



Case Transmittal Sheet

Date:

To:

From:

Subject:

Submittal No.:

Items Attached:

Action: Please review this application by

Application Subject to the Following
<input type="checkbox"/> Proffers – Case No.
<input type="checkbox"/> SUP – Case No.
<input type="checkbox"/> Agricultural Forestal District
<input type="checkbox"/> Special Flood Hazard Area
<input type="checkbox"/> Other:

Public Meetings (Tentative Dates)
<input type="checkbox"/> Planning Commission Date:
<input type="checkbox"/> Board of Supervisors Date:
<input type="checkbox"/> DRC Date:
<input type="checkbox"/> Dev. Roundtable Date:
<input type="checkbox"/> Other: Date:

Other Comments: