

## COMMERCIAL BUSINESS OCCUPANCY PERMIT APPLICATION

*Zoning Review*

### BUSINESS INFORMATION

BUSINESS ADDRESS	TYPE OF BUSINESS (CHECK ONE)
NAME OF BUSINESS	<input type="checkbox"/> RETAIL <input type="checkbox"/> RESTAURANT <input type="checkbox"/> GENERAL OFFICE <input type="checkbox"/> MANUFACTURING <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> SERVICE <input type="checkbox"/> WHOLESALE <input type="checkbox"/> SCHOOL  <input type="checkbox"/> MEDICAL/DENTAL OFFICE <input type="checkbox"/> OTHER: _____
DESCRIPTION OF BUSINESS	
BUSINESS OWNER	PHONE NUMBER
MAILING ADDRESS	

BUSINESS INFORMATION	PLEASE CHECK ONE
1. Will the new business occupancy display any business signs?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Will the new business occupancy include interior or exterior improvements?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Will alcoholic beverages be sold or consumed on the premises?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Will hazardous waste be stored on the premises?	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. Is this business occupying space with another business (Sharing of Space)?	<input type="checkbox"/> YES <input type="checkbox"/> NO
6. If YES, Name of Business: _____	Business Owner: _____

### PROPERTY OWNER INFORMATION *Application cannot be processed unless complete*

PROPERTY OWNER	PHONE NUMBER
MAILING ADDRESS	SIGNATURE

**ACKNOWLEDGMENT** *I understand that the granting of this permit is contingent upon compliance with all regulations of the City of San Fernando Zoning Ordinance and other applicable City, State, and Federal regulations. I hereby certify that I have read the statements contained in this application and that they are true and correct.*

BUSINESS OWNER SIGNATURE*	DATE
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*\*The Commercial Business Occupancy Permit is issued to the Business Owner providing a proposed use is permitted and all general requirements, applicable regulations, and conditions of approval are satisfied. All approved permits are subject to any applicable requirements pursuant to the San Fernando Municipal Code.*

### FOR OFFICE USE ONLY

PERMIT FEE	\$ 160.00	SELECT ONE	PLANNING APPROVAL	DATE
ISSUANCE FEE	\$ 70.00	<input type="checkbox"/> CHANGE OF OWNERSHIP (SAME BUSINESS NAME) <input type="checkbox"/> NEW BUSINESS <input type="checkbox"/> CONTINUATION OF A LEGAL NONCONFORMING USE	BUILDING & SAFETY APPROVAL	DATE
AIMS SURCHARGE	\$ 23.00			
<b>TOTAL FEE</b>	<b>\$ 253.00</b>			
PERMIT NO.	ZONING	CONDITIONAL USE PERMIT <input type="checkbox"/> YES <input type="checkbox"/> NO	COMMENTS	
CBO	USE CATEGORY	RESOLUTION NO.		
AIMS FILE NO.	PARKING RATIO			

**CONDITIONS OF APPROVAL** *Please initial the following conditions*

The following conditions shall be made a part of the approval of this Commercial Business Occupancy Permit, and shall be complied within their entirety, as determined by the Community Development Department.

**Applicable Regulations**      **Sec. 106-490** (C-1 Limited Commercial Zone), **Sec. 106-520** (C-2 Commercial Zone),  
**Sec. 106-585** (M-1 Limited Industrial Zone), **Sec. 106-615** (M-2 Light Industrial Zone)  
**Development Standards**      **Sec. 106-551** (SC Service Commercial Zone), **Sec. 106-668** (Specific Plan Zones and Zoning  
Map Designations)

- \_\_\_\_\_ 1) **Inspection of the subject site by the Building and Safety Division is REQUIRED in order obtain a Certificate of Occupancy to operate a business. All inspections MUST BE SCHEDULED AT LEAST 72 HOURS prior to the operation of any business.**
- \_\_\_\_\_ 2) All landscape planting shall be kept in a healthy and growing condition. Fertilization, cultivation, and tree pruning shall be a part of regular maintenance. Good horticultural practices shall be followed in all instances.
- \_\_\_\_\_ 3) Parking for handicapped persons shall be provided in accordance with standards established in the state handicapped requirements.
- \_\_\_\_\_ 4) Required parking spaces shall be double-striped with the stall widths measured from the midpoints of the double-stripe markings.
- \_\_\_\_\_ 5) All trash and garbage collection facilities shall be either enclosed within a building or by a screening fence or a wall.
- \_\_\_\_\_ 6) A sign permit shall be required prior to the placing, erecting, moving, reconstructing, altering or displaying of any sign within the city. All signs shall be maintained in good repair, including display surfaces and structures which shall be kept neatly painted, pasted, or mounted.
- \_\_\_\_\_ 7) All building exteriors shall be painted in compliance with the color chart adopted by the Redevelopment Agency of the City of San Fernando.
- \_\_\_\_\_ 8) All uses permitted shall be inside permanent buildings.
- \_\_\_\_\_ 9) All storage must be confined to the interior of the permanent structure.
- \_\_\_\_\_ 10) The owners and all successors shall comply with the graffiti removal and deterrence requirements.

**ADDITIONAL CONDITIONS** *Please initial the following conditions*

- \_\_\_\_\_ 11) \_\_\_\_\_
- \_\_\_\_\_ 12) \_\_\_\_\_

**NOTES**

**SIGNATURES**

BUSINESS OWNER SIGNATURE	DATE
PLANNING DIVISION SIGNATURE	DATE