



Application for Zoning/Planning/Subdivision Action

Type of Application – Please Check

- General Plan Amendment
- Prezoning
- Rezoning
- Master Plan
- Precise Development Plan
- Tree Permit
- Subdivision Tentative Map (5 or more lots)
- Land Division Tentative Map (4 or fewer lots)
- Lot Line Adjustment (no new lots)
- Design Review
- Use Permit
- Variance
- Accessory Dwelling Unit
- Sign Review
- Certificate of Compliance
- Other **Wireless mod**

Applicant Required Information

1. Assessor's Parcel No(s): 125-202-02 Existing Zoning: Wireless
2. Property Address: 7655 Redwood Blvd., #7665, Novato, CA 94945
3. Property Owner
 - a) Name: T-Mobile Phone: _____
 - b) Address: 1200 Concord Ave., Suite 500, Concord, CA 94520
 - c) Email address: Ann.Ji29@T-Mobile.com
4. Applicant (If Different than Owner)
 - a) Name: The CBR Group Phone: _____
 - b) Address: 2840 Howe Rd., Suite E, Martinez, CA 94553
 - c) Email address: S.Wilson@theCBRgroup.com
5. Name of Project (If Applicable): SF209 7655-7665 Redwood B
6. Property Size: Bldg Sqft: 24,816
7. Type of Use Proposed (Office, Residential, Etc.): Wireless
8. Square Footage of Each Use or Number of Units if Residential: _____
9. Purpose of Application (Brief Statement of What You Want to Accomplish):
Modifications to an existing wireless facility.

10. Signature *A. Jye* (Attach Separate Sheets If Needed)

Owner Applicant (Note: If applicant signs, an authorization signed by the owner must be attached.)

Important: Please complete Agreement for Payment of Full Cost Recovery Fees for Application Processing.

Note: Information sheets describing the review process and the additional information required for a specific type of application are available at the Novato Department of Community Development, 922 Machin Avenue, (415) 899-8989, www.novato.org

Do Not Write Below This Line

DEPARTMENTAL INFORMATION

Application Number(s): _____

Received by: _____ Date: _____ Planning Fee Deposit: \$ _____

Deemed Complete by: _____ Date: _____ Plan Storage \$ _____

Application Acted On By: _____ Date: _____ PW/Engineering Fee No Yes: \$ _____

Receipt # _____

Date _____

C.R.# _____ Initials _____

Action: _____