CITY OF BARSTOW
COMMUNITY DEVELOPMENT

City of Barstow
Planning Division

APPLICATION FOR:
FINAL PARCEL MAP

FILING FEE (All fees are non-refundable):
$707.00 + actual consultant costs

Application No: PFPM#_____

Applicant: _____
Mailing Address: _____

Contact Person: _____
Mailing Address: _____

Phone Number: _____
E-Mail: _____

Phone Number: _____
E-Mail: _____

Architect: _____
Mailing Address: _____

Engineer: _____
Mailing Address: _____

Phone Number: _____
E-Mail: _____

Phone Number: _____
E-Mail: _____

Property Address/Location: _____
Assessor's Parcel Number(s): _____
Existing Zoning: _____
General/Comprehensive Plan Land Use Designation: _____
Brief Description of Project: _____

Certification:
I hereby certify that I am the record owner of all the property proposed for subdividing in this application. I hereby certify that the information furnished above, and in the attached exhibits, is the data and information required for the project's evaluation, and the facts, statements, and information presented are true and correct to the best of my knowledge.

Date: _____

Signature: _____
(Property Owner)

OR:

I hereby certify that I am NOT the record owner of all the property proposed for subdividing in this application, and that I have given consent to this proposed subdivision, per the attached letter. Said property is owned by:

Property Owner: _____
Mailing Address: _____

Phone Number: _____
E-Mail: _____

Date: _____

Signature: _____
(Applicant or Authorized Agent)

INCOMPLETE APPLICATIONS OR POOR QUALITY GRAPHICS WILL NOT BE ACCEPTED.

LOCATION: Barstow City Hall, 220 E Mountain View St, Suite A, Barstow, CA 92311
PHONE: 760-255-5161

OFFICE USE ONLY

Date Received: _____
Filing Fee: _____
Attachments: _____
Received By: _____

Hearing Date: _____
Action: _____
Receipt No: _____