

ZONE CLEARANCE APPLICATION



COMPLETE FORM LEGIBLY. WE CANNOT CONSIDER THIS APPLICATION UNLESS ALL INFORMATION IS PROVIDED AND ALL QUESTIONS ARE ANSWERED.

APPLICANT INFORMATION

Applicant Name: _____ Owner Employee Agent Other
Mailing Address: _____ Zip: _____
Phone: (____) _____ E-mail: _____

BUSINESS INFORMATION

Business Name: _____ Phone : (____) _____
Site Address: _____ Suite: _____ Zip: _____
Describe business operation in detail: _____

Total number of employees: _____. Is there more than one business operating in one suite/office? Yes No
Will your business require outside storage? Yes No If yes, explain:

BUILDING INFORMATION

Business Type (check one): Commercial Office Industrial Other (specify):
Type of Building (check one): Single Tenant Multi-Tenant Other
What is the square-footage of the building and/or your lease area? _____ square-feet.
Previous use of this building or suite: _____ Date business closed: _____
Have any of the following items been, or plan to be done, prior to the expected opening date of your business:
Have any City building permits been applied for? Yes No If yes, list: _____
Will any partitions be added, moved or removed? Yes No
Will there be any exterior additions, demolitions, or alterations? Yes No
Will any electrical systems be added, altered, deleted, or moved? (i.e., outlets, lights, switches, etc.) Yes No
Will any plumbing systems be added, altered, deleted or moved? (i.e., water, gas, sewer, fixtures, etc.) Yes No
Will any mechanical systems be added, altered, deleted, moved? (i.e., heating, air conditioning, fan, etc.) Yes No

Note: Interior painting, papering, and similar finish work do not require permits. Additional information in the form of a letter or plan review may be required to more clearly define the operation of your business.

HAZARDOUS MATERIAL INFORMATION. If your business will handle, store, or generate any hazardous materials or waste, then you will need approval from the City of Redlands Fire Dept and/or San Bernardino County Fire Dept CUPA. A hazardous material or waste is any material (because of its quantity, concentration, physical or chemical characteristics) that poses a significant potential hazard to human health or the environment. If a vendor has supplied a Material Safety Data Sheet (MSDS) for a substance, it is probably a hazardous material. Consider a material to be hazardous if it is flammable, combustible, corrosive, or toxic; this includes fuels (gasoline), propane, acetylene, oxygen, carbon dioxide, dry cleaning chemicals, paints, lead acid batteries, fertilizers, or pesticides. For further information, please call the City of Redlands Fire Dept at (909) 798-7601 during regular business hours, or visit the Fire Dept office at the Civic Center.
Does your business handle, store, or use any of the above classifications? Yes No

ADDITIONAL PERMITS. Approval of this form does not eliminate the need for other permits, licenses, or certificates if required (such as building permit or sign permit, Certificate of Occupancy, Special Event Permit, Conditional Use Permit, Health Dept. permit, hazardous material permit, etc.). If you have any questions about any of the permits mentioned above, please contact the Planning Division public counter at (909) 798 – 7551, option 3.

APPLICANT STATEMENT. I hereby certify under penalty of perjury that I have read and understand all of the sections above, and that the information provided on this form is true and correct to the best of my knowledge. I also state that I have read and familiarized myself with the portions of the Redlands Zoning Regulations (Title 18 of the Redlands Municipal Code) which apply to my business in this location. I agree to comply with these regulations and any other applicable local, state, and federal regulations that may relate to this proposed business.

Applicant's Signature: _____ **Date:** _____

OFFICE USE ONLY BELOW THIS LINE

1. Planning Review: _____ Date: _____ Zone: _____ Rel. Permit: _____
 Permitted Use Nonconforming Use Not Permitted
 Conditional Use Permit approval required prior to business license issuance

2. Building Review: _____ Date: _____ Occ. Type: _____ T.I. Required: Yes No
 Building Approval: _____ Date: _____ Cert. of Occ. or Bldg Permit No.: _____
 Collect Business License Inspection Fee: Yes No

Conditions / Remarks: _____

3. Fire Dept. Review: _____ Date: _____ Fire or HazMat Permit No.: _____
 Fire Dept. Approval: _____ Date: _____ Fire Inspection Required: Yes No
 Collect Business License Inspection Fee: Yes No

Conditions / Remarks: _____

4. Planning Approval: _____ Date Approved: _____ Zone Clearance No.: _____
 Conditions / Remarks: _____

<u>Account Description</u>	<u>Quick Code</u>	<u>Org Key</u>	<u>Object</u>	<u>Amount</u>
Miscellaneous Receipts	529	101164	4814	\$ 46.00