



Soft Story Seismic Retrofit Program

SCREENING FORM – NO FEE

Community Development Department
1000 San Pablo Avenue, Albany, CA 94706
(510) 528-5760, softstory@albanyca.org

In accordance with Albany Municipal Code (AMC) Section 12-15, the owner of each subject building (or the owner's authorized agent) shall complete and submit this Screening Form. In some cases, portions of this form (Section 2, Question 3 and Question 6) must be completed by a California licensed architect or civil engineer. Submittal of this Screening Form is required even if the building has completed voluntary seismic strengthening or if the building in its current condition is believed to satisfy the retrofit requirements of AMC Section 12-15. A separate document, **Screening Form Instructions**, provides definitions, additional explanations, and examples for use in completing this Screening Form. Electronic versions of this Screening Form and the Instructions are available at albanyca.org/softstory.

Submit the completed Screening Form by October 15, 2024:

- As a pdf attachment to softstory@albanyca.org with "Screening Form submittal" in the subject line, or
- As a hardcopy by U.S. mail to Albany Community Development Department at the address shown above, or
- By in-person delivery to the Albany Community Development Department at the address shown above, or
- By completing the online version of the form (linked at albanyca.org/softstory)

SECTION 1 – BUILDING INFORMATION

STREET ADDRESS _____

BUILDING IDENTIFIER(S) _____

If there is only one building on this parcel, leave the Building Identifiers blank. Otherwise, see Instructions.

SECTION 2 – "SUBJECT BUILDING" CHECK

- See the Instructions for definitions, additional explanation, and examples.
- If needed, the building official is authorized to require additional information to justify your responses.

	<u>Yes</u>	<u>No</u>
1. Was the building originally constructed or permitted before January 1, 1981 or designed under the 1976 or earlier Uniform Building Code? • If No, skip to Section 4	<input type="checkbox"/>	<input type="checkbox"/>
2. Does the building contain three or more dwelling units? • If No, skip to Section 4	<input type="checkbox"/>	<input type="checkbox"/>
3. Does the building have one or more wood-frame target stories? • If "No," skip to Section 3. Signature of a design professional is required. • If the building has full-height concrete or masonry walls in the ground story, it might be eligible for Screening by the Department. See the Instructions.	<input type="checkbox"/>	<input type="checkbox"/>
4. Has the building already undergone a seismic retrofit?	<input type="checkbox"/>	<input type="checkbox"/>
5. Does the building have 5 or more dwelling units?	<input type="checkbox"/>	<input type="checkbox"/>
6. Does the building's wood-frame target story contain one or more legally permitted dwelling units or other spaces with business (B), mercantile (M) or assembly (A) occupancy? • If yes, signature of a design professional is required	<input type="checkbox"/>	<input type="checkbox"/>

Wood-Frame Target Story Seismic Retrofit Program: SCREENING FORM

ADDRESS: _____

SECTION 3 – DESIGN PROFESSIONAL STATEMENT

Under penalty of perjury, I certify that the information provided in Section 2, Question 3 and, if applicable, Question 6 of this Screening Form is based on my personal review of the building and its records, or review by others acting under my direct supervision, and is correct to the best of my knowledge.

Date stamped and signed

Firm name

Design Professional telephone

Design Professional email



SECTION 4 – OWNER / AGENT STATEMENT

Owner Name

Owner telephone and email

Owner mailing address

Authorized agent (optional)

Agent telephone

Agent email address

Agent mailing address

Under penalty of perjury, I certify that the information provided in Sections 1 through 4 of this Screening Form is correct to the best of my knowledge.

If this box is checked, either a design professional is not required or this form was completed by Department staff. Section 3 is therefore left blank, consistent with the instructions.

Owner

Agent

Signature

Date