



# Zoning Project Application

*(This box for staff use only.)*

DATE STAMP HERE

ZP20 \_\_\_ - \_\_\_\_\_

- Administrative Use Permit
- Variance
- Use Permit
- Modification of any of the Above

Zoning District(s): \_\_\_\_\_

Intake Planner: \_\_\_\_\_

## Land Use / Zoning

Planning and  
Development

All new uses, structures, and modifications to structures in the City of Berkeley are required to be in conformance with the Zoning Ordinance.

Information on different types of permits can be found at the links below.

### Overview of the Permitting Process

[https://www.cityofberkeley.info/Planning\\_and\\_Development/Permit\\_Service\\_Center/Permitting\\_Process.aspx](https://www.cityofberkeley.info/Planning_and_Development/Permit_Service_Center/Permitting_Process.aspx)

### Types of Permits

[https://www.cityofberkeley.info/Planning\\_and\\_Development/Home/Types\\_of\\_Land\\_Use\\_Permits.aspx](https://www.cityofberkeley.info/Planning_and_Development/Home/Types_of_Land_Use_Permits.aspx)

### Zoning Project Submittal Requirements

<https://tinyurl.com/rahe8ld>

## Land Use / Zoning

1947 Center Street  
2nd Floor  
Berkeley, CA 94704  
Phone: 510-981-7410  
TDD: 510-981-7450  
[planning@cityofberkeley.info](mailto:planning@cityofberkeley.info)

### Project Information:

Project Address: \_\_\_\_\_ Unit/Suite #: \_\_\_\_\_

Assessor Parcel Number: \_\_\_\_\_

**Project Description:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Expedited Services Requested?** Yes / No

**Property Owner's Name:** \_\_\_\_\_

Owner's Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

**Applicant's Name** (or enter "same"): \_\_\_\_\_

Applicant's Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Under penalty of perjury, I certify that:

- (1) the application materials are true and complete to the best of my knowledge;**
- (2) the attached paper and electronic copies of this application are the same; and**
- (3) I agree to pay all expenses associated with this application.**

*(\*Owner's signature, or signed letter authorizing applicant to apply on owner's behalf, is required for all applications)*

**Applicant Signature:**

\_\_\_\_\_

Printed Name:

\_\_\_\_\_

Date: \_\_\_\_\_

**Owner Signature:**

\_\_\_\_\_

Printed Name:

\_\_\_\_\_

Date: \_\_\_\_\_

(This page is for staff use only)

<b>Zoning District(s):</b>	
<b>Zoning Section</b>	<b>Description</b>
1. 23____.____.____	UP/AUP to
2. 23____.____.____	UP/AUP to
3. 23____.____.____	UP/AUP to
4. 23____.____.____	UP/AUP to
5. 23____.____.____	UP/AUP to
6. 23____.____.____	UP/AUP to
7. 23____.____.____	UP/AUP to
8. 23____.____.____	UP/AUP to
9. 23____.____.____	UP/AUP to
10. 23____.____.____	UP/AUP to