

**FREE (No FEE required)**

Pre Application Date: \_\_\_\_\_



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

## PLANNING PRE-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"/> Business License	<input type="checkbox"/> Temporary Use Permit
<input type="checkbox"/> Lot Line Adjustment	<input type="checkbox"/> Variance
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Not sure/Other: _____

### ADDRESS OF APPLICATION SITE

Street Address: \_\_\_\_\_

Present Use of Property: \_\_\_\_\_

Reason for filling this application (please give as much information as possible):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### APPLICANT'S INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



## **PRE-APPLICATION REQUIREMENTS**

### **REQUIRED**

- ❑ Application form
- ❑ Business plan, if applicable (including hours of operation, # of employees, etc.)
- ❑ DRAFT Site plans & floor plans with dimensions
- ❑ Photos of the site
- ❑ Other \_\_\_\_\_

Once we have received your complete pre-application, we will schedule your proposal for review by a City of San Pablo Planner. The project Planner will then contact you with a response on your proposal or to ask additional questions in order to make a determination.

We appreciate your business and look forward to working with you on your project. If you have any questions, please contact us at (510) 215-3030. Thank you.