CITY OF EMERYVILLE
INCORPORATED 1896
1333 PARK AVENUE
EMERYVILLE, CALIFORNIA 94608–3517

ZONING COMPLIANCE INFORMATION FORM

For questions about this form contact the Planning Division at 510-596-4362.

BUSINESS LOCATION INFORMATION

Business Name: _____

Address: _____

Phone: _____

Email: _____

BUSINESS OWNER INFORMATION

Owner Name: _____

Address: _____

City: _____ State: ____ Zip: _____

Phone: _____

Email: _____

PROPERTY OWNER INFORMATION

Name: _____

Address: _____

City: _____ State: ____ Zip: _____

Phone: _____

Email: _____

HOME BUSINESS

Is this business operated out of your residence?

Yes ◯ No ◯ *If yes, attach Home Occupations Form.*

If yes, what is the total area of your residence in square feet? _____

APPLICATION SUBMITTED BY:

_____
Applicant Name

_____
Applicant Title

_____ _____
Signature Date

BUSINESS OPERATIONS

Total area of business (in square feet): _____

Number of off-street parking spaces: _____

Describe the business: _____

_____

Previous business at this location: _____

_____

Will this business require any construction or building modifications? Yes ◯ No ◯

Will this business require a sign? Yes ◯ No ◯

Will there be any storage outside? Yes ◯ No ◯

Where is the trash/recycling/compost collection area?

_____

Will service or delivery vehicles be required?

Yes ◯ No ◯ Frequency: _____

BUILDING DIVISION USE ONLY

Does the new business trigger a change in occupancy? Yes ___ No ___ Staff Initial: _____

PLANNING DIVISION USE ONLY

Previous Use Classification: _____

Proposed Use Classification: _____

Does the new business trigger Development Impact Fees ? Yes ___ No ___ Fee: _____

Zoning District: _____ CUP? _____

Comments: _____

_____

Approved: _____ Denied: _____ Date: _____

Staff Initial: _____ Staff Title: _____