Planning Application #: 16-065

Date Received: 8/3/2016
Fee Paid: 3937.50
Receipt #: ~~3937.50~~ 38-0002

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 2016-2017)

☒	Design Review*	$2,625/ Admin. $1,556
☐	Parking Exceptions/Reductions - see separate handout*	$Actual Cost/Min $2,625
☐	Sign Permit	$2,625/$1,054 Admin.
☒	Conditional Use Permit (major)*	$Actual Cost/Min $2,625
☐	Conditional Use Permit (minor)*	$1,556
☐	Temporary/Seasonal Conditional Use Permit*	$1,054
☐	Lot Line Adjustment*	$Actual Cost/Min $1,101
☐	Parcel/Subdivision Map; Planned Unit Development; Condo Conversion*	$3,357
☐	Variance*	$2,625
☐	Zoning Clearance Wireless	$1,101
☐	Other(s): _____	$_____

**When obtaining more than one planning approval, the full amount for the highest fee will apply and ½ fee will be charged for any other ones.*

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

Job Site Address: 625 San Pablo Ave		Zoning District: SPC
Property Owner(s) Name: David Orth	Phone: 510-367-4484 Fax:	Email: Davidorth3@aol.com
Mailing Address: 822 Indian Rock Ave	City: Berkeley	State/Zip: CA 94707
Applicant(s) Name (contact person): Scott Davidson	Phone: 510-499-8060 Fax:	Email: Scott@oceanviewbrews.com
Mailing Address: 1351 Main Ave	City: Albany	State/Zip: CA 94706

PROJECT DESCRIPTION (Please attach plans)

See plans / small addition / micro brewery / taproom

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.

David LOM 8/3/16

Signature of Property Owner Date

Signature of Applicant (if different) Date

City of Albany

CONDITIONAL USE PERMIT
SUPPLEMENTAL QUESTIONNAIRE

The City of Albany Municipal Code contains findings for approval of Conditional Use Permits. Your answers to these questions allow staff to process your application. There may be additional questions based on your responses below. After your application is accepted for processing, staff and the Planning & Zoning Commission (if applicable) will likely make at least one field visit to the Site and neighborhood.

1. What is (was) the use in this building/tenant space prior to your proposal? Retail and Office

2. What use are you proposing? 3.5 BBL micro Brewery + taproom

3. Proposed hours/days of operation? thursday / Friday / sat / sun 12 – 9pm

4. Maximum number of employees expected on site at any one time? (include owners/partners) 2 – 3

5. For instructional uses/assemblies of people/classes, etc. what is the maximum number of participants expected on site at any one time? 2 – 3 Brewery / 10 taproom

6. For restaurants and cafes, will beer/wine/liquor be served? Beer

7. How large is the space your business will occupy? 1,000 sq ft

8. Do you have off-street parking? If so, how many spaces? 6

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 12 PM – 1 PM daily

Albany City Hall
1000 San Pablo Avenue, Albany, CA 94706
TEL: (510) 528-5760