



City of Desert Hot Springs

65950 Pierson Blvd. • Desert Hot Springs, CA 92240
Telephone (760) 329-6411 x 260 www.cityofdhs.org

OFFICE USE ONLY	
Case No.	
Fee	
Related Apps.	
Accepted By	

MEDICAL MARIJUANA MINOR MODIFICATION PERMIT APPLICATION (OPTION 2 – PHASE 0.5)

MINOR DEVELOPMENT PERMITS are intended to provide a method whereby minor changes may be made to existing, previously approved land use entitlements, without any additional impact or expansion of use or structure(s), pursuant to Section 17.120 of the Zoning Code. At the time of application submittal, a review of the location, design, configuration and impact of the proposed use shall be conducted by comparing such use to established standards and design guidelines. This review shall determine whether the permit should be approved by weighing the need for the benefits to be derived from the use against the impacts it may cause.

APPLICANT: _____
(please print)

MAILING ADDRESS: _____ Phone No. _____
CITY, STATE, ZIP: _____ Fax No. _____

PRIMARY CONTACT (if different): _____
(please print)

MAILING ADDRESS: _____ Phone No. _____
CITY, STATE, ZIP: _____ Fax No. _____

PROPERTY OWNER (if different): _____
(please print)

MAILING ADDRESS: _____ Phone No. _____
CITY, STATE, ZIP: _____ Fax No. _____

ENGINEER INFORMATION (required): _____
(please print)

MAILING ADDRESS: _____ Phone No. _____
CITY, STATE, ZIP: _____ Fax No. _____

CONTRACTOR INFORMATION (required): _____
(please print)

MAILING ADDRESS: _____ Phone No. _____
CITY, STATE, ZIP: _____ Fax No. _____

PROJECT LOCATION: _____

LEGAL DESCRIPTION (Lot & Tract or A.P.N.): _____

DETAILED DESCRIPTION OF PROPOSED MINOR MODIFICATION/CHANGES (attach explanation) _____

NAME OF APPLICANT: _____
(please print)

SIGNATURE OF APPLICANT: _____ DATE: _____

NAME OF PROPERTY OWNER(S): _____
(please print)

SIGNATURE OF PROPERTY OWNER(S) IF NOT SAME AS APPLICANT: _____
DATE: _____

_____ DATE: _____

(Separate written authorization by property owner to submit application may be provided)
**NOTE: FALSE OR MISLEADING INFORMATION GIVEN IN THIS APPLICATION
SHALL BE GROUNDS FOR DENIAL**

CITY OF DESERT HOT SPRINGS
MEDICAL MARIJUANA MINOR MODIFCATION PERMIT SUBMITTAL REQUIREMENTS

3 sets of plans in 24" x 36" size shall be submitted to the Community Development Department, unless otherwise noted or directed by staff. Plans are required to include, at a minimum, the following items at the time of submittal:

- 1. Filing fee: For a Minor Modification application (varies based on type of request)
- 2. Existing Site Plan: Drawn to scale and fully dimensioned, showing the existing project site and uses, including the following:

Property line boundaries, name, address and phone number of property owner, applicant, date of plan preparation, legal description, north arrow, a legend incorporating any symbols on the drawings, a vicinity map, existing structures and other site and adjacent features, including any driveways, curbs, gutters, sidewalks, existing and ultimate right-of-ways of any private and public streets, easements and all utilities.

- 3. Proposed Site Plan: Drawn to scale and fully dimensioned, showing the existing project site and uses, including the following:

Property line boundaries, name, address and phone number of property owner, applicant, date of plan preparation, legal description, north arrow, a legend incorporating any symbols on the drawings, a vicinity map, existing structures and other site and adjacent features, including any driveways, curbs, gutters, sidewalks, existing and ultimate right-of-ways of any private and public streets, easements and all utilities.

- 4. Proposed Floor Plan

- 5. Detailed Description/Explanation of Proposed Changes: For 0.5 temporary site, include site plan, security camera plan, lighting plan, and elevations showing types of structures to be utilized.

NOTE: INCOMPLETE APPLICATION SUBMITTALS WILL NOT BE ACCEPTED.