



FILING FEE: \$1,225.80 + COST OF CITY CONSULTANT

CITY OF RIALTO PLANNING DIVISION

APPLICATION FOR GEOLOGIC REVIEW

LEGAL OWNER INFORMATION: I hereby certify that I am (we are) the record owner(s) for property tax assessment purposes of the property encompassed by this application. I understand and agree that this application will not be deemed complete by the City until all filing fees and studies as required by Alquist-Priolo Earthquake fault Zoning Act, the State Division of Mines and Geology and Department policy, are filed with the Planning Division.

Date: _____ Name (Print): _____

Email: _____ Signature: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Telephone No. _____

Address of Property (if none, general location): _____

ASSESSORS PARCEL NUMBER(S): _____

Application will not be accepted without valid tax assessors parcel number(s)

COMPLETE LEGAL DESCRIPTION OF SUBJECT PROPERTY: Attach a copy of the most recent Grant Deed(s). If your request is not for the entire property described on the Grant Deed, provide a metes and bounds description. Also attach a plat map of the property.

APPLICANT: (if other than legal owner)

REPRESENTATIVE: (if other than applicant)

Printed Name: _____ Printed Name: _____

Address: _____ Address: _____

City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Phone: _____ Fax: _____

Email: _____ Email: _____

GEOLOGIC REPORT: Please submit four (4) copies of the complete geologic study.

FOR CITY USE ONLY:		
PROJECT NO. _____	HEARING DATE: _____	E.A.R.# _____
CASE NO. _____	DFG FEE: _____	FILING FEE: _____
DATE RECEIVED: _____	APPLICATION DEEMED COMPLETE _____	