

DEVELOPMENT REVIEW PROCESS PRELIMINARY APPLICATION

NO FEE

City of Union City
Community Development Department
34009 Alvarado-Niles Rd.
Union City, CA 94587
(510) 675-5319

PRE Application No. _____

DRC Meeting Date: _____

(For Departmental Use Only)

Applicant:

Name: _____ Telephone: _____

Address: _____

Recorded Owner of Property:

Name: _____ Telephone: _____

Address: _____

Address and Assessor's Parcel Number of Subject Property:

Existing Use of Property: _____

Zoning: _____ **Size of Site/Lot:** _____ **Any Easements?:** _____

Fully Describe the Proposed Project and/or Use in Clear and Concise Language: _____

I HEREBY CERTIFY that all of the information contained in this preliminary application is, to my knowledge, true and correctly represented.

Signature of Property Owner/Agent

Signature of Applicant/Representative