



PLANNING & DEVELOPMENT DEPARTMENT

Tentative Tract Map & Parcel Map – Extension of Time

A. How To File.

Please submit the application package with payment to the Planning Division at the Planning public counter, located at:

Corona City Hall
Planning & Development Department
400 S. Vicentia Avenue, Suite 120
Corona, CA 92882

B. Items Required For Filing.

The following items shall be included in the application package:

- ☐ 1. Completed Application Form (attached).
- ☐ 2. Processing fee of **\$2,903.00**.
- ☐ 3. Five (5) full size (24"x36") copies of the approved tentative tract map or parcel map, folded to approximately 8.5"x14".
- ☐ 4. Two (2) copies of the approved tentative tract map or parcel map reduced to 11"x17".
- ☐ 4. A from the applicant addressed to the City Council requesting an extension of time which shall include:
 - a. Date and applicant's signature, address and phone number.
 - b. Tentative tract number.
 - c. Original approval date.
 - d. Expiration date.
 - e. Length of extension requested.
 - f. Reason for delay and request for extension
- ☐ 5. Submit (1) USB flash drive containing the items required for filing this application in PDF format.

C. Notice To Applicants:

1. Extension requests shall be submitted prior to the expiration date of the tentative tract map or parcel to be valid.
2. The extension request shall be reviewed by the Development Plan Review Committee prior to being placed on the City Council Agenda. No fee is required for the DPR.
3. It is recommended that applicant or his/her representative be present at all hearings.
4. All correspondence and reports will be mailed or emailed to the applicant as listed on the application form only.

D. Attachments:

1. Application Form

Revised: 10/2026



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PLANNING DIVISION MASTER APPLICATION FORM

1. General Project Description:

Project Location (General) _____

Project Address or APN: _____

General Description of Proposed Project: _____

2. Applicant Information:

Firm/Company Name: _____

Contact Name: _____

Address: _____

City, State, Zip Code: _____

Phone Number: _____ Email: _____

Applicant's interest in property: ☐ Own ☐ Rent ☐ Other: _____

Staff Use Only	Date Stamp Received:	
Counter Planner Initials:		
Case Number:		
☐ Agricultural Preserve Cancellation ☐ Alcohol Beverage Permit ☐ Amended Final Map ☐ Ancillary Smoking Lounge Permit ☐ Annexation ☐ Architectural Review ☐ Building Relocation ☐ Certificate of Compliance ☐ Change of Zone ☐ Community Facilities Plan Amendment ☐ Conditional Use Permit: (select one) ☐ Major CUP ☐ Minor CUP ☐ Major Modification to CUP ☐ Minor Modification to CUP ☐ Extension of Time for CUP Existing CUP Number: _____ ☐ Cul-de-sac Waiver ☐ Density Bonus Agreement ☐ Development Agreement ☐ General Plan Amendment ☐ Low Barrier Navigation Center ☐ Medical Office in a Residential Zone ☐ Model Home Permit ☐ Noise Variance	☐ Non-Conforming Building Uses ☐ Parcel Map: (Select one) ☐ New – PM ☐ Resubmitted – PM ☐ Waiver ☐ Extension of Time – PM Existing Parcel Map Number: _____ ☐ Parking Determination ☐ Precise Plan Review: (Select one) ☐ New ☐ Major Modification to PP ☐ Minor Modification to PP ☐ Extension of Time for PP Existing Precise Plan Number: _____ ☐ Similar Use Finding ☐ Specific Plan: (select one) ☐ New ☐ Major Amendment ☐ Minor Amendment ☐ Sphere of Influence Amendment ☐ Substantial Conformance ☐ Surface Mine: (Select one) ☐ Permit ☐ Annual Inspection	☐ Telecommunications Facility: (select one) ☐ Major Telecomm. Facility ☐ Minor Telecomm. Facility ☐ Zoning Administrator Facility ☐ Small Cell Facility ☐ Modification to existing Facility ☐ Tentative Tract Map: (select one) ☐ New – TTM ☐ Rephasing – TTM ☐ Resubmitted – TTM ☐ Extension of Time – TTM Existing TTM Number: _____ ☐ Variance: (Select one from below) ☐ Major ☐ Minor ☐ Waiver or Modification of Subdivision Standards ☐ Zoning Administrator Review ☐ Other _____



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3. Owner Information (if different from above):

Owner Name:_____

Contact name:_____

Address/City/State/Zip Code:_____

Phone Number:_____ Email:_____

4. Architect Information:

Architecture Firm:_____

Contact Name:_____

Address/City/State/Zip Code:_____

Phone Number:_____ Email:_____

5. Engineer Information:

Engineering Firm:_____

Contact Name:_____

Address/City/State/Zip Code:_____

Phone Number:_____ Email:_____

6. Subject Property Information (all types):

Assessor's Parcel #:_____ Total Acreage:_____

Assessor's Parcel #:_____ Total Acreage:_____

Assessor's Parcel #:_____ Total Acreage:_____

Assessor's Parcel #:_____ Total Acreage:_____

General Plan Designation:_____ Zone Designation:_____

Specific Plan Designation (if applicable):_____

Master Planned Community/Development Agreement (if applicable):

WQMP Required? ☐ Yes ☐ No

Annex into CFD or LMD? ☐ Yes ☐ No

Current Land Use:_____ Proposed Land Use:_____

Grading Requirements (CYD's): Cut:_____ Fill:_____ Overex:_____



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7. Proposed Project

Type of use proposed: ☐ Residential ☐ Commercial ☐ Industrial ☐ Other: _____

8. Non-residential Project Summary

Gross floor area: _____ Proposed: _____ Existing: _____ Building Height: _____

Type of construction per California Building Code: _____

Occupancy: _____

Bldg	Bldg 1	Bldg 2	Bldg 3	Bldg 4	Bldg 5	Bldg 6	Bldg 7	Bldg 8	Bldg 9	Bldg 10
GFA										
FA										

GFA = Gross Floor Area FA = Footprint Area

students/children (if applicable): _____ Seating capacity (if applicable): _____

Fueling Stations (if applicable): _____

Landscape Coverage (% of Lot): _____ Building Coverage (% of Lot): _____ F.A.R.: _____

9. Residential Project

Name of Project: _____

Type of dwelling unit (SFR, MFR, etc): _____

Dwelling Units:	Proposed	Existing	Density (DU/acre):
1 Bedroom	_____	_____	Maximum building height: _____
2 Bedroom	_____	_____	Minimum lot size: _____
3 Bedroom	_____	_____	Average lot size: _____
4 or more Bedroom	_____	_____	Landscape Coverage (% of Lot): _____
Total	_____	_____	Building Coverage (% of Lot): _____

Open Space Description:

☐ Private: _____ ☐ Common: _____ ☐ Other: _____

Total square footage of:

Common Open Space _____ Private Open Space _____

Affordable Housing Incentives, Waivers, Concessions and Parking Reductions – Will the project proponent seek Density Bonus incentives, waivers, concessions, or parking reductions pursuant to California Government Code Section 65915?

☐ Yes

☐ No



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Residential Dwelling Unit Count: Please indicate the number of dwelling units proposed, including a breakdown of levels by affordability, set by each income category.

	Number of Units
Market Rate	
Managers Unit(s) – Market Rate	
Extremely Low Income	
Very Low Income	
Low Income	
Moderate Income	
Total No. of Units	
Total No. of Affordable Units	
Total No. of Density Bonus Units	

Existing Site Conditions – Provide the number of existing residential units on the project site that will be demolished and whether each existing unit is occupied or unoccupied. Provide attachment, if needed.

	Occupied Residential Units	Unoccupied Residential Units	Total Residential Units
Existing			
To Be Demolished			

10. Parking (all projects)

	# of Spaces Required By CMC § 17.76.030	Provided # of Spaces
Open Spaces:		
Carports:		
Garages:		
Parking Structure Stalls:		
Total:		



11. Notice of Complete/Incomplete Applications

The approval of a development proposal requires the review of plans and technical documents. By signing below the applicant is acknowledging that a development application will be deemed incomplete if it does not include all required plans and technical documents, or includes plans and technical documents that are inaccurate or insufficient. By signing below the applicant also acknowledges that incomplete development applications will not be scheduled for public hearing until which time City staff has received and reviewed all required documents.

12. Authorization & Indemnification

To the fullest extent permitted by law, the applicant shall defend, indemnify and hold the City of Corona and its directors, officials, officers, employees, volunteers and agents free and harmless from any and all claims, demands, causes of action, proceedings, costs, expenses, liabilities, losses, damages or injuries of any kind, in law or equity, in any manner arising out of, pertaining to, or incident to any attack against or attempt to challenge, set aside, void or annul any approval, decision or other action of the City of Corona, whether such approval, decision or other action was by its City Council, Planning and Housing Commission or other board, director, official, officer, employee, volunteer or agent. To the extent that Government Code Section 66474.9 applies, the City will promptly notify the applicant of any claim, action or proceeding made known to the City to which Government Code Section 66474.9 applies and the City will fully cooperate in the defense. The Applicant's obligations hereunder shall include, without limitation, the payment of any and all damages, consultant and expert fees, and attorney's fees and other related costs and expenses. The City shall have the right to retain such legal counsel as the City deems necessary and appropriate. Nothing herein shall be construed to require City to defend any attack against or attempt to challenge, set aside, void or annul any such City approval, decision or other action. If at any time Applicant chooses not to defend (or continue to defend) any attack against or attempt to challenge, set aside, void or annul any such City approval, decision or other action, the City may choose, in its sole discretion, to defend or not defend any such action. In the event that the City decides not to defend or continue the defense, Applicant shall be obligated to reimburse City for any and all costs, fees, penalties or damages associated with dismissing the action or proceeding. If at any time both the Applicant and the City choose not to defend (or continue to defend) any action noted herein, all subject City approvals, decisions or other actions shall be null and void. The Applicant shall be required to enter into any reimbursement agreement deemed necessary by the City to effectuate the terms of this condition.

Print Applicant name: _____

Applicant Signature: _____ Date: _____

Print Property Owner name: _____

Property Owner Signature: _____ Date: _____

Notice to all applicants: Separate written authorization from property owner shall be submitted if this form is not signed by the property owner.