

Urban Village by the Bay

ALBANY CALIFORNIA

PLANNING APPLICATION FORM NON-RESIDENTIAL

Please complete the following application to initiate City review of your proposed project. 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 in advance of application submittal.

Submit all applications and supporting documents via email or file share to planning@albanyca.org

Fee Schedule (FY 2020 - 2021)

<input type="checkbox"/> Design Review*	\$3,165 / Admin. \$1,385
<input type="checkbox"/> Parking Exceptions/Reductions	\$1,385
<input type="checkbox"/> Parking Survey	\$2,176
<input type="checkbox"/> Sign Permit	\$791 / Admin \$198
<input type="checkbox"/> Conditional Use Permit (major)*	\$2,571
<input checked="" type="checkbox"/> Conditional Use Permit (minor)*	\$1,187
<input type="checkbox"/> Temporary/Seasonal Conditional Use Permit*	\$1,187/\$396
<input type="checkbox"/> Lot Line Adjustment*	\$2,373
<input type="checkbox"/> Parcel/Subdivision Map	\$2,373
<input type="checkbox"/> Condo Conversion	\$3,956
<input type="checkbox"/> Variance*	\$4,747
<input type="checkbox"/> Wireless Facility Zoning Clearance	\$1,187
<input type="checkbox"/> Minor Changes to Project with 2 Years of original approval	\$1,187
<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.

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

Job Site Address: 545 San Pablo Ave. Albany CA 94710		Zoning District: SPC
Property Owner(s) Name: Lucy Wu	Phone: 510 292-8002 Fax:	Email: ruthliu88@yahoo.com
Mailing Address: 10032 San Pablo Ave	City: El Cerrito	State/Zip: CA/94530
Applicant(s) Name (contact person): Julius Liu	Phone: 510 203-9636 Fax: 510 527-6909	Email: liujulius@yahoo.com
Mailing Address: 10032 San Pablo Ave	City: El Cerrito	State/Zip: CA/94530

PROJECT DESCRIPTION (Please attach plans)

Tenant improvement to create a health department licensed commissary kitchen for 3 food trucks and caterers & a BBQ restaurant that specializes in large event catering, offer a sit down and take out venue.

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 the 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