



CITY OF SACRAMENTO

DEPARTMENT OF TRANSPORTATION
ENGINEERING SERVICES DIVISION
DEVELOPMENT ENGINEERING

300 RICHARDS BLVD., 3RD FL. • SACRAMENTO, CA 95811-0218 • PH: (916) 808-8300 • FAX: (916) 808-1984

ADMINISTRATIVE CERTIFICATE OF COMPLIANCE APPLICATION

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PRIOR TO SUBMITTAL OF THIS APPLICATION, PLEASE READ THE “ADMINISTRATIVE CERTIFICATE OF COMPLIANCE REQUIREMENTS”, AVAILABLE FROM CITY STAFF OR ON CITY WEBSITE

TYPE OR PRINT LEGIBLY – SHOW ALL INFORMATION – use additional page if more space is required

P R O J E C T	ADDRESS		COC	
	LOCATION (INCLUDE CROSS STREETS)		eCaps:	
	APN (ALL PARCELS)			

O W N E R	1 NAME OF LEGAL OWNER(S) (AS SHOWN S IN TITLE REPORT)			
	MAILING ADDRESS, CITY, STATE, ZIP			
	NAME OF CONTACT PERSON	PHONE	FAX	E-MAIL

S U R V E Y O R	NAME OF CONSULTING FIRM		
	MAILING ADDRESS, CITY, STATE, ZIP		
	PHONE	FAX	E-MAIL
	NAME OF CONTACT PERSON		

C O N T A C T	WHO WILL BE THE CONTACT FOR THIS PROJECT?	OWNER	SURVEYOR	OTHER, IDENTIFY BELOW
	NAME OF CONTACT PERSON			
	MAILING ADDRESS, CITY, STATE, ZIP			
	PHONE	FAX	E-MAIL	

ADMINISTRATIVE CERTIFICATE OF COMPLIANCE
APPLICATION

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SUBMITTAL CHECKLIST

Date of Submittal _____

OWNER OR SURVEYOR MUST INITIAL SUBMITTED ITEMS BELOW

OWNER/ SURVEYOR	CITY STAFF		SEE "ADMINISTRATIVE CERTIFICATE OF COMPLIANCE REQUIREMENTS" FOR DETAILED DESCRIPTION OF ITEMS 1-6 BELOW
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_____	_____	1)	Completed Application Form	_____
_____	_____	2)	Title Report (all parcel, 90 days old max.)	_____
_____	_____	3)	Chain of Title	_____
_____	_____	4)	New Legal Description (1 copy)	_____
_____	_____	5)	Exhibit Map (1 copy)	_____
_____	_____	6)	Review and Processing Fee	_____

Deposit (full cost recovery) \$250.00

OWNER'S CERTIFICATION (Notary required for all signatures)

The undersigned hereby acknowledges being the record owner(s) of the property contained within this project and hereby consent to the processing and recording of the Certificate of Compliance; and further acknowledge that they understand the Administrative Certificate of Compliance Requirements" associated with this application.

PRINT OWNER'S NAME (as shown in Title Report): _____

SIGNATURE: _____

PRINT NAME: _____

.....

PRINT OWNER'S NAME (as shown in Title Report): _____

SIGNATURE: _____

PRINT NAME: _____

Use additional page if more space is required
Attach notary acknowledgement