



# PERMIT APPLICATION WORKSHEET

Planning & Building Department  
 250 Frank H. Ogawa Plaza, 2nd Floor  
 (510) 238-3891  
 Walk-in - Mon 9:00 a.m. - 3:00 p.m. or  
 Wed 9:30 a.m. - 3:00 p.m.

Tuesday/Thursday - Appointment only



**PLEASE COMPLETE ALL INFORMATION. APPLICANTS WITH INCOMPLETE WORKSHEETS MAY BE ASKED TO GET A NEW NUMBER. INACCURATE INFORMATION MAY LEAD TO SUSPENSION OF THE PERMIT. ADDITIONAL PERMITS MAY BE REQUIRED, i.e., Electrical, Plumbing, Mechanical, Sewer, Obstruction.**

SCHOOL FEE (SF)    Commercial    \$0.66    Residential    \$4.08

ADDRESS FEE    Commercial    \$268.64    Residential    \$120.89    Change of Address for Any Occupancy    \$537.29

TYPE OF PERMIT: (circle one)		
BUILDING	DEMOLITION ( _____ SF)	SOLAR      SIGN      CERTIFICATE OF OCCUPANCY
IS THIS APPLICATION RELATED TO ANY OTHER PERMIT OR COMPLAINT?		IF YES, INDICATE PERMIT #, PLANNING CASE FILE # OR COMPLAINT #:
<input type="radio"/> YES <input type="radio"/> NO		
SITE ADDRESS/JOB LOCATION		ASSESSOR'S PARCEL NO.
DESCRIPTION OF PROPOSED WORK		
VALUATION OF PROPOSED WORK	EXISTING # OF RESIDENTIAL UNITS	# OF STORIES:
\$	_____	OCCUPANCY:
	NUMBER OF UNITS TO BE ADDED	TYPE OF CONSTRUCTION:
		OCCUPANT LOAD:
		EXISTING FIRE SPRINKLERS:
		<input type="radio"/> YES <input type="radio"/> NO
PROPERTY OWNER'S NAME		PROPERTY OWNER'S PHONE NUMBER
PROPERTY OWNER'S ADDRESS (street, city and zip code)		
PERSON SUBMITTING APPLICATION		PHONE NUMBER      EMAIL
ARCHITECT'S/DESIGNER'S NAME		PHONE NUMBER      EMAIL
CONTRACTOR'S LICENSE NUMBER	SIGNATURE OF APPLICANT	DATE

I ACKNOWLEDGE THAT REFUNDS ARE LIMITED PER OMC15.04.1.165 INITIAL      DATE  
 Aug 2024