

# **SAN LUIS OBISPO**

## **Local Agency Formation Commission LAFCO**

### **OUTSIDE USER AGREEMENT**

### **APPLICATION FOR CONTRACTUAL AGREEMENT APPROVAL**

If you have any questions, please contact us at 805-781-5795 or

visit our website at: [www.slolafco.com](http://www.slolafco.com) or

email us at the following addresses:

[dchurch@slolafco.com](mailto:dchurch@slolafco.com)

[dbloyd@slolafco.com](mailto:dbloyd@slolafco.com)

## OUTSIDE USER AGREEMENT APPLICATION FOR CONTRACTUAL AGREEMENT APPROVAL

Date: \_\_\_\_\_

Agency: \_\_\_\_\_

<b>Contact Person:</b>	<b>Address:</b>	<b>Telephone&amp; Fax:</b>
<b>Email:</b>		

<b>Property Owner:</b>	<b>Address:</b>	<b>Telephone &amp; Fax:</b>
<b>Email:</b>		

<b>Property Address:</b>	<b>Parcel Nos.</b>	<b>Parcel Nos.</b>

### PLEASE COMPLETE ALL RELEVANT PORTIONS:

1. Is the territory within the agency's sphere of influence? If no, a sphere of influence amendment must be requested concurrent with this application.

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

2. Type of service to be provided: \_\_\_\_\_

3. Please describe the reason for the service agreement/contract. Explain why a jurisdictional change is not possible at this time. Indicate if this is an emergency health and safety situation.

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

4. Is the reorganization of the territory anticipated at a future date? If yes, when?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No      Possible reorganization date: \_\_\_\_\_

5. If development is proposed, please provide a description of the project:

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6. Is the approval ministerial:

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

7. If the project approval is discretionary, please attach all supporting development documentation and resolutions including, but not limited to:

\_\_\_\_\_ Tentative Map & Conditions  
\_\_\_\_\_ Subdivision Map or Parcel Map  
\_\_\_\_\_ Specific Plan  
\_\_\_\_\_ General Plan Amendment  
\_\_\_\_\_ Rezoning  
\_\_\_\_\_ Other (describe) \_\_\_\_\_

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8. Please provide a detailed description of how services are to be extended to the property:

a. Distance for connection: \_\_\_\_\_  
b. Cost of improvements: \_\_\_\_\_  
c. Financing: \_\_\_\_\_

**ENVIRONMENTAL REVIEW:**

Please include a copy of the environmental review conducted for the project. If exempt, please provide a copy of the Notice of Exemption.

\_\_\_\_\_ Environmental Review attached                      \_\_\_\_\_ Notice of Exemption attached

**MAPS**

Please provide a vicinity map showing the property, district, or city boundary and relevant proposed and existing infrastructure.

**AGREEMENT/CONTRACT**

Please attach a copy of the proposed agreement or contract.