

# CITY OF MILPITAS

455 E. CALAVERAS BLVD.  
MILPITAS, CA 95035  
408-586-3240

[www.ci.milpitas.ca.gov](http://www.ci.milpitas.ca.gov)



## PRE-SUBMITTAL & INFORMATION PROJECT MEETING

Dear applicant, please provide the information requested below. Provide Company name, address, contact information, scope of project and other relevant information that discloses the proposed project. The objective is to disclose and provide as much information as possible in reference to the proposed scope of work so that the City, in return, can provide detailed information on construction permit application process.

### APPLICANT INFORMATION

DATE:

Company Name (applicant):			
Address (applicant):			
Phone No.:		Fax No.:	
Contact Person:		Contact Person:	
Office Ph. No.:		Office Ph. No.:	
Cell Ph. No.:		Cell Ph. No.:	
E-mail:		E-Mail:	
Fax No.:		Fax No.:	

### PROPOSED PROJECT LOCATION

Company Name (Project):	
Address (Project):	

### PROJECT INFORMATION (please check all applicable items)

<b>Existing Use of Building</b> <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Assembly <input type="checkbox"/> Other	<b>Proposed Use of Building</b> <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Assembly <input type="checkbox"/> Other
<b>Proposed Site Modifications</b> <input type="checkbox"/> Hardscape re-do or modify <input type="checkbox"/> Landscape re-do or modify <input type="checkbox"/> Other	<b>Proposed Demolition</b> <input type="checkbox"/> Exterior <input type="checkbox"/> Interior <input type="checkbox"/> Other
<b>Proposed Building Changes</b> <input type="checkbox"/> Addition <input type="checkbox"/> Exterior Service Yard (new or modify) <input type="checkbox"/> Tenant Improvements (interior only) <input type="checkbox"/> Other (disclose below) <input type="checkbox"/> Other	<b>Proposed new Occupancies (major use)</b> <input type="checkbox"/> Office <input type="checkbox"/> Fabrication (assembly lines, etc) <input type="checkbox"/> Assembly (restaurant, church, etc) <input type="checkbox"/> Hazardous (H Occupancies) <input type="checkbox"/> Other
<b>Provide other information, if needed, that will better describe the proposed work:</b> <hr/> <hr/>	

Continue next page.

**DATE:**

**PRE-SUBMITTAL & INFO. PROJECT MEETING**

**PLANNING DIVISION, Representative:**

<b>Planning Division Permit(s)</b> <input type="checkbox"/> No - Planning Permit Required <input type="checkbox"/> Yes - Planning Permit Required Type(s): _____ _____	<b>Planning Division Fees</b> <input type="checkbox"/> No Planning Fees <input type="checkbox"/> Applicable Planning Fees <input type="checkbox"/> Planning Application Process <input type="checkbox"/> Other Fee(s): _____ _____
---	--

**LAND DEVELOPMENT DIVISION, Representative:**

<b>Land Development Permit(s)</b> <input type="checkbox"/> No - Engineering Permit Required <input type="checkbox"/> Yes - Engineering Permit Required Type(s): <input type="checkbox"/> Encroachment <input type="checkbox"/> Other: _____ _____	<b>Land Development Fees</b> <input type="checkbox"/> No Engineering Fees <input type="checkbox"/> Applicable Engineering Fees <input type="checkbox"/> Encroachment permit <input type="checkbox"/> Utilities <input type="checkbox"/> Other Fee(s): _____ _____
--	--

**FIRE PREVENTION DIVISION, Representative:**

<b>Fire Prevention Division Permit</b> <input type="checkbox"/> No – Fire Permit Required <input type="checkbox"/> Yes – Fire Permit(s) Required, Type(s): <input type="checkbox"/> Certificate of Occupancy <input type="checkbox"/> Life/Safety and/or Haz Mat <input type="checkbox"/> Sprinkler and/or Alarm <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____ _____	<b>Fire Prevention Division Fees</b> <input type="checkbox"/> No Fire Fees Applicable <input type="checkbox"/> Applicable Fire Dept. Fees, Type(s): <input type="checkbox"/> Certificate of Occupancy <input type="checkbox"/> Life/Safety and/or Haz Mat permit <input type="checkbox"/> Sprinkler and/or Alarm Permit <input type="checkbox"/> Annual <input type="checkbox"/> Other Fee(s): _____ _____
---	---

**BUILDING & SAFETY DIVISION, Representative:**

<b>Building &amp; Safety Division Permit</b> <input type="checkbox"/> No – Building Permit Required <input type="checkbox"/> Yes – Building Permit(s) Required <input type="checkbox"/> Certificate of Occupancy <input type="checkbox"/> Construction Permits (Building, Plumbing, Mechanical, Electrical) <input type="checkbox"/> Other: _____ _____	<b>Building &amp; Safety Division Fees</b> <input type="checkbox"/> No Building Division Fees <input type="checkbox"/> Applicable Building Fees <input type="checkbox"/> Certificate of Occupancy <input type="checkbox"/> Construction Permits (Building, Plumbing, Mechanical Electrical) <input type="checkbox"/> Other Fee(s): _____ _____
--	---

**City Other Information:**

_____ _____ _____ _____
----------------------------------