



# City of Commerce

Economic Development and Planning Department  
2535 Commerce Way  
Commerce, CA 90040  
Tel. (323)722-4805 • [planning-division@ci.commerce.ca.us](mailto:planning-division@ci.commerce.ca.us)

## MASTER SIGN PLAN APPLICATION

### FOR OFFICE USE ONLY

**Project No:** \_\_\_\_\_ **Application Fee:** \_\_\_\_\_ **Date Submitted:** \_\_\_\_\_

**APPLICATION COMPLETENESS:** Only applications that include all of the required application requirements will be deemed “complete.” Please be advised that additional information may be required to complete your application.

The Economic Development and Planning Department retains the right to review documents and determine that they are adequate in their ability to convey the applicant’s request to the decision making body. Applicants will be notified, within **30 days** of filing the application and paying all required fees, whether or not their application is complete. Only projects with complete applications will be reviewed by the decision making body.

**NOTE:** The Master Sign Plan Application is also available at the following website address:

<https://www.ci.commerce.ca.us/city-hall/economic-development-and-planning/planning/planning-applications-fees>

A Master Sign Plan is required for all new nonresidential development projects with three or more tenant spaces, or for any nonresidential development involving the reconstruction and reuse of existing buildings with three or more tenant spaces. The Master Sign Plan is intended to integrate the architectural design of a site while providing flexible means of applying and modifying the sign regulations to ensure high quality display of multiple permanent signs.

### INSTRUCTIONS TO APPLICANT:

A. Complete all the items listed below. *Please print legibly.*

B. Submit the following:

- 1 completed Application
- 1 electronic copy of Site/Plot Plan to scale (*or 24”x 36” sheets if submitting in person*)
- 1 electronic copy of Floor Plan to scale (*or 24”x 36” sheets if submitting in person*)
- 1 electronic copy of Elevations to scale (*or 24”x 36” sheets if submitting in person*)
- Master Sign Plan shall include the following:
  1. Map of all buildings, parking lots, driveways, landscaped areas etc.
  2. Location of all proposed/future signs.
  3. Sign(s) design criteria (*including letter styles, colors, logo styles, installation details, illumination, sizes, materials, etc.*)
  4. Computation of maximum total sign area (*including wall signs, freestanding signs, etc.*), total number of signs on property, and height.
- 500 ft Radius Map
- Property Owners Mailing List and Labels within the 500 ft

C. Business/Organization Operations Plan Letter (*sample included*)

D. Occupant’s Permission to Enter and Investigate Site

E. Environmental Data Form

F. Affidavit

G. Application Fee (See link above for current 'Fee Schedule' information)

*\*For electronic submittals email all required documents to: [planning-division@ci.commerce.ca.us](mailto:planning-division@ci.commerce.ca.us)*

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**APPLICANT INFORMATION:**

Applicant: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Email: \_\_\_\_\_

Property Owner (If not the Applicant): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Email: \_\_\_\_\_

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**SUBJECT PROPERTY:**

Property Address: \_\_\_\_\_

Assessor Parcel No(s): \_\_\_\_\_ Present Zoning: \_\_\_\_\_

Is the property a multiple tenant site?:  Yes  No If yes indicate number of tenants: \_\_\_\_\_

Business frontage width (average): \_\_\_\_\_ Property frontage width: \_\_\_\_\_ No. of floors of bldg.: \_\_\_\_\_

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**APPLICANT REQUEST:** *Provide a detailed description of Master Sign Plan and reason for request. (attach additional sheets if necessary)*

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**APPLICANT'S STATEMENT OF FACTS:** *To assist the Planning Commission in reviewing your proposal, the Applicant shall answer the following questions as thoroughly as possible.*

- 1. What special project characteristics (e.g., the size of proposed signs, limited site visibility), does your proposal contain?**

2. **How does your proposal manifest exceptional visual harmony between the sign, buildings and other components of the site through the use of a consistent design theme, including but not limited to color, materials, location, scale and/or type of sign proposed?**
  
3. **How does the proposal promote and compliment the planned land use in the area of the site and enhance the aesthetics of the surrounding area?**
  
4. **How is the proposal compatible with the scale, character, design and lighting of adjacent property?**
  
5. **How does the proposal not obstruct natural scenic views from public right-of-way or public property?**

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**CERTIFICATE AND AFFIDAVIT OF APPLICANT:** I/we understand and agree to abide by all the regulations of the City of Commerce and any other conditions imposed for the permit/activity requested. I/we certify that all statements made on this application are true and complete. I/we understand that any false statement may result in denial or revocation of the requested application.

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Applicant Signature

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Date

*Property owner must sign this application. If this portion is completed by someone other than the property owner (i.e., property manager or landlord) written proof is required authorizing the individual to sign on behalf of the property owner.*

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Property Owner Signature

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Date

**FOR OFFICE USE ONLY**

Received By: \_\_\_\_\_ Application Fee: \_\_\_\_\_ Receipt No.: \_\_\_\_\_

Recommend to:  Approve  Not Approve Scheduled for Planning Commission: *(Date)* \_\_\_\_\_

Project Case No: \_\_\_\_\_

# AFFIDAVIT

STATE OF CALIFORNIA     )  
COUNTY OF LOS ANGELES    )

I, \_\_\_\_\_, am the owner / owner in escrow, of the property involved in this application. I am being duly sworn, depose and say that I am the applicant in the forgoing application that I have read the forgoing application for a Master Sign Plan and know the contents thereof. I certify that the forgoing is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Company

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Phone No.

I, \_\_\_\_\_, being duly sworn, depose and say that I am the applicant in the forgoing application, that I have read the forgoing application for a Master Sign Plan and know the content thereof. I certify that the forgoing is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Company

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Phone No.

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC  
COUNTY OF LOS ANGELES  
STATE OF CALIFORNIA



**CITY OF COMMERCE  
ECONOMIC DEVELOPMENT AND PLANNING DEPARTMENT**

<https://www.ci.commerce.ca.us/city-hall/economic-development-and-planning>

**OCCUPANT'S PERMISSION TO ENTER AND INVESTIGATE SITE**

City of Commerce  
Economic Development and Planning Department  
2535 Commerce Way  
Commerce, CA 90040

I, \_\_\_\_\_, as \_\_\_\_\_  
(owner or lessee)

and occupant of the property located at: \_\_\_\_\_,

do hereby authorize representatives from the City of Commerce to enter upon the above-mentioned property for inspection purposes and to obtain photographs of the subject property to prepare the necessary reports associated with Public Hearing Case: \_\_\_\_\_.

This authorization is null and void upon the final decision on this particular case, made either by the Planning Commission or City Council of the City of Commerce.

I do/ do not have a dog or other animals on the premises.  
(circle one)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**To be filled out by occupant (owner or lessee)**



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**SUPPLEMENT TO MASTER APPLICATION FORM  
ENVIRONMENTAL ASSESSMENT**

**EXISTING PROPERTY INFORMATION:**

This section of the Environmental Assessment is for information regarding the Existing property only.

*\*Your application is complete when all attached supplemental applications are completed and submitted. The case manager will notify you if any additional items or reviews are necessary.*

**Assessor Parcel Number(s):** \_\_\_\_\_

**Square Footage of Property:** \_\_\_\_\_ **Average slope of land if over 15%:** \_\_\_\_\_

**SURROUNDING LAND USES:**

**North:** \_\_\_\_\_ **East:** \_\_\_\_\_

**South:** \_\_\_\_\_ **West:** \_\_\_\_\_

**ADDRESS OF EXISTING BUILDINGS ON SUBJECT SITE:**

**Building A:** \_\_\_\_\_

**Building B:** \_\_\_\_\_

**Building C:** \_\_\_\_\_

**Building D:** \_\_\_\_\_

| <b>EXISTING BUILDING(S)</b>                                  | <b>BUILDING A</b> | <b>BUILDING B</b> | <b>BUILDING C</b> | <b>BUILDING D</b> |
|--|-------------------|-------------------|-------------------|-------------------|
| Total gross square footage                                   |                   |                   |                   |                   |
| Total commercial gross square footage                        |                   |                   |                   |                   |
| Total residential gross square footage                       |                   |                   |                   |                   |
| Year built   |                   |                   |                   |                   |
| Building footprint in square feet                            |                   |                   |                   |                   |
| Open space / landscaping square footage                      |                   |                   |                   |                   |
| Paving square footage  |                   |                   |                   |                   |
| Number of parking spaces                                     |                   |                   |                   |                   |
| Height of building in feet                                   |                   |                   |                   |                   |
| Number of stories  |                   |                   |                   |                   |
| Number of housing units                                      |                   |                   |                   |                   |
| Square feet to be demolished                                 |                   |                   |                   |                   |
| Standard Industrial Classification (SIC) Code                |                   |                   |                   |                   |
| Type of use (i.e. residential, commercial, mixed uses, etc.) |                   |                   |                   |                   |
| To be altered? ( yes / no )                                  |                   |                   |                   |                   |
| To be relocated? ( yes / no )                                |                   |                   |                   |                   |

**\* Continue to Proposed Information Section**

**PROPOSED PROJECT INFORMATION:**

This section of the Environmental Assessment is for information regarding the Proposed project only.



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ENVIRONMENTAL ASSESSMENT**

Estimated Valuation: \_\_\_\_\_  
 Explain if the project is located in a geological hazard area (i.e. Seismic fault, erosive soils): \_\_\_\_\_

Amount of grading proposed:      Cut: \_\_\_\_\_      Fill: \_\_\_\_\_      Balance: \_\_\_\_\_  
    Imported: \_\_\_\_\_      Exported: \_\_\_\_\_

Type of development (single family residence, apartments, condominiums, commercial, industrial, institutional): \_\_\_\_\_

Total housing units: \_\_\_\_\_ Is this an affordable Housing Project?    yes    no   # of affordable units: \_\_\_\_\_

Proposed Energy Types:    All electrical    Electric Kitchen    Electric HVAC    Gas kitchen

| <b>PROPOSED BUILDING(S)</b>                                  | <b>BUILDING A</b> | <b>BUILDING B</b> | <b>BUILDING C</b> | <b>BUILDING D</b> |
|--|-------------------|-------------------|-------------------|-------------------|
| Total gross square footage                                   |                   |                   |                   |                   |
| Total commercial gross square footage                        |                   |                   |                   |                   |
| Total residential gross square footage                       |                   |                   |                   |                   |
| Building footprint in square feet                            |                   |                   |                   |                   |
| Open space square footage                                    |                   |                   |                   |                   |
| Landscaping square footage                                   |                   |                   |                   |                   |
| Height of building in feet                                   |                   |                   |                   |                   |
| Number of stories  |                   |                   |                   |                   |
| Number of parking spaces                                     |                   |                   |                   |                   |
| Number of housing units                                      |                   |                   |                   |                   |
| Number of bedrooms   |                   |                   |                   |                   |
| Hotel / motel number of rooms                                |                   |                   |                   |                   |
| Hours of operation   |                   |                   |                   |                   |
| Number of employees  |                   |                   |                   |                   |
| Square feet of restaurant seating area                       |                   |                   |                   |                   |
| Number of fixed seats (restaurant)                           |                   |                   |                   |                   |
| Number of hotel / motel rooms to be demolished               |                   |                   |                   |                   |
| SIC Code   |                   |                   |                   |                   |
| UBC construction type  |                   |                   |                   |                   |
| Fire sprinklers? yes / no                                    |                   |                   |                   |                   |
| Type of use (i.e. residential, commercial, mixed uses, etc.) |                   |                   |                   |                   |

\* If there are additional buildings on the site, please attach a separate sheet with the above information for each building.

ATTACH AN EXPLANATION for any of the below questions answered with yes.

- yes**    **no**   Is this a phased project?  
 **yes**    **no**   Will there be demolition or removal of any structure of any age?  
 **yes**    **no**   Will there be any alteration of any existing structure?

**The following data must be submitted to the City of Commerce to assist in the preparation of the environmental determination for the proposed project.**





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**SUPPLEMENT TO MASTER APPLICATION FORM**  
**ENVIRONMENTAL ASSESSMENT**

**A. Brief Description of the Existing Environmental Conditions in the Area:**

**B. Existing Facilities:** Projects related to the operation, repair, maintenance or minor alterations of existing structures, facilities, mechanical equipment or topographical features involving negligible or no expansion of uses beyond that previously existed.

|     | Questions   | Yes | No |
|-----|---|-----|----|
| 1.  | Will the Project involve major interior or exterior alterations?  |     |    |
| 2.  | Will the Project involve major restoration, rehabilitation of deteriorated or damaged structures, facilities or mechanical equipment? |     |    |
| 3.  | Will the project involve additions to the existing structures which increase the floor area to fifty percent or by 5,000 square feet? |     |    |
| 4.  | Will the project result in the removal of any trees?  |     |    |
| 5.  | Will the project result in substantial air emissions or deterioration of ambient air quality?   |     |    |
| 6.  | Will the project result in the creation of objectionable odors?   |     |    |
| 7.  | Will the project result in the increases in existing noise levels or exposure of people to severe noise?                              |     |    |
| 8.  | Will the project result in changes to absorption rates, drainage patters or the rate or amount of surface runoff?                     |     |    |
| 9.  | Does the proposal involve a risk of explosion or the release of hazardous substances?   |     |    |
| 10. | Will the project generate substantial additional traffic?   |     |    |
| 11. | Will the proposal result in the in substantial increases in the amount of fuel or energy used?  |     |    |
| 12. | Will the project have an effect upon or result in a need for new or altered governmental services?                                    |     |    |
| 13. | Will the project result in the need for new or altered public utility systems?  |     |    |
| 14. | Will the proposal result in the creation of or exposure of people to any health hazard or potential health hazard?                    |     |    |

**C. Replacement or Reconstruction:** Projects related to replacement or reconstruction of existing structures and facilities where the new structures will be located on the same site as the structure replaced and will have substantially the same purpose as the structure replaced.

|     | Questions  | Yes | No |
|-----|--|-----|----|
| 1.  | Is the project designed to replace a commercial or industrial structure with a larger building(s)?                 |     |    |
| 2.  | Will the Project require grading involving removal or import of soil?  |     |    |
| 3.  | Will the project require the removal of any trees?   |     |    |
| 4.  | Will the project result in substantial air emissions or deterioration of ambient air quality?                      |     |    |
| 5.  | Will the project result in the creation of objectionable odors?  |     |    |
| 6.  | Will the project generate increased noise levels, or expose people to sever noise levels?                          |     |    |
| 7.  | Will the project result in changes in absorption rates, drainage patter or the rate or amount of surface runoff?   |     |    |
| 8.  | Does the proposal involve a risk of explosion or the release of hazardous substances?                              |     |    |
| 9.  | Will the project generate substantial additional traffic?  |     |    |
| 10. | Will the proposal result in the in substantial increases in the amount of fuel or energy used?                     |     |    |
| 11. | Will the project have an effect upon or result in a need for new or altered governmental services?                 |     |    |
| 12. | Will the project result in the need for new or altered public utility systems?                                     |     |    |
| 13. | Will the proposal result in the creation of or exposure of people to any health hazard or potential health hazard? |     |    |



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**ENVIRONMENTAL ASSESSMENT**

**D. New Construction:** Projects involving construction of new structures on vacant or cleared land. New construction includes conversion of a site from one land use to another, such as residential to industrial.

|     | Questions  | Yes | No |
|-----|--|-----|----|
| 1.  | Will the project involve the construction of three or more single family structures?   |     |    |
| 2.  | Will the project involve the construction of a motel, duplex or apartment with five or more units in three or more structures? |     |    |
| 3.  | Is the project a store, office or restaurant or other facility designed for an occupant load of 21 persons or more?            |     |    |
| 4.  | Will the project involve the removal of any existing residential structure(s)?   |     |    |
| 5.  | Will the project require grading that will result in the substantial removal or importing of earth?                            |     |    |
| 6.  | Will the project require the removal of any trees?   |     |    |
| 7.  | Will the project result in substantial air emissions or deterioration of ambient air quality?                                  |     |    |
| 8.  | Will the project result in the creation of objectionable odors?  |     |    |
| 9.  | Will the project generate increased noise levels, or expose people to sever noise levels?                                      |     |    |
| 10. | Will the project result in changes in absorption rates, drainage patter or the rate or amount of surface runoff?               |     |    |
| 11. | Does the proposal involve a risk of explosion or the release of hazardous substances?  |     |    |
| 12. | Will the project generate substantial additional traffic?  |     |    |
| 13. | Will the proposal result in the in substantial increases in the amount of fuel or energy used?                                 |     |    |
| 14. | Will the project have an effect upon or result in a need for new or altered governmental services?                             |     |    |
| 15. | Will the project result in the need for new or altered public utility systems?   |     |    |
| 16. | Will the proposal result in the creation of or exposure of people to any health hazard or potential health hazard?             |     |    |

**E. Alterations in Land Use:**

|    | Questions   | Yes | No |
|----|---|-----|----|
| 1. | Will the project involve major lot line adjustments, side-yard and setback variances which will create a new parcel or a change in land use or intensity? |     |    |
| 2. | Will the project require the issuance of a major encroachment permit?   |     |    |

**F. Compatibility with Planning and Zoning:**

|    | Questions   | Yes | No |
|----|---|-----|----|
| 1. | Will the project require a zone change in the Zoning Map and/or Zoning Ordinance? |     |    |
| 2. | Will the project require a change in the General Plan or any specific plan?       |     |    |

**G. Mitigation Measures:** Please discuss any measures which can eliminate or reduce to insignificant levels any significant adverse effect of the proposed project as indicated by yes answers in the above sections. (Use additional sheets if necessary)



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ENVIRONMENTAL ASSESSMENT**

**G. Statement of No Significant Environmental Effects:** If you have answered yes to any question in any of the above but feel that the project will have no significantly adverse environmental effect or that such effect or effects can be mitigated or eliminated, indicate your reasons below. (Use additional sheets if necessary)

I certify that the answers to the questions contained in this Environmental Assessment Form are true and correct to the best of my knowledge.

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
(DATE)

# Business/Organization Operations Plan Letter

Big Ben Furniture Company  
1000 South Anyplace  
Your City, CA 00000  
(323) 123-4567

DATE

To whom it may concern:

The following information is in answer to your request regarding the business operation to be conducted at the above address.

**PLEASE ANSWER THE FOLLOWING QUESTIONS. MUST BE TYPED! PROVIDE A DETAILED DESCRIPTION OF THE OPERATION CONDUCTED WITHIN THE SUBJECT SITE.**

- Indicate, **IN DETAIL**, the type of business proposed?
- Indicate the types of materials used as well as the types of materials stored on site?
- Indicate, in detail, how will the material be stored? i.e. racks, freezers, pallets or free standing?
- Maximum height of storage?
- Any chemicals? Explain.
- Will vehicles (trucks) be parked on site? How many? What type of trucks will be used?
- Type of equipment used. (Example: Clothing manufacturing - number of sewing machines, cutting tables, etc.).
- Hours of operation.
- Number of employees.
- Will there be any interior or exterior modifications proposed with the use? If yes, please explain and show on the site plan.

Sincerely,

Name  
Title