

Planning Application #: 15-031

Date Received: 5/13/2015  
 Fee Paid: 2072.00  
 Receipt #: 88806

# City of Albany

## PLANNING APPLICATION FORM NON-RESIDENTIAL

Please complete the following application to initiate City review of your application. Please be aware that staff may have additional application requirements. For projects requiring Planning and Zoning Commission review, please schedule an appointment with Planning Division staff. The Community Development Department office is open to accept applications Monday, 8:30 AM to 7:00 PM, Tuesday through Thursday 8:30 AM to 5:00 PM, and Friday 8:30 AM to 12:30 PM (closed Noon - 1PM, Mon. - Thu.) at 1000 San Pablo Avenue, Albany, CA 94706 (510) 528-5760.

### Fee Schedule (FY 2013-2014)

<input type="checkbox"/> Design Review*	\$2,072/ Admin. \$1,101
<input type="checkbox"/> Parking Exceptions/Reductions - see separate handout*	\$Actual Cost/Min \$2,072
<input type="checkbox"/> Conditional Use Permit (major)*	\$Actual Cost/Min \$2,072
<input checked="" type="checkbox"/> Conditional Use Permit (minor)*	\$1,101
<input type="checkbox"/> Sign Permit	\$1,479/\$461 Admin.
<input type="checkbox"/> Temporary/Seasonal Conditional Use Permit*	\$461
<input type="checkbox"/> Lot Line Adjustment*	\$Actual Cost/Min \$1,101
<input type="checkbox"/> Secondary Residential Unit*	\$1,101
<input type="checkbox"/> Parcel/Subdivision Map; Planned Unit Development; Condo Conversion*	\$3,357
<input type="checkbox"/> Variance*	\$2,072
<input type="checkbox"/> Other(s): _____	\$ _____

\*When obtaining more than one planning approval, the full amount for the highest fee will apply and 1/2 fee will be charged for any other ones.

General Plan Update Fee \$45 included in the fees above. This fee only needs to be paid once for each separately submitted application.

**\*\*If applying for a Conditional Use Permit, please complete the Supplemental Questionnaire\*\***

Job Site Address: <u>1181 Solano Ave</u>		Zoning District: <u>SC</u>
Property Owner(s) Name: <u>Solano Group</u>	Phone: <u>510 524 8122</u> Fax: <u>510 524 3264</u>	Email: <u>+kershawe</u> <u>KershawInvestments.com</u>
Mailing Address: <u>PO Box 9026</u>	City: <u>Berkeley</u>	State/Zip: <u>CA, 94709</u>
Applicant(s) Name (contact person): <u>Jon Grubel for LittleStarSolano, LLC</u>	Phone: <u>510 813 3404</u> Fax: <u>N/A</u>	Email: <u>jongrubel@</u> <u>me.com</u>
Mailing Address: <u>1175 Solano Ave</u>	City: <u>Albany</u>	State/Zip: <u>CA 94706</u>

### PROJECT DESCRIPTION (Please attach plans)

Little Star Pizza is moving to 1181 Solano.  
We have secured a Type 47 liquor license and  
~~we are applying for CUP AS~~ we are applying for CUP AS  
requested.

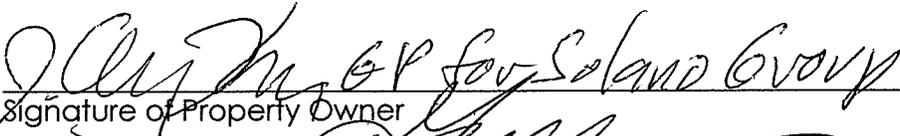
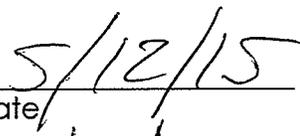
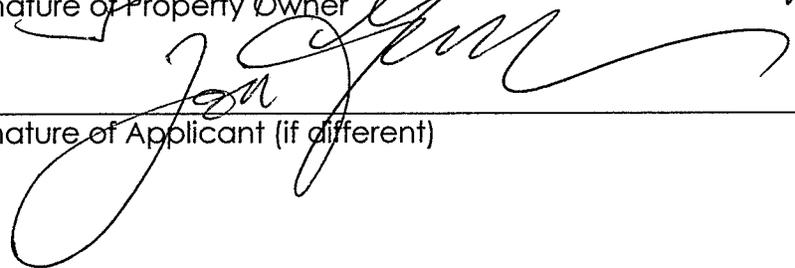
**TERMS AND CONDITIONS OF APPLICATION**

I, the undersigned owner (or authorized agent) of the property herein described, hereby make application for approval of the plans submitted and made part of this application in accordance with the provisions of the City's ordinances, and I hereby certify that the information given is true and correct to the best of my knowledge and belief.

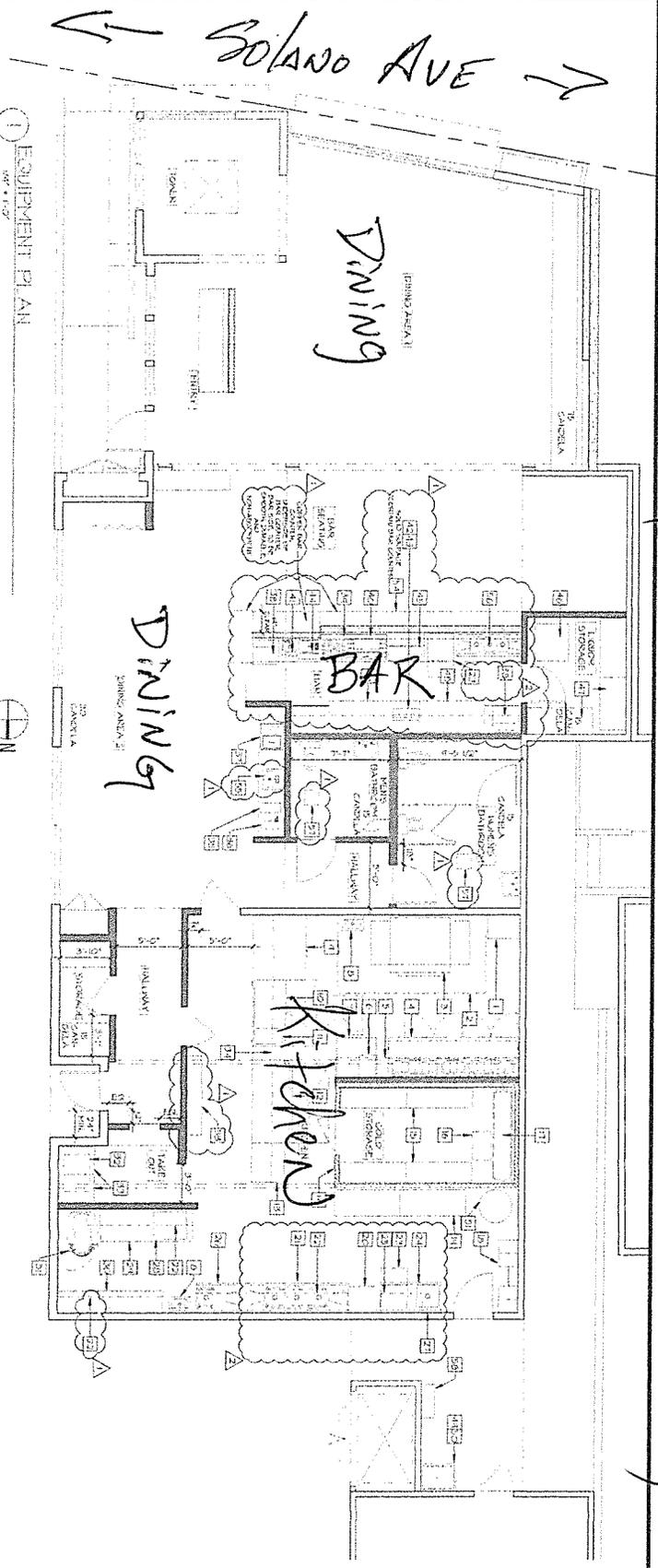
I understand that the requested approval is for my benefit (or that of my principal). Therefore, if the City grants the approval with or without conditions, and that action is challenged by a third party, I will be responsible for defending against this challenge. I therefore agree to accept this responsibility for defense at the request of the City and also agree to defend, indemnify and hold the City harmless from any costs, claims, penalties, fines, judgments, or liabilities arising from the approval, including without limitation, any award or attorney's fees that might result from the third party challenge.

For this purposes of this indemnity, the term "City" shall include the City of Albany, its officers, officials, employees, agents and representatives. For purposes of this indemnity, the term "challenge" means any legal or administrative action to dispute, contest, attack, set aside, limit, or modify the approval, project conditions, or any act upon which the approval is based, including any action alleging a failure to comply with the California Environmental Quality Act or other laws.

The signature of the property owner is required for all projects. By executing this form you are affirming that you are the property owner.

 Signature of Property Owner	 Date
 Signature of Applicant (if different)	 Date

1181 Solano Ave  
 Little Star Solano, LLC



**EQUIPMENT SCHEDULE**

ITEM NO.	DESCRIPTION	MODEL NUMBER	REMARKS
1	UNDERCOUNTER REFRIG	W48	REF. TO BE INSTALLED IN KITCHEN
2	REF. UNIT	W48	REF. TO BE INSTALLED IN KITCHEN
3	STOVE	W48	STOVE TO BE INSTALLED IN KITCHEN
4	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
5	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
6	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
7	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
8	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
9	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
10	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
11	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
12	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
13	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
14	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
15	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
16	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
17	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
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ITEM NO.	DESCRIPTION	MODEL NUMBER	REMARKS
31	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
32	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
33	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
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35	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
36	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
37	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
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43	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
44	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
45	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
46	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
47	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
48	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
49	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN
50	WALL MOUNTED SINK	W48	SINK TO BE INSTALLED IN KITCHEN

**GENERAL NOTES**

- THE FLOOR STRENGTH SHALL BE AS ABOVE FRESH FLOOR IN PLACE.
- ALL FLOOR MOUNTED EQUIPMENT SHALL BE IN PLACE ON GARDEN'S SIDE OF HIGH CHAIR.
- FRANIGER SHALL BE INSTALLED FOR EACH CLEANING OPERATIONS AND ON ALL BUILT.
- CONCRETE SHALL BE REPAIRED AT ALL WALL AND FLOOR INTERSECTIONS IN THE EXISTING RESTROOM AREAS FROM RESTROOM BAR AND BATHROOMS.
- EXISTING MATERIALS SHALL BE REPAIRED OR ALL LEFT FINISHED IN THE FOOD PREP AREA, STORAGE AND WARE WASHING AREAS.
- SEALING DEVICES SHALL BE INSTALLED AT ALL FACILITY ENTRANCES AND RESTROOM DOORS.

Health department on their opening shall...  
 CONTRACTOR shall verify and be responsible...  
 HEALTH DEPARTMENT 0226-2008  
 RESPONSE TO COMMENTS 04/08  
 RESPONSE TO COMMENTS 04/20/08

Project: **LITTLE STAR PIZZA**  
 1181 SOLANO AVE ALBANY, CA 94706  
 Job Number: **15101**  
 Scale: **1/4" = 1'-0"**

Drawn: **Friedman**  
 Checked: **A4**