



**CITY OF SAN PABLO**  
*City of New Directions*

**PLANNING DEPARTMENT**  
13831 San Pablo Avenue  
San Pablo, CA 94806  
Tel: (510) 215-3030  
Fax: (510)215-3014

Permit No: \_\_\_\_\_  
Application Fee: \_\_\_\_\_  
Application Date: \_\_\_\_\_  
Hearing Date: \_\_\_\_\_

### PLANNING APPLICATION FORM

<input type="checkbox"/> Conditional Use Permit	<input type="checkbox"/> Parcel Map
<input type="checkbox"/> Design Review	<input type="checkbox"/> Rezoning
<input type="checkbox"/> General Plan Amendment	<input type="checkbox"/> Sign Review
<input type="checkbox"/> Home Occupation Permit	<input type="checkbox"/> Temporary Use Permit
<input type="checkbox"/> Lot Line Adjustment	<input type="checkbox"/> Variance
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Other: _____

#### PROPERTY INFORMATION

Street Address: \_\_\_\_\_  
Assessor's Parcel No(s): \_\_\_\_\_ Zoning: \_\_\_\_\_  
Present Use of Property: \_\_\_\_\_  
Lot Size: \_\_\_\_\_ General Plan Designation: \_\_\_\_\_  
Reason for filling this application: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### APPLICANT INFORMATION

Property Owner: \_\_\_\_\_  
Address: \_\_\_\_\_  
Daytime Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
  
Authorized Agent/Contact Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Daytime Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

I HEREBY CERTIFY THE TRUTH OF THIS APPLICATION AND ACKNOWLEDGE THAT ANY INACCURACIES IN IT SHALL, AT THE CITY'S OPTION, RESULT IN AUTOMATIC INVALIDATION OF THE ACTION BASED THEREON AND THAT FINAL APPROVAL IS DEPENDENT UPON COMPLIANCE WITH CITY REQUIREMENTS.

_____ Signature of Applicant	_____ Date
_____ Signature of Property Owner	_____ Date

**FOR OFFICAL USE ONLY**

ASSIGNED TO: \_\_\_\_\_

## APPLICATION REQUIREMENTS

Your completed application requires the following checked items:

### **REQUIRED**

- Application form
- Stormwater Control Plan (for all projects that impact more than 10,000 sf and auto service facilities, gas stations, restaurants, and uncovered parking lots that impact more than 5,000 sf)
- Runoff Reduction Measures Form (for projects that impact more than 2,500 sf)
- Letter of explanation
- Business plan (including hours of operation, # of employees, etc.)
- Letter of authorization from the property owner
- Legal description of your property
- Site plans & floor plans with dimensions (3 sets-full size)
- Building elevations with dimensions (3 sets-full size)
- Color and material board
- Landscaping plans (3 sets-full size)
- Irrigation plans
- Photos of the site
- 8 1/2"X 11" reduction of the site plans, floor plans & elevations
- Application Fee (non-refundable) payable to the City of San Pablo
- Other \_\_\_\_\_

Once we have received your complete application, we will schedule the item for a Planning Commission hearing. Public notice of the hearing will be given by mail to all property owners within 300ft of the subject property and it will be published in the local newspaper, in accordance with the requirements of Government Code Section 65905. The Commission holds meetings every third Tuesday of each month at 6:30 PM in the Council Chambers. If your application is complete, you will be placed on the first available meeting agenda. If you would like staff to conduct a preliminary plan review before you submit the formal application, please contact Planning at (510) 215-3030.

Planning staff is available from 7:30 a.m. to 6:00 p.m. Monday through Thursday on an appointment basis. If you have any questions please contact us at (510) 215-3030. We appreciate your business and cooperation. Thank you.

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