

} Credit Card #:

City of Oroville
Planning Division - Community Development Department

1735 Montgomery Street Oroville, CA 95965-4897 (530) 538-2420 FAX (530) 538-2426 www.cityoforoville.org

ΓRAKIT#:	
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LANDMARK MODIFICATION PERMIT

(Pleas	se print clearly and illi in/provide all the	at apply)
REQU	TRED FOR A COMPLETE APPLIC	CATION
	leted and signed Application Forms	
{ } Devel	opment Review (\$500) + 6% Tech Fee	= \$530
	IDENTIFICATION DATA	
Name of Property:		
Address:		
Construction Date:		
Architect/Designer:		
Builder:		
Present Ownership		
Name:	Address:	Phone #:
Form Prepared By (Applicant)		
Name:	Address:	Phone #:
Any determination regarding a landmark me	odification permit shall be considered ions of the California Environmental	d a discretionary action and shall be subject to all
	APPLICABILITY	
Please check all that apply. A landmark modifichange the exterior appearance or otherwise aff		restoration, rehabilitation or alteration that would ne following:
 { } 1. Structure or site is designated as a Califo { } 2. Structure, building or site has an existing { } 3. Buildings, structures or improvements ar (DH-O) district. 	landmark designation through the City	of Oroville.
* If the subject improvement has not previously Historic Advisory Commission shall make thi		t is a contributing feature of the DH-O district, the
**A landmark modification permit shall be requ	uired only for contributing features of the	he DH-O district.
	RIGHTS GRANTED	
A landmark modification permit authorizes its has specified building, structure or significant feature provided by a building permit, grading permit of	re. A landmark modification permit sha	
	VIOLATION AND PENALTIES	
Any person or entity that alters any landmark or obtaining that permit shall be deemed guilty of day on which the violation is committed or permit the provisions of this section.	an infraction, and upon conviction shal	nodification permit is required without first l be punished by a fine not to exceed \$1,000. Each arate offense and shall be punishable as such under
	APPLICANT'S SIGNATURE	
I hereby certify that the info	rmation provided in this application is,	to my knowledge, true and correct.
Applicant's Signature:		Date:
	OFFICE USE ONLY	
APPROVED BY:		DATE:

{ } Debit Card #:

__ { } Money Order { } Cash { } Check #_

ADDITIONAL INFORMATION	
e Community Development Department operates on a full cost recovery for processing of permits. Staff will charge their time and any expenses sociated with processing the application against the initial deposit. Fees that have been captured for the reimbursement of City expenses are non-	
fundable.	