



**City of Ontario
Planning Department**
303 East "B" Street
Ontario, CA 91764
Phone: (909) 395-2036
Fax: (909) 395-2420

CC&R's Application

WHAT ARE CC&R's?

Covenants, Conditions, & Restrictions ("CC&R's") are a binding set of rules and obligations between property owners/renters and a controlling association. CC&R's typically identify all private and common utilities, structures, and open areas within a specific site and specify maintenance responsibilities between applicable parties.

WHEN ARE CC&R's REQUIRED?

CC&R's are generally required to be prepared upon development of multi-tenant commercial or industrial projects as well as multi-family residential. CC&R's would also be required upon conversion from a multi-tenant commercial, industrial, or residential rental unit to a for-sale product. This is to ensure that the units are properly upgraded, meeting Development Code standards and also to clearly identify all future maintenance responsibilities. CC&R's are required to be prepared prior to Final Parcel or Tract Map subdivision approval. Once completed, the CC&R's along with the Final Map are scheduled for City Council hearing and then sent for recordation after approvals.

FILING REQUIREMENTS

1. Completed CC&R's application.
2. The CC&R's document.
3. Copies of the following items associated with the project:
 - a. Final staff report.
 - b. All approved Resolutions/Ordinances.
 - c. All Conditions of Approval.
 - d. Approved Site Plan.
 - e. Approved Tentative Parcel/Tract Map.
4. Copy of the Final Parcel/Tract Map (if not approved, provide Draft Final Parcel/Tract Map).
5. Copy of the Condominium Map (if applicable).
6. Title Report (Not older than 30-days).
7. Filing fee.



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Project Information

Project Name: _____

Project Address: _____

Project APN(s): _____

Parcel/Tract Map No.: _____

Applicant Contact Information

Applicant Company Name: _____

Applicant Contact Name: _____

Applicant Address: _____

Applicant Phone No.: _____

Applicant Fax No.: _____

Applicant Email: _____

Applicant Attorney Contact Information

Attorney Firm Name: _____

Attorney Contact Name: _____

Attorney Address: _____

Attorney Phone No.: _____

Attorney Fax No.: _____

Attorney Email: _____

Staff Use Only

File No.: _____

Map No.: _____

Related Files: _____

Submittal Date: _____

Rec'd By: _____

Fees Paid: \$ _____

Receipt No.: _____