



## PLANNING DEPARTMENT OPERATIONAL STATEMENT CHECKLIST

It is important that the operational statement provides for a complete understanding of your proposal. The statements that you submit must address all of the following that apply to your proposal.

Your operational statement must be typed or written in a legible manner in the spaces provided. Answer all statements that apply to your business. Those that do not apply, enter "N/A". Use additional sheets if necessary.

Business Name: \_\_\_\_\_ Business Address: \_\_\_\_\_

APN: \_\_\_\_\_ \*\*(For your APN, Please call the Madera County Assessor's Office at (559) 675-7710.)

1. Nature of the operation – What do you propose to do? PLEASE DESCRIBE IN DETAIL:

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2. What products will be produced by the operation? \_\_\_\_\_

3. What is the existing use of your property? \_\_\_\_\_

4. What are the surrounding land uses on the North, South, East and West? \_\_\_\_\_

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5. List the hours of operation: \_\_\_\_\_ Number of Days per Week: \_\_\_\_\_

If Seasonal, list the months of operation: \_\_\_\_\_

6. Number of Customers or Visitors per day: \_\_\_\_\_ Maximum per Day: \_\_\_\_\_

During what hours will customers visit your property? \_\_\_\_\_

7. Number of current employees: \_\_\_\_\_ Future employees: \_\_\_\_\_

Will any live on site? YES / NO

8. Are any goods to be sold on site? YES / NO

If yes, are these goods grown or produced on site or at some other location? \_\_\_\_\_

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Describe products being offered for sale: \_\_\_\_\_

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9. Number and type of service or delivery vehicles: \_\_\_\_\_

10. What equipment is used? If appropriate, provide pictures or a brochure. \_\_\_\_\_

\_\_\_\_\_

11. Will the operation or equipment used generate noise above existing levels in the area? YES / NO

If yes, explain \_\_\_\_\_

12. Describe the supplies or materials used and how they will be stored: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

13. Will hazardous materials or waste be produced as part of this business? YES / NO

If yes, explain \_\_\_\_\_

14. Will the existing buildings be used or will a new building be constructed? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15. Explain which building(s) or what portion of the building(s) will be used in your operation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

16. Please include any other information that will provide a clear understanding of your business or operation:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date