



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:

1115 Bay Street

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

Study list

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

Please check all applicable permits.

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Design Review | <input type="checkbox"/> Rezoning | <input type="checkbox"/> Use Permit* |
| <input type="checkbox"/> General Plan Amendment | <input type="checkbox"/> Second Unit Application* | <input checked="" type="checkbox"/> Variance* |
| <input type="checkbox"/> HAB Certificate of Approval* | <input type="checkbox"/> Sign Permit* | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Planned Development Amendment* | <input type="checkbox"/> Subdivision* | <input type="checkbox"/> Other: _____ |

*Permit requires supplemental application.

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

remove and replace gazebo

Please read terms on reverse before proceeding.

Property Owner(s): Ken Gonzalez

Address: 1115 Bay St Phone 1: _____
 City: Alameda State: CA Zip: 94501 Phone 2: _____
 Email: _____

Applicant (if different than property owner):

PK Consultants, Inc -

510-263-9399

Address: 2037 A Clement Ave Phone 1: _____
 City: Alameda State: CA Zip: 94501 Phone 2: _____
 Email: Barbara@pkconsultants.com

To be completed by city staff

Application #: PLN14-0512 Amount Paid: \$1,611.64 Zoning: _____
 Date Received: H Dong Receipt #: 494530 GP: _____
 Received by: 8/19/14 APN: _____

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

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

8/18/2014
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.



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X 
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8/19/14
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