

Application for

## RELIEF FROM REPLACEMENT BUILDING PERMIT REQUIREMENT

Project Address			
Froject Address			
Project Name			
-			
Applicant/Contact Person			
name:			phone:
address:			fax:
city:	state:	zip code:	email:
Property Owner			
name:			phone:
address:			fax:
city:	state	zip code:	email:
Applicant Signature:			Date:
(note: if the applicant is other than the property or	wner, separate signed owner authorization	n is required)	
Required Findings – Describe how the demolition will comply with the following findings (P.M.C. §17.62.100(B)). Complete either			
items 1 – 3 <b>OR</b> item 4			
1. The structure to be demolished is not a designated historic resource or a resource eligible for designation (excluding			
noncontributing structures in landmark districts and historic districts); and			
2. The demolition does not result in the loss of habitable dwelling units on a property zoned for residential use; and			
3. The proposed demolition would not result in the disruption of a continuous grouping of architecturally significant structures or			
create an inappropriate void in the existing architectural or visual character of the area; or			
4. The granting of relief from replacement building permit requirement serves an overriding public benefit and will not be detrimental or injurious to property or improvements in the vicinity of the project site, or to the public health, safety or general welfare.			
of Injurious to property of Improvement	and in the vicinity of the project	a site, or to the public in	ealth, Salety of general wellare.
Staff Use Only	f	Φ.	Analisation Decreasion
PLN PRJ	fee: notification:	\$ \$	Application Processing applied for CofA/demolition
staff initials	3% records fee:	\$ \$	concurrently
date:	total:	\$	approved
			part of project subject to CEQA
			public notice required (500 feet)