

**APPLICATION FOR VIEW ASSESSMENT  
(Structure Development Permit)**

Project No.: \_\_\_\_\_

1. Address of property for which the structure development permit has been requested:

\_\_\_\_\_  
\_\_\_\_\_

2. Provide the following information for the individual filing this Application for Assessment:

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

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

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

3. Description of the viewing area as defined in Solana Beach Zoning Ordinance, Section 17.63.020(I) and extent of impairment: (provide a photo of the impairment as seen from the viewing area)\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Identify the portion of the proposed structure which is the most objectionable and suggestions to minimize the view impairment:\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Description of the Claimants attempt(s) to resolve this issue with the owner/representative of the property for which a Structure Development Permit has been requested:\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant for Assessment

\_\_\_\_\_  
Date Submitted

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STAFF USE ONLY:

Application for Assessment fee paid? \_\_\_\_\_