



**City of Coachella**  
Development Services Department  
1515 6<sup>th</sup> St Coachella CA 92236  
(760)398-3102

**Application for Pre-Application Review**

Date: \_\_\_\_\_

Project Name: \_\_\_\_\_

Address/Location: \_\_\_\_\_ A.P.N. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Current Zoning District: \_\_\_\_\_

Current General Plan Designation: \_\_\_\_\_

Total Project Acres: \_\_\_\_\_

Project Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Property Owner(s): \_\_\_\_\_

Owner's Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Owner's Phone No. \_\_\_\_\_

Applicant\*

Applicant Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant Phone No. \_\_\_\_\_ Applicant Fax: \_\_\_\_\_

Applicant e-mail: \_\_\_\_\_

\* If Applicant is not the same person/entity as the property owner, a written authorization from property owner must be submitted with this application.

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Office Use Only:

PAR No.: \_\_\_\_\_

Date Received: \_\_\_\_\_

Planner Assigned: \_\_\_\_\_