



ZONING PERMIT APPLICATION

CITY OF SAUSALITO COMMUNITY DEVELOPMENT DEPARTMENT

420 Litho Street, Sausalito, CA 94965

(415) 289-4128

Date Received: _____

Address of Project Site: _____

APN: _____

Zoning District: _____

FOR STAFF USE ONLY		
<i>Planning App. No.</i>	<i>Receipt No.</i>	<i>Building Permit No.</i>
_____	_____	_____
<i>Review Type</i>	<i>Payment Type</i>	<i>Paid By</i>
<input type="checkbox"/> Minor	<input type="checkbox"/> Cash	_____
<input type="checkbox"/> Intermediate	<input type="checkbox"/> Check	<i>Pay Ref. Staff Int.</i>
<input type="checkbox"/> Major	<input type="checkbox"/> Credit Card	_____

DESCRIPTION OF PROPOSED CONSTRUCTION AND USE

Scope of Work: _____

Does the project present the potential to impair views? If so, please describe: _____

APPLICANT CERTIFICATION

I, the applicant, do hereby, under penalty of perjury, swear that the information contained in this application is true and correct to the best of my knowledge.

Name: _____ Signature: _____ Date: _____

Email Address: _____ Phone Number: _____

PROPERTY OWNER CERTIFICATION (IF PROPERTY OWNER IS DIFFERENT THAN THE APPLICANT)

I, the property owner, hereby authorize the applicant designated in this application to act as my representative during consideration of this project by the City.

Name: _____ Signature: _____ Date: _____

CONCURRENT PLAN CHECK AUTHORIZATION (FOR CONCURRENT BUILDING & ZONING PERMIT REVIEW)

The City offers plan check review to occur concurrently with the Zoning Permit review. Staff recommends the applicant wait until the Zoning Permit is approved prior to submitting a building permit application. If the applicant chooses to initiate the plan check process concurrently with Zoning Permit review, the following authorization must be completed:

I, the applicant, hereby authorize the release of the project plans submitted for plan check review. I understand that the release of plans to plan check does not constitute Zoning Permit or other Planning approval, and I will remain liable for all plan check processing fees if revisions or further planning review are deemed necessary

Signature of Applicant: _____ Date: _____ Staff Verification: _____

BUILDING PERMIT ISSUANCE PRIOR TO EXPIRATION OF ZONING PERMIT 10-DAY APPEAL PERIOD

Staff decisions on Zoning Permits may be appealed to the Planning Commission within 10 days of the staff decision. If the applicant chooses to initiate construction during the Zoning Permit appeal period, the following condition applies:

I, the applicant, hereby agree to cease all work described in this Zoning Permit application if an appeal of the staff decision on the Zoning Permit is filed. I understand a red tag will be placed on the project site and the building permit will be "on hold" until the issues regarding the appeal have been fully resolved by the City. I acknowledge I am beginning construction at my own risk and recognize the City is not liable for any loss of time and/or money if the City determines the work described in this Zoning Permit application must be modified or is not allowed. Furthermore, I agree to restore the project site to its original condition within 30-days if the Zoning Permit is denied.

Signature of Applicant: _____ Date: _____ Staff Verification: _____

PLEASE COMPLETE REVERSE SIDE OF APPLICATION

ZONING DATA SHEET

TO BE COMPLETED BY APPLICANT

STAFF USE ONLY

SITE DEVELOPMENT STANDARD	EXISTING	PROPOSED CHANGE	PROPOSED TOTAL	STAFF VERIFIED	MAXIMUM ALLOWED	
Land Use ¹						✓
No. of Dwelling Units ²						
Accessory Dwelling Unit						
Building Height ³						
No. of Parking Spaces ⁴						
Parcel Area						
Gross ⁵	sq. ft.	sq. ft.	sq. ft.	sq. ft.	sq. ft.	
Net ⁶	sq. ft.	sq. ft.	sq. ft.	sq. ft.	sq. ft.	
Setbacks ⁷						
Front	ft.	ft.	ft.	ft.	ft.	
Rear	ft.	ft.	ft.	ft.	ft.	
Right Side ⁸	ft.	ft.	ft.	ft.	ft.	
Left Side ⁸	ft.	ft.	ft.	ft.	ft.	
Floor Area ⁹						
Total Parcel	sq. ft.	sq. ft.	sq. ft.	sq. ft.	sq. ft.	
Perc. of <u>Net</u> Parcel Area	%	%	%	%	%	
Subject Dwelling Unit ¹⁰ (Required for projects in R-2-2.5 and R-3 zones)	sq. ft.	sq. ft.	sq. ft.	sq. ft.	sq. ft.	
	%	%	%	%	%	
Building Coverage ⁹						
Total Parcel	sq. ft.	sq. ft.	sq. ft.	sq. ft.	sq. ft.	
Perc. of <u>Gross</u> Parcel Area	%	%	%	%	%	
Subject Dwelling Unit ¹⁰ (Required for projects in R-2-2.5 and R-3 zones)	sq. ft.	sq. ft.	sq. ft.	sq. ft.	sq. ft.	
	%	%	%	%	%	
Impervious Surface Area ⁹						
Total Parcel	sq. ft.	sq. ft.	sq. ft.	sq. ft.	sq. ft.	
Perc. of <u>Gross</u> Parcel Area	%	%	%	%	%	
Subject Dwelling Unit ¹⁰ (Required for projects in R-2-2.5 and R-3 zones)	sq. ft.	sq. ft.	sq. ft.	sq. ft.	sq. ft.	
	%	%	%	%	%	

*The Sausalito Municipal Code (SMC) can be accessed at <https://www.codepublishing.com/CA/Sausalito/>

¹ From List of Allowable Land Uses in respective Zone (SMC 10.20.030 (O-/P-), 10.22.030 (R-), 10.24.030 (C-) or 10.26.020 (M-))

² Dwellings legally established from the zoning district's maximum density requirement; not including accessory dwelling units

³ Standard Building Height measured from the Average Natural Grade beneath the structure (SMC 10.40.060.B.1.)

⁴ The standard dimensions for a code-compliant parking space are measured 9 feet wide by 19 feet long

⁵ Total area of a parcel measured in a horizontal plane within the lot lines bounding the parcel.

⁶ Gross Parcel Area excluding net deductions specified in SMC 10.88.040 "Parcel size, net"

⁷ As specified in SMC 10.40.070 (Setbacks and yards)

⁸ As determined by standing at the front parcel line looking in the direction of the rear parcel line

⁹ As specified in SMC 10.40.040 (Floor area ratio); 10.40.050.B (Measurement of Coverage); 10.40.050.C (...Impervious Surfaces)

¹⁰ Sausalito City Council Ordinance No. 1217 established individual maximum limitations for floor area ratio (FAR), building coverage and impervious surface area for any single dwelling unit in the R-2-2.5 or R-3 zoning districts (SMC 10.44.330). Projects located in the R-2-2.5 or R-3 zoning district subject to the *single dwelling unit* and *total parcel* maximum limitations.

Zoning Permit Approved by: _____ **Date of Approval:** _____

Date of Notice Posting: _____ **Effective Date of Permit:** _____