

PETITION TO AMEND A SPECIFIC PLAN

To the Cypress City Council

File No. \_\_\_\_\_

Assessor's Parcel No.  
\_\_\_\_\_

1. \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Property Owner Address Phone

2. \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Authorized Agent Address Phone

3. The undersigned hereby petitions to amend the \_\_\_\_\_ Specific Plan, and submits the following in support thereof:

A. That \_\_\_\_\_ is the owner of certain real property in the City of Cypress, County of Orange, State of California, and more particularly described as follows:  
Description of Properties Involved: \_\_\_\_\_

B. That said real property is located in the \_\_\_\_\_ Zone.

C. Proposed amendment to the Specific Plan: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. ANSWER THE FOLLOWING QUESTIONS:

A. In your opinion, would the proposed change in the Specific Plan be detrimental in any way to the surrounding properties? Explain reasons supporting your answer?

B. Are conditions now different in the area of the requested Specific Plan area than at the time the Specific Plan was created? If so, please explain.

C. Is the requested change in accordance with the Cypress General Plan? If not, please explain why the General Plan may be inconsistent with the proposed change.

\*\*\*\*\*

\_\_\_\_\_  
Signature of Property Owner of Record  
Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Authorized Agent  
(Authorized Agent may not sign unless written  
authorization from owner is attached to application.)

\*\*\*\*\*

STATE OF CALIFORNIA)  
                                  ) SS  
COUNTY OF ORANGE )

I, the undersigned, being duly sworn, depose and saith that I am the signer of this petition and that the foregoing petition and all data, information, and evidence herewith submitted are in all respects to the best of my knowledge and belief true and correct.

Subscribed and sworn to me before this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
(Notary Public)

\_\_\_\_\_  
(Signature of Petitioner)

\*\*\*\*\*

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

\_\_\_\_\_  
By

\$ \_\_\_\_\_  
Filing Fee Paid