

ZONING CLEARANCE FOR BUSINESSES LICENSE APPLICATION

The Zoning Clearance is required for all new businesses and existing businesses that are relocating to a new location within Alameda. The purpose of this process is to certify that proposed business activities will be in compliance with the City’s land use and zoning regulations. Issuance of this Zoning Clearance by the Planning Division is required before the Finance Department can issue a Business License.

Business Street Address: _____

Applicant Information:

Name: _____ Home Address: _____

Business Name: _____ Phone Number: _____

Business Type:

Description of Activities:

- | | |
|---|-------|
| <input type="checkbox"/> Office | _____ |
| <input type="checkbox"/> Retail | _____ |
| <input type="checkbox"/> Industrial/Manufacturing | _____ |
| <input type="checkbox"/> Service | _____ |

Proposed hours of operation: _____ **Number of Employees:** _____

- | | | |
|---|----|-----|
| 1. Will the business be conducted within a home or apartment?
(If Yes, a Home Occupation Permit is required.) | No | Yes |
| 2. Will the business be an office use with street frontage on the ground floor?
(If Yes, a Use Permit may be required.) | No | Yes |
| 3. Will the business require any new or modified signs?
(If Yes, a Sign Permit is required.) | No | Yes |
| 4. Will the business require any exterior changes to the building?
(If Yes, a Design Review is required.) | No | Yes |
| 5. Will the business require conversion of residential expansion of floor area within the building?
(If Yes, additional parking spaces may be required.) | No | Yes |
| 6. Will any aspect of the business be conducted outdoors, including sales, storage, services, or seating?
(If Yes, a Use Permit is required.) | No | Yes |
| 7. Will the business activity involve manufacturing and/or the use of hazardous materials?
(If Yes, a Use Permit is required.) | No | Yes |
| 8. Will the business involve body work, e.g. massage, nails, hair dresser, etc.?
(If Yes, a City Massage License and/or Use Permit may be required.) | No | Yes |

To be completed by city staff below this line:

Zoning District: _____

General Plan Designation: _____

- Business is in compliance with zoning
 - Meets zoning requirements
 - Business located outside of city limits, but business activities are conducted in the City of Alameda.
- Home Occupation Permit required at this location
 - Approved Home Occupation Permit No: _____ Date: _____
- Use Permit required for the business at this location
 - Approved Use Permit No: _____ Date: _____
- Business is **not** in compliance with zoning

Planner

Date

Staff Notes: