Date Received: 8/31/22 Fee Paid: \$207.89

Urban Village by the Bay

A L B A N Y C A L I F O R N I A

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 2022-2023)

	Design Review*	\$3,323.12 / Admin. \$1,454.19
	Parking Exceptions/Reductions	\$1,454.19
	, Parking Survey	\$1,454.17 \$2,284.71
V	Sign Permit	\$830.52 / Admin \$207.89
	Conditional Use Permit (major) - Supplemental CUP Questionnaire also required.	
	Conditional Use Permit (minor) – Supplemental CUP Questionnaire also required.	\$2,699.45 \$1,246.30
	Temporary/Seasonal Conditional Use Permit*	\$1,246.30/\$415.78
	Lot Line Adjustment*	\$2,491.56
	Parcel/Subdivision Map	\$2,471.56
	Condo Conversion	
	Variance*	\$4,153.64
	Wireless Facility Zoning Clearance	\$4,984.16
	Minor Changes to Project with 2 Years of original approval	\$1,246.30
	Other(s):	\$1,246.30
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^{*}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.

Job Site Address: 100/ SAN PABLO AU. ALBI	Zoning District:	
Property Owner(s) Name: T3P Piloducts Noith Aurilia	Phone: 612-819-5714 Fax:	Email: DANIELLE. REBLING @ Br. com
Mailing Address: P.O. 130x 941709	City: HOUSTON	State/Zip:
Sibu Dasibus/uc - Stava Locke	Phone: 209-524-4484 Fax:	Email: SIOCKIZ@ SIBN DESIBNS, CON
Mailing Address: 204 Campus Way	City: MODIZSTO	State/Zip: CA 95350

PROJECT DESCRIPTION (Please attach plans)

RECEIUE \$	INSTALL	-> REM	OUR E	XISTIN	6 CANO	Ay SIGNA	162 \$	CARONY FASIA LIGHTBAR	
REPLACE	WITH	NEW -	LIKE	FOR	LIKE.	SAME	AS	Existing	

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 own	er.	
Skyl	8-31-2022	
Signature of Property Owner	Date	-
All	8-31-2022	
Signature of Applicant (if different)	Date	