICE OF MERGER

Pursuant to Section 66451.12 of the Government Code of the State of California and Section 9-3.1211 of Title 9 of the Thousand Oaks Municipal Code, notice is hereby given by the City of Thousand Oaks that the parcels of real property described below and located within the City of Thousand Oaks, County of Ventura, State of California, are contiguous and under common ownership and have been merged with the consent of the property owners of record.

CASE NO. _____ **Applicant:** _____

DESCRIPTION OF PROPERTY:

OWNER(S) OF PROPERTY DESCRIBED ABOVE HAVE REQUESTED AND CONSENTED TO SUCH MERGER: (**NOTE:** ALL SIGNATURES MUST BE NOTARIZED ON 8½" x 11" SHEET.)

Signature

Date

Signature

Date

Signature

Date

Signature

Date

AUTHORIZED CITY REPRESENTATIVE:

COMMUNITY DEVELOPMENT DEPARTMENT