



CITY OF HAYWARD
PLANNING DIVISION APPLICATION FOR A
DEVELOPMENT PERMIT

777 B STREET, HAYWARD, CA 94541-5007
(510) 583-4200 ♦ TDD (510) 247-3340 ♦ FAX (510) 583-3649

FOR OFFICE USE ONLY

APPLICATION NUMBER
TYPE
TAKEN BY
DATE

APPLICANT(S) LAST NAME FIRST NAME

COMPANY NAME (IF APPLICABLE)

CURRENT ADDRESS: STREET

CITY STATE ZIP CODE PHONE NO.

FAX NO. E-MAIL CELL PHONE

APPLICANT'S INTEREST IN PROPERTY: OWNER LESSEE OPTIONEE OTHER

INVOICES TO BE DIRECTED TO: OWNER APPLICANT OTHER
(SEE NOTE 2) (Please provide address if other)

\$ FEE INITIAL TIME & MATERIAL DEPOSIT
(See Notes 1 & 2)

PROPERTY OWNER(S) LAST NAME FIRST NAME PHONE NO.

STREET CITY STATE ZIP CODE

FAX NO. E-MAIL CELL PHONE

TYPE OF PERMIT(S): SITE PLAN REVIEW GENERAL PLAN AMEND. PARCEL MAP TRACT MAP VARIANCE
USE PERMIT ADMIN. USE PERMIT ZONE CHANGE FROM TO OTHER

PROJECT ADDRESS/LOCATION

ASSESSOR'S PARCEL NO(S) ZONING DISTRICT(S)

PROJECT DESCRIPTION (attach additional sheets if necessary)

I HEREBY CERTIFY THAT I AM THE OWNER OF RECORD OF THE PROPERTY DESCRIBED ABOVE AND, FURTHER THAT I APPROVE OF THE PROPOSED USE CONTAINED HEREIN. SEE NOTE 2.

I HEREBY STATE THAT THE FOREGOING STATEMENTS AND ANSWERS AND ALL DATA, INFORMATION AND EVIDENCE SUBMITTED HERewith ARE IN ALL RESPECTS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE AND CORRECT.

OWNER'S NAME PLEASE PRINT

SIGNATURE X SEE NOTE 2

APPLICANT'S SIGNATURE X

STAFF REMARKS

NOTE 1: FEES ARE NOT REFUNDABLE AND PAYMENT IN NO WAY GUARANTEES APPROVAL OF APPLICATION.
NOTE 2: THE OWNER IS RESPONSIBLE FOR PAYING ALL TIME AND MATERIAL CHARGES.

THIS IS YOUR RECEIPT WHEN MACHINE VALIDATED



Development Application Instructions and Checklist

City of Hayward, Planning Division
777 B Street, First Floor, Hayward, CA 94541
(510) 583-4200 Telephone (510) 583-3649 Fax

Submittal Requirements

All applicants should consult with a Planner to determine which of these submittal requirements will be applicable for the specific project you are submitting, as some of the requirements may not be necessary.

Application Form, must be signed by both applicant and property owner

Application Fee

Application Checklist (this form)

Required Findings

An explanation of how each of the required findings for your particular application can be made. See handout for required findings based on application type

Plans (Prepared by a qualified design professional)

Plans must be folded to 9" x 12" in size.

Site Plan (should be to scale)

- Show the entire property involved, including all property lines
- Show the location of all existing and proposed structures, including those to be removed
- Show the distances between existing and proposed buildings and property lines
- Show any existing and proposed easements
- Show the existing and proposed parking areas
- Show existing and proposed landscape areas
- Show the location of existing and proposed trees and other natural features, including creeks, earthquake fault traces, landslide areas, etc.
- Show location of existing and proposed fences and/or retaining walls
- Show the location and dimensions of the trash and recycling enclosure(s), if applicable
- Show the location of any signage such as a monument sign, if applicable
- Show the location and dimension of all group and private open space areas (multi-family residential projects only)
- Indicate the type of construction, occupancy and total building area for each building
- Show the location and width of all driveways and roads accessing site

- Identify and show the location of the nearest fire hydrant and provide water flow and pressure information for the hydrant, which can be obtained from the Public Works Utilities Division

Floor Plans (should be dimensioned and to scale)

- Show all interior improvements
- Indicate on the floor plan the use of each room
- Include dimensions of each space, including all parking areas

Elevation Drawings (should be dimensioned and to scale)

- Show all exterior building elevations, i.e. all sides of each structure, including building heights
- Show all fences and/or walls
- Show all trash and recycling enclosures, if applicable
- Show location and type of all exterior lighting
- Indicate building materials and colors (colored elevations are encouraged)
- Show any exterior building wall signage, if applicable

Landscape and Irrigation Plans (generally required to be prepared by a licensed Landscape Architect) *Refer to the Article 12 of the Hayward Municipal Code related to the Bay-Friendly Water-Efficient Landscape Ordinance and the Hayward Environmentally-Friendly Landscape Guidelines*

- Show locations of proposed plants, trees and ground covers
- Provide a plant legend that indicates plants' botanical and common names
- Indicate the quantity, size and spacing of all plant materials
- Show and label all existing trees to be removed or retained
- Show the layout of the irrigation system including the water meter, main and lateral lines, sprinklers, bubblers, drip emitters, etc.
- Provide a summary data table on the plans that includes (1) the total landscape area in square feet; (2) the project type, i.e. new, rehabilitated, public, private, homeowner-installed, etc.; and (3) water supply type, i.e. potable, recycled, well.
- Water Efficient Landscape Worksheet including the hydrozone information table and water budget calculations

Grading, Utility and Drainage Plans

- Show existing and proposed grades; contours for steep slopes are to be drawn at a minimum of 2-foot intervals
- Show the direction of storm water runoff and the existing facility that will receive the runoff
- Show all proposed utilities, including water connections, sanitary sewer, storm lines, street and parking lot lighting, etc.

Other items, as applicable

See Planner to determine what other items may be applicable for your project

May include Business Plan, Geotechnical/Geological Study, Traffic Study, Photosimulations, Arborist Report, Soil Management Report, Lighting Plan, Drainage Study, or other information to allow an environmental impact analysis.

FIRE DEPARTMENT QUESTIONNAIRE

Business Name: _____

Site Address: _____

Please check the appropriate spaces below:

1. Will any of the following processes occur in this facility?

- | | | |
|---|--|--|
| <input type="checkbox"/> Combustible fiber, generation or storage | <input type="checkbox"/> Laboratory facility | <input type="checkbox"/> Tire recapping or storage |
| <input type="checkbox"/> Dry cleaning | <input type="checkbox"/> Liquefied petroleum gas storage | <input type="checkbox"/> Welding |
| <input type="checkbox"/> Dry ovens | <input type="checkbox"/> Semi-conductor fabrication | <input type="checkbox"/> Wood-working shop |
| <input type="checkbox"/> Electroplating | <input type="checkbox"/> Spray painting | <input type="checkbox"/> Vehicle repair |
- Rack or pallet storage over 12 feet in height
 Free standing storage over 15 feet in height
 Area of storage over 1000 square feet

2. Will your business store, transport, or handle any of the following?

- | | | |
|--|--|--|
| <input type="checkbox"/> Acutely Hazardous Materials | <input type="checkbox"/> Flammable liquids | <input type="checkbox"/> Reactive materials |
| <input type="checkbox"/> Carcinogens | <input type="checkbox"/> Flammable solids | <input type="checkbox"/> Pesticides |
| <input type="checkbox"/> Combustible liquids | <input type="checkbox"/> Hazardous waste | <input type="checkbox"/> Poisonous gases/liquids |
| <input type="checkbox"/> Compressed gasses | <input type="checkbox"/> Highly toxic material | <input type="checkbox"/> Pyrophoric |
| <input type="checkbox"/> Corrosives | <input type="checkbox"/> Irritants | <input type="checkbox"/> Sensitizers |
| <input type="checkbox"/> Cryogenes | <input type="checkbox"/> Organic coating | <input type="checkbox"/> Solvents |
| <input type="checkbox"/> Explosives | <input type="checkbox"/> Organic peroxide | <input type="checkbox"/> Toxic materials |
| <input type="checkbox"/> Fertilizer | <input type="checkbox"/> Oxidizers | <input type="checkbox"/> Unstable materials |
| <input type="checkbox"/> Flammable gases | <input type="checkbox"/> Radioactive material | <input type="checkbox"/> Water reactive |
| | | <input type="checkbox"/> Other health hazards |
| | | <input type="checkbox"/> Other regulated materials |

3. Is this project to be constructed on any of the following sites?

- Site which is contaminated or possibly contaminated with a hazardous material
 Former service station site
 Site which is known to have had underground storage tanks
 Commercial nursery
 Former site known to have had a business which used or stored hazardous materials
 Former site use unknown

Completion of this form should be verified in the Fire Prevention Office. If any boxes in item number **2** are checked, you will need to complete a Chemical Inventory Worksheet Packet. If your business uses water for any purpose other than landscape irrigation and sanitary services (i.e., sinks, toilets, and showers), discharges cooling water of any type into the municipal sewer system, or discharges any wastes other than those from sanitary services into the municipal sewer system or stormwater system, then you are required to contact Wastewater Source Control at 293-8699, for approval.

I have read the above and certify that to the best of my ability, a designated representative of the owner/tenant, the information is true.

Print Name

Signature

Title

Date