



City of Commerce

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

MISCELLANEOUS PERMIT APPLICATION

FOR OFFICE USE ONLY

Project No: N/A Application Fee: N/A 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 Miscellaneous Permit 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>

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 Plan (*or 8 ½” x 11 ” sheets if submitting in person*)

**For electronic submittals email all required documents to: planning-division@ci.commerce.ca.us*

GENERAL INFORMATION:

Applicant: _____

Address: _____

Telephone No.: _____ Email: _____

Property Owner: _____

Mailing Address: _____

Telephone No.: _____ Email: _____

PROJECT INFORMATION:

General Location or Project Address: _____

Assessor’s Parcel No(s): _____ Present Zoning: _____

PROJECT DESCRIPTION: (Check all that Apply)

- AC Unit/HVAC Water Heater Solar Panels
- Roof Replacement Fence/Block Wall Window(s) Replacement
- Other Improvements: (*Describe*)

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 of the requested permit or revocation of any issued permit.

Applicant Signature

Date

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Received By: _____ Application Fee: N/A Receipt No.: N/A

NOTES:

Approved: Not Approved: Planner: _____

CONDITIONS: