

PLANNING PERMIT APPLICATION

Planning & Building • 2263 Santa Clara Ave., Rm. 190

Alameda, CA 94501-4477

alamedaca.gov

510.747.6800 • F: 510.865.4053 • TDD: 510.522.7538

Hours: M, W, Th – 7:30 am – 4:30 pm

T – 7:30 am – 4:00 pm

Project Address:

2001 HARBOR BAY PARKWAY

Is this building either an historic monument or listed on an historic study list?

NO

Is the property subject to a Homeowners Association? ☐ Yes ☒ No Association Name:

Please check all applicable permits.

☒ Design Review

☐ General Plan Amendment

☐ HAB Certificate of Approval*

☐ Planned Development
Amendment*

☐ Rezoning

☐ Second Unit Application*

☐ Sign Permit*

☐ Subdivision*

☒ Use Permit*

☐ Variance*

☐ Other: _____

☐ Other: _____

*Permit requires supplemental application.

Please describe the application request. (Please attach additional sheets if necessary.)

INSTALLATION OF A LIQUID NITROGEN TANK ON THE NORTHEAST
SIDE OF THE FACILITY

Please read terms on reverse before proceeding.

Property Owner(s): PEET'S OPERATING CO., INC

Address: 1400 PARK AVE

Phone 1: (510) 594-2100

City: EMERYVILLE

State: CA

Zip: 94608

Phone 2: _____

Email: _____

Applicant (if different than property owner): BOB PIRES

Address: 2001 HARBOR BAY PARKWAY

Phone 1: (510) 594-2139

City: ALAMEDA

State: CA

Zip: 94502

Phone 2: (510) 774-5762

Email: bpires@peets.com

FOR OFFICE USE ONLY

Application #: P/N15-0090

Amount Paid: \$2,184.82

Zoning: C-M-PD

Date Received: 2/25/14

Receipt #: 498235

GP: BP

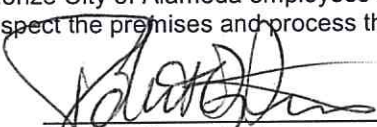
Received by: [Signature]

APN: 074-1359-018-01

APPLICATION CERTIFICATION, AUTHORIZATION, AND AGREEMENT

PROPERTY OWNER (*Person[s] who own[s] the property*):

I hereby certify under penalty of perjury, that I am the owner of record of the property described herein and that I consent to the action requested herein. Further, I hereby authorize City of Alameda employees and officers to enter upon the subject property as necessary to inspect the premises and process this application.



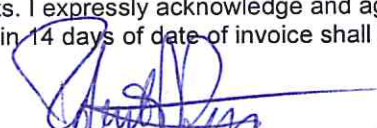
Property Owner's signature

2-23-15
Date

APPLICANT (*Person seeking the permit*):

I hereby certify that I have read this application form and that to the best of my knowledge, the information in this application and all the exhibits are complete and correct. I understand that any misstatement or omission of the requested information or of any information subsequently requested may be grounds for rejecting the application, deeming the application incomplete, denying the application, suspending or revoking a permit issued on the basis of these or subsequent representations, or for the seeking of such other and further relief as may seem proper to the City of Alameda.

For applications subject to a time and materials charge, I hereby agree to pay the City of Alameda all incurred costs for staff time and materials associated with review and processing of the subject project, even if the application is withdrawn or not approved. I understand that one or more deposits will be required to cover the cost noted herein at such time as required by the Planning Director to ensure there are adequate funds to cover anticipated time and material costs. I expressly acknowledge and agree that failure to pay a written invoice for additional funds within 14 days of date of invoice shall constitute the applicant's withdrawal of the application.



Applicant's signature

2-10-15
Date

Please Note:

1. Fees are not refundable and payment in no way guarantees approval of application.
2. Please make checks payable to the City of Alameda.

USE PERMIT

SUPPLEMENTAL FORM

Community Development • Planning & Building
2263 Santa Clara Ave., Rm. 190
Alameda, CA 94501-4477
alamedaca.gov

510.747.6800 • F: 510.865.4053 • TDD: 510.522.7538
Hours: 7:30 a.m.–3:30 p.m., M–Th

FILING FEE: \$1,611.64

Use Characteristics: Please describe the project in terms of anticipated maximum level of operation, scope of use, and materials involved for the proposed use.

SITE USE WILL NOT CHANGE. WE ARE INSTALLING A LARGER LIQUID NITROGEN TANK TO REDUCE FREQUENCY OF DELIVERIES. CURRENT TANK IS 2400 GALLONS, THE NEW TANK IS 9200 GALLONS, LIQUID NITROGEN DELIVERIES SHOULD BE REDUCED FROM 8/MONTH TO 2/MONTH.

Business Activity:

Existing Use: ROASTING & PACKAGING COFFEE Proposed Use: ROASTING & PACKAGING COFFEE
Hours and Days of Operation: 24/7 Total Employees: 110
Number of Shifts: 2 Employees per Shift: 70/1ST 40/2ND
Customers Per Day: 8 Trucks Per Day (indicate truck size): (53')
Floor Area: 127,000 ft² Number of Parking Spaces on Property: 139

Check all that may apply with the proposed use:

☒ Operating Hours Between 10:00PM – 7:00AM

☒ Use of Outdoor Spaces/Sidewalk

☐ Hazardous Materials

☐ Air Emissions/Odors

☐ On-sale Alcohol ☐ Off-sale Alcohol

☐ Massage Activity

☐ Beer ☐ Wine ☐ Distilled Spirits

☐ Use of Amplified Noise

Use the space below to provide addition detail, if necessary:

Surrounding Land Uses: What uses (residential, commercial, park, or manufacturing) exist on adjacent properties?

North: COMMERCIAL

East: MANUFACTURING

South: UNDEVELOPED PROPERTY

West: SIDEWALK/STREET