

## City of Indio

Development Services Department 100 Civic Center Mall Indio, California 92201 (760) 391-4120 (760) 391-4027 Fax www.indio.org

## (CC & R's) Covenants, Conditions, and Restrictions

Date S	ubmitted:		
Applicant (who is financially responsible):			
Project Name:			
Tract Number(s):			
Project Location:			
Name,	Address and Phone nur	mber to contact for revisions and/o	r approval:
For in Office Use Only- Paid Planning			
	Date		
	HTE#	City Attorney	

## FEES-

CC & R's-\$1,505 (Per Project)

\* Please provide four (4) sets of CC&R'S. Thank you

Note: Fees are based on average times required to complete the process. Actual charges may vary if staff time significantly deviates from the average staffing effort.