

# **CITY OF DANA POINT**

PUBLIC WORKS – ENGINEERING SERVICES 33282 Golden Lantern, Suite 212 Dana Point, Ca 92629 949.248.3554 (www.danapoint.org)

# **ADDRESS ASSIGNMENT** Requirements and Submittal Checklist

The following actions are **required upon or prior to the 1<sup>st</sup> submittal** for all Address Assignment Applications. Public Works Staff will work with applicants to assist as needed in preparing documents for a complete submittal. **No Partial Submittals will be accepted.** 

3 Copies Ea. (unless otherwise noted)

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#### Release from Planning Department prior to 1<sup>st</sup> submittal

Approval is indicated by completion of Planning review section on the Lot Line Adjustment application.

## Completed and Signed Address Assignment Application

See attached application ATTACHMENT 010. Fill in "NA" for all sections not applicable.

#### Transmittal Letter listing out all contents of submittal package

At each re-submittal include Permit Record number on all Transmitted items to the city. For 1<sup>st</sup> submittal it can be handwritten when the number is issued.



#### **Addressing Plan**

Submit an Addressing Plan on 8.5x11 or 17x17 format. The plan must include enough addresses of the surrounding properties to allow a thorough review.

#### FEES

No Plan Check fee is due at time of application submittal. Total processing fees of \$177 dollars per address changed or assigned will be due upon approval of address change/assignment.

### **For Information Only**

- Engineering requires 10 business days (maximum) to check your application documents. The applicant will be notified if corrections are required to documents submitted or if permit is ready for issue.
- Approval of the Address Assignment will be indicated by a signed letter from the City of Dana Point presented to the applicant describing the change and notifying all applicable service providers that the change has is recognized by the City.



**Change to Existing New Assignment(s)** (Submit Addressing Plans for either type)

## Existing Address(s): (FOR CHANGES ONLY) \_

Proposed Address(s): \_

Property Owner's / Business Name:		APN:			
Address:	City	State:	Zip:		
Email:		Phone:			
Applicant (if not owner):		Туре:			
Address:	City:	State:	Zip:		
License Class / Number:		Phone:	•		
INFORMATION SUPPORTING ADDRESS ASSIGNMENT REQUEST					
		- See Attached A	Addressing Plans		
Is application related to an ongoing or recent Project? P	ERMIT #ENG	Y	es No		

Are there conditions of approval assigned for this project? **RESOLUTION #**\_\_\_\_\_ Yes No

I hereby acknowledge that I have read the application and state that the information I have provided is correct and agree to comply with all City Ordinances, State Regulations, and the provisions and conditions of any permit issued pursuant to this application.

Print Name:	 Owner	Agent	
			Company Name
Signature :	 D	ate Signed	: