

City of Albany

Planning Application #: 17-051

NOV 17 2017

Date Received: 11/17/17
 Fee Paid: (No add'l)
 Receipt #: _____

Community Development



City of Albany

PLANNING APPLICATION FORM

Please complete the following application to initiate City review of your application. 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. The Community Development Department office is open to accept applications Monday, 8:30 AM to 7:00 PM, Tuesday through Thursday 8:30 AM to 5:00 PM, and Friday 8:30 AM to 12:30 PM (closed Noon - 1:15 PM, Mon. - Thu.) at 1000 San Pablo Avenue, Albany, CA 94706 (510) 528-5760.

Fee Schedule (FY 2014-2015)

<input checked="" type="checkbox"/> Design Review*	\$2,072/ Admin. \$1,101
<input type="checkbox"/> Parking Exceptions/Reductions - see separate handout*	\$Actual Cost/Min \$2,072
<input type="checkbox"/> Conditional Use Permit (major)*	\$Actual Cost/Min \$2,072
<input type="checkbox"/> Conditional Use Permit (minor)*	\$1,101
<input type="checkbox"/> Sign Permit	\$1,479/\$461 Admin.
<input type="checkbox"/> Temporary/Seasonal Conditional Use Permit*	\$461
<input type="checkbox"/> Lot Line Adjustment*	\$Actual Cost/Min \$1,101
<input type="checkbox"/> Secondary Residential Unit*	\$1,101
<input type="checkbox"/> Parcel/Subdivision Map; Planned Unit Development; Condo Conversion*	\$3,357
<input type="checkbox"/> Variance*	\$2,072
<input type="checkbox"/> Other(s): _____	\$ _____

*When obtaining more than one planning approval, the full amount for the highest fee will apply and 1/2 fee will be charged for any other ones.
 General Plan Update Fee \$45 included in the fees above. This fee only needs to be paid once for each separately submitted application.

Job Site Address: <u>1049 KAINS AVE</u>		Zoning District: <u>R-2</u>
Property Owner(s) Name: <u>CONRAD KONG</u>	Phone: <u>408 833 8896</u> Fax: _____	Email: <u>CONRADKONG@YANCO.COM</u>
Mailing Address: <u>21088 LAVINACT</u>	City: <u>CUPERTINO</u>	State/Zip: <u>CA 95014</u>
Applicant(s) Name (contact person): <u>JOHN BARTON</u>	Phone: <u>510 290 9007</u> Fax: _____	Email: <u>JBARTON@MNSB.COM</u>
Mailing Address: <u>339 DE LEON AVE</u>	City: <u>FREMONT CA</u>	State/Zip: <u>CA 94539</u>

PROJECT DESCRIPTION

REMODEL & EXPAND EXIST'G SFR - DEMO EXIST'G DETACHED GARAGE -
NEW HOUSE TO BE 2-STORIES W/ ATTACHED 1-CAR GARAGE

Please fill out the following information correctly. **Failure to fill out the information adequately or incompletely will result in your application to not be processed.** If you have any additional questions, please contact staff for details.

ARCHITECTURAL STYLE

The architectural style/appearance of the home is: CRAFTSMAN

GENERAL INFORMATION

Item	Existing	Proposed
What is your lot coverage?	1110 - 30%	1613 - 43%
What is the amount of impervious surface on the lot?	1520sf	
How many dwelling units are on your property?	1	1
How many off-street parking spaces do you have? (front yard parking is not counted unless previously approved by the City)	2	2
What are the dimensions of parking spaces? (give interior dimensions of enclosed parking spaces)	___ ft. X ___ ft.	9'-8" X 20 ft.
What is the narrowest width of your driveway?	11'	11'

SITE REGULATIONS BY DISTRICT

	Existing	Proposed Construction	Requirement
Setbacks			
Front ()	14'-4"	14'-4"	15'
Side ()	5'-8"	3'-8"	3'-8"
Side ()	11'-10"	4'-2"	3'-8"
Rear ()	35'-0"	19'-11"	15'-0"
Area			
Lot Size	3750	3750	-
Lot Coverage	30%	43%	50%
Maximum Height	14'	25'	28' max.

*In parentheses, please note the elevation (i.e. north, east, west, south)

Please refer to the attached Basic Site Regulations handout attached to this application for setback information.

FLOOR AREA RATIO

	Existing	Proposed	Requirement
Lot Size	3750	3750	-
Floor Area			
Garage/Storage	240	234	
Main Level	870	1237	-
Second-floor	0	809	
Total	1110	2280	-
Total Counted*	1110	2000	-
Floor Area Ratio*	30	53%	55%

* 220 sq. ft. may be exempted from "total counted" for covered parking and 60 sq. ft. may be exempted for stairs as permitted by MC 20.24.050.

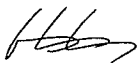
TERMS AND CONDITIONS OF APPLICATION

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 this 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 owner.

 11/15/2017

Signature of Property Owner Date

Signature of Applicant (if different) Date