

Planning Application #: 16-018

Date Received: 2/23/16
 Fee Paid: \$2,072
 Receipt #: 93488

City of Albany

PLANNING APPLICATION FORM

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 - 1:15 PM, Mon. - Thu.) at 1000 San Pablo Avenue, Albany, CA 94706 (510) 528-5760.

Fee Schedule (FY 2014-2015)

<input checked="" 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 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.

Job Site Address: 949 Madison St.		Zoning District: R-2
Property Owner(s) Name: Sam Wong / Angela Wong	Phone: (415) 533-2169 Fax:	Email: swong@kingbrown.com
Mailing Address: 949 Madison St.	City: Albany	State/Zip: CA 94706
Applicant(s) Name (contact person): Antonio Lao /clad	Phone: 510-654-4681 Fax:	Email: alao@cladstudio.com
Mailing Address: 5771 Buena Vista Ave.	City: Oakland	State/Zip: CA 94618

PROJECT DESCRIPTION

Remodel of existing kitchen and existing bathroom and addition of a second story over the rear portion of the house. Scope of work includes newer foundation, new master bedroom and study, second bathroom

Please fill out the following information correctly. **Failure to fill out the information adequately or incompletely will result in your application to not be processed.** If you have any additional questions, please contact staff for details.

ARCHITECTURAL STYLE

The architectural style/appearance of the home is: TRADITIONAL BUNGALOW

GENERAL INFORMATION

Item	Existing	Proposed
What is your lot coverage?	34%	34%
What is the amount of impervious surface on the lot?	1813 sq ft (incl. house)	1813 sq ft
How many dwelling units are on your property?		
How many off-street parking spaces do you have? (front yard parking is not counted unless previously approved by the City)	2	2
What are the dimensions of parking spaces? (give interior dimensions of enclosed parking spaces)	<u>9</u> ft. X <u>18</u> ft.	<u>9</u> ft. X <u>18</u> ft.
What is the narrowest width of your driveway?	11'5"	11'5"

SITE REGULATIONS BY DISTRICT

	Existing	Proposed Construction	Requirement
Setbacks			
Front (west)	10' -1/2"	10'- 1/2"	15'
Side (south)	11'-5"	8'-5"	3'
Side (north)	1'- 5 1/2"	1'-5 1/2"	3'
Rear (east)	45'-10"	42'-10"	20'
Area			
Lot Size	3,750 sq ft	3,750 sq ft	--
Lot Coverage	34%	34%	50%
Maximum Height	13'-6"	24'	28' max.

***In parentheses, please note the elevation (i.e. north, east, west, south)**

****Please refer to the attached Basic Site Regulations handout attached to this application for setback information.****

FLOOR AREA RATIO

	Existing	Proposed	Requirement
Lot Size	3750	3750	--
Floor Area			
Garage/Storage	185	185	
Main Level	1073	1073	--
Second-floor		606	
Total	1258	1864	--
Total Counted*	1258	1824	--
Floor Area Ratio*	34%	50%	55%

* 220 sq. ft. may be exempted from "total counted" for covered parking and 60 sq. ft. may be exempted for stairs as permitted by MC 20.24.050.

PROJECT ADDRESS: 949 Madison St.

**SUBMITTAL REQUIREMENTS FOR PLANNING AND ZONING APPLICATIONS
REQUIREMENTS MAY VARY WITH INDIVIDUAL PROJECTS – CONTACT STAFF FOR DETAILS**

SELF-CERTIFICATION CHECKLIST

As part of the application, the following requirements must be included and each box checked by the applicant certifying that requirements have been satisfied.

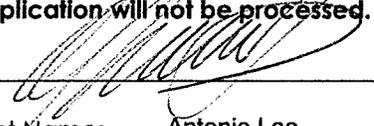
- One (1) complete pdf version of plans (one document containing all pages) *E-MAIL*
- One (1) full-size set of plans
- Green Building Checklist
- Site survey prepared by a licensed surveyor for projects where construction is proposed less than 4 ft. from the property lines
- Installation of story poles ten days before the public hearing (second story additions only) *TSD*

Project plans include the following for a complete submittal:

- Cover page including project description with FAR and lot coverage information
- Dimensioned site plan including proposed parking layout and curb cuts
- Existing elevations with building heights
- Proposed elevations with building heights
- Building sections
- Floor plans (existing and new)
- Roof plan
- Window schedule/details
- Street elevation showing neighboring properties
- Detailed photos of the existing home and proposed location of new development

Please check each box indicating you have sign below indicating that you have included all of the above information and understand that your applicant will not be processed until all of the information is included.

I have included the above information and understand that if there any incomplete information, my application will not be processed.

X  _____ Date: Feb 23, 2016
Print Name: Antonio Lao

Please contact the Community Development Department if you have any additional questions. We are open with the following hours:

Monday, 8:30 AM-7:00 PM
Tuesday-Thursday 8:30 AM-5:00 PM
Friday 8:30 AM-12:30 PM
Closed for lunch from 12pm-1:15 pm daily
Albany City Hall
1000 San Pablo Avenue, Albany, CA 94706
TEL: (510) 528-5760

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	<u>2-23-16</u> _____ Date
 _____ Signature of Applicant (if different)	<u>2-23-16</u> _____ Date