

COUNTY OF LAKE COMMUNITY DEVELOPMENT DEPARTMENT

Courthouse - 255 N. Forbes Street • Lakeport, California 95453 • FAX (707) 263-2225 Building & Safety Division (707) 263-2382 • Planning Division (707) 263-2221

EXEMPT AGRICULTURAL BUILDING PERMIT APPLICATION

LEGAL OWNER:	APN:
MAILING ADDRESS:	
SITUS ADDRESS:	
OWNER'S DECLARATION:	
 shall NOT be a place of human habitation or a place of employmer shall it be used by the public. Any change in the use of the building is a violation of the Lake Coudeclared a nuisance under Chapter 13 of the Lake County Code. I am aware that I may be held liable for expenses incurred by the County under the County Code. I accept all liability for the structural integrity of the agricultural build NOTE: Minimum thresholds to qualify: (a) Size of Agricultural Build 	ry, grain, poultry, livestock, or other horticultural products. The structure of where agricultural products are processed, treated, or packaged, nor unty Zoning Ordinance and the Uniform Building Code and will be County of Lake for enforcement of a Nuisance Abatement Action ding.
Owner's Signature:	Date:
Complete the Agricultural Declaration listing the type(s) of agricultural use 2. Prepare a Site Plan depicting existing and proposed building(s) and struct reviewed and approved by the Agricultural Commissioner and the Environme 3. Specify the Use of the Proposed Agricultural Structures: AGENCY RAGRICULTURAL COMMISSIONER I FIND THAT THIS AGRICULTURAL ACCESSORY STRUCTURE IS INCID AGRICULTURAL USE OF THE PROPERTY. I HAVE REVIEWED THE ATT	ures, including septic systems and leach lines. The Site Plan must be ental Health Division prior to sign-off by the Building Division. EEVIEW DENTAL, APPROPRIATE, AND SUBORDINATE TO THE EXISTING
AGRICULTURAL COMMISSIONER SIGNATURE:	DATE:
DEPARTMENT OF PUBLIC WORKS FLOOD CONTROL FLOOD ZONE: ENCROACHMENT PERMIT NEEDED? ■ YES ■ NO DRAIN	ELEVATION:AGE/EASEMENTS PRESENT?
DPW SIGNATURE:	DATE:
DEPARTMENT OF WATER RESOURCES:	DATE:
ENVIRONMENTAL HEALTH SIGNATURE:	DATE:
PLANNING DIVISION DATE CLEARANCE ISSUED:PLANNER INITIAL DATE OF SITE VISIT/AGRICULTURAL REVIEW: PLANN THE USE AND LOCATION OF THE PROPOSES BUILDING(S) ARE PERMITTED IN	LS:SITE PRIMARILY USED FOR AGRICULTURE? I YES INO NER INITIALS:BY THE LAKE COUNTY ZONING ORDINANCE.
PLANNING DIVISION SIGNATURE:	DATE:

BUILDING & SAFETY DIVISION SIGNATURE:	DATE:
This Application complies with Section 5-4A of the Lake County	Code.
AGR	RICULTURAL DECLARATION
PROPERTY OWNER:	ASSESSOR'S PARCEL NUMBER:
SITE ADDRESS:	
AGRICULTURAL USE(S):	
I, as the property owner or their appointed representative	, hereby certify and declare that these agricultural uses are currently in operation
on this property. I authorize the County of Lake or author	rized representative(s) or designee(s) to make inspections at any reasonable time
as deemed necessary for the purpose of verifying these s	statements.
APPLICANT SIGNATURE:	DATE:
PRINTED NAME:	