



Mark Lancaster
Director of Transportation

COUNTY OF RIVERSIDE

TRANSPORTATION AND LAND MANAGEMENT AGENCY

Mojahed Salama, P.E.
Deputy for Transportation/Capital Projects
Russell Williams
Deputy for Transportation/Planning and
Development

Transportation Department

STREET NAME CHANGE REQUIREMENTS (SNC)

The following items are to be submitted by the Surveyor/Engineer or Applicant along with the processing agreement to the Survey Division.

- The applicant shall petition all property owners abutting the street in question to evaluate if a street name should be changed using the attached “County of Riverside Petition for Street Name Change” Form.
- The applicant will submit Six Different street names for consideration using the attached “Supplemental Information” Form.
- A check or money order made out to “The County of Riverside” for the initial deposit of \$308.00 + \$77.00 for each additional street name + 2% surcharge.
 - Example: Changing the Name of 1 street – (\$308.00 + 2% surcharge = \$314.16)
 - Changing the Names of 2 streets – (\$308.00 + \$77.00 + 2% surcharge = \$392.70)
- Detailed explanation of the reason for the street name change.
- When selecting the proposed street name, please use the following chart which pertains to width and classification of road easements.

RIGHT OF DEFINITION

Full width

20’ – 30’ -60’ – 88’
(Easements)

Dead-end street or cul-de-sac

CLASSIFICATION

Street, Way, Trail, Alley, Path, Road, Drive,
Place, Lane, Terrace and Passage

Circle, Court and Cove

APPENDAGE FOR SPANISH TRANSLATION

Suffixes for Street Names in Spanish:

<u>English</u>	<u>Spanish</u>	<u>English</u>	<u>Spanish</u>
Avenue	Avenida	Lane	Calle
Circle	Circulo	Path	Senda
Court	Corte	Path	Vereda
Cove	Ensenada	Place	Lugar
Cove	Cala	Road	Camino
Drive	Carretera	Way	Via

TRANSLATION FOR DIRECTIONAL INDICATOR: North:Norte; West:Oeste; South:Sur; East: Este

Supplemental Information

For electronic submittals, please call 951-955-6700 for instructions.

Please fill out form and attach a copy of your Assessor's map marking the location of your parcel and the street you wish to name.

Your Name: _____

Address: Residence: _____

 Mailing: _____

 Phone: () _____

Current Street Name: _____

What is the reason for requesting the name change? _____

List six choices for a name. (Please list in order of preference and do not use the same root word for selections)

1) _____ 4) _____

2) _____ 5) _____

3) _____ 6) _____

NOTE: The six choices are subject to approval by the Riverside County Transportation Department.

Signature: _____ Date: _____



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LAND USE and PERMIT APPLICATION PROCESSING AGREEMENT Agreement for Payment of Costs of Application Processing Survey Division

TO BE COMPLETED BY APPLICANT:

This agreement is by and between the County of Riverside, hereafter "County of Riverside",
and _____ hereafter "Applicant" and _____ "Property Owner".

This agreement is by and between the County of Riverside, hereafter "County", and
_____ hereafter "Applicant" and _____ "Property Owner".

Applicant name/firm and Property Owner name/firm must match on page 2, Section 4, item 1. for Property Owner, and item 2. for Applicant.

PROPERTY / PROJECT INFORMATION		Date:	
PARENT CASE # (Fast Track, TR, PM, PP, CUP, PUP, MS):		PROJECT NAME:	
DESCRIPTION (Map & Phase # / No. of Lots):			
LOCATION (Address and Cross Street Name(s)):		APN(s):	
Please designate who to contact to discuss the project.			
		<input type="checkbox"/> Applicant	<input type="checkbox"/> Engineer
<input type="checkbox"/> Property Owner			
ENGINEERING FIRM (NAME AS IT APPEARS ON YOUR LETTERHEAD)			
ADDRESS			
CITY / STATE / ZIP CODE			
PHONE:		CONTACT PERSON: (Last Name, First)	
FAX:		E-MAIL ADDRESS:	

For electronic submittals, please call 951-955-6700 for instructions.

If your application is subject to Deposit-based Fee, the following applies

Section 1. Deposit-based Fees

Purpose: The Riverside County Board of Supervisors has adopted ordinances to collect "Deposit-based Fees" for the costs of reviewing certain applications for land use review and permits. The Applicant is required to deposit funds to initiate staff review of an application. The initial deposit may be supplemented by additional fees, based upon actual and projected labor costs for the permit. County departments draw against these deposited funds at the staff hourly rates adopted by the Board of Supervisors. The Applicant and Property Owner are responsible for any supplemental fees necessary to cover any costs which were not covered by the initial deposit.

Section 2. Applicant and Property Owner Responsibilities for Deposit-based Fee Applications

- A. Applicant agrees to make an initial deposit in the amount as indicated by County ordinance, at the time this Agreement is signed and submitted with a complete application to the County of Riverside. Applicant acknowledges that this is an initial deposit and additional funds may be needed to complete their case The County of Riverside will not pay interest on deposits. Applicant understands that any delays in making a

subsequent deposit from the date of written notice requesting such additional deposit by County of Riverside, may result in the stoppage of work.

- B. Within 15 days of the service by mail of the County of Riverside's written notice that the application permit deposit has been reduced to a balance of less than 20% of the initial deposit or that the deposit is otherwise insufficient to cover the expected costs to completion, the Applicant agrees to make an additional payment of an amount as determined by the County of Riverside to replenish the deposit. Please note that the processing of the application or permit may stop if the amount on deposit has been expended. The Applicant agrees to continue making such payments until the County of Riverside is reimbursed for all costs related to this application or permit. The County of Riverside is entitled to recover its costs, including attorney's fees, in collecting unpaid accounts that would have been drawn on the deposit were it not depleted.
- C. The Property Owner acknowledges that the Applicant is authorized to submit this agreement and related application(s) for land use review or permit on this property. The Property Owner also acknowledges that should the Applicant not reimburse the County of Riverside for all costs related to this application or permit, the Property Owner shall become immediately liable for these costs which shall be paid within 15 days of the service by mail of notice to said property Owner by the County.
- D. This Agreement shall only be executed by an authorized representative of the Applicant and the Property Owner. The person(s) executing this Agreement represents that he/she has the express authority to enter into this agreement on behalf of the Applicant and/or Property Owner.
- E. This Agreement is not assignable without written consent by the County of Riverside. The County of Riverside will not consent to assignment of this Agreement until all outstanding costs have been paid by Applicant.
- F. Deposit statements, requests for deposits or refunds shall be directed to Applicant at the address identified in Section 4.

Section 3. To ensure quality service, Applicant is responsible to provide one-week written notice to the County of Riverside Transportation and Land Management Agency (TLMA) Permit Assistance Centers if any of the information below changes.

Section 4. Applicant and Owner Information

1. PROPERTY INFORMATION:

Assessors Parcel Number(s): _____

Property Location or Address:

Section, Township, and Range:

2. PROPERTY OWNER INFORMATION:

Property Owner Name: _____ Phone No.: _____

Firm Name: _____ Email: _____

Address: _____

3. APPLICANT INFORMATION:

Applicant Name: _____ Phone No.: _____

Firm Name: _____ Email: _____

Address (if different from property owner)

4. SIGNATURES:

Signature of Applicant: _____ Date: _____

Print Name and Title: _____

Signature of Property Owner: _____ Date: _____

Print Name and Title: _____

Signature of the County of Riverside, by _____ Date: _____

Print Name and Title: _____

FOR COUNTY OF RIVERSIDE USE ONLY

Application or Permit (s)#: _____

Set #: _____ Application Date: _____