

MUST APPLY IN PERSON

FEE: \$115.50 (Fee effective September 24, 2018)



ZONE CLEARANCE APPLICATION

Please Type Or Fill Out Legibly In Ink By Pressing Firmly. We Cannot Consider This Application, Unless All Information Is Provided And All Questions Are Answered. This Form Must Be Accompanied With A Business Tax Certificate Application.

APPLICANT INFORMATION

Applicant Name _____ Owner Employee Agent Other _____
Applicant Mailing Address _____ Phone Number () _____
Applicant Email _____

BUSINESS INFORMATION

Business Name _____ Phone Number () _____
Business Address _____ Suite# _____
Describe business operation in detail _____
Total number of employees? _____ Is there more than one business operating out of one suite/office? Yes No
Will your business require outside storage? Yes No If yes, explain _____

BUILDING INFORMATION

Business Type (Check One) Commercial Industrial Office Other _____
Type of Building (Check One) Single Tenant Multi Tenant Other _____
What is the square footage of the building and/or your lease area? _____ s.f.
Previous use of this building(s) _____ Date business closed _____
Have any of the following items been, or plan to be done, prior to the anticipated opening date of your business:
Have any City building permits been applied for? Yes No
If yes, list _____
Will any partitions be added, moved or removed? Yes No
Will there be any exterior additions, demolitions, or alterations? Yes No
Will any electrical systems be added, altered, deleted, or moved? (i.e. outlets, lights, switches, etc.) Yes No
Will any plumbing systems be added, altered, deleted or moved? (i.e. water, gas, sewer, fixtures, etc.) Yes No
Will any mechanical systems be added, altered, deleted or moved? (i.e. heating, air conditioning, fans, etc.) Yes No
Permits are required for all alterations to buildings, except movable, cases, counters and partitions not over 5'9" high. Interior painting, papering and similar finish work do not require permits. Additional information in the form of a letter or plan review may be required to more clearly define the operation of your business.

HAZARDOUS MATERIAL INFORMATION

If your business will handle, store, or generate hazardous materials/wastes you will need a Unified Program Facility Permit from the City of Oxnard, Fire/Certified Unified Program Agency (CUPA). A hazardous material/waste is any material that, because of its quantity, concentration, physical, or chemical characteristics, poses a significant present or potential hazard to human health or the environment. If a vendor has supplied a Material Safety Data Sheet (MSDS) for material, it is probably a hazardous material. Consider a material to be hazardous if it is flammable, combustible, corrosive, toxic, but are not limited to fuels (including gasoline), motor oil (new or used), propane, acetylene, oxygen, carbon dioxide, dry cleaning chemicals, paints, lead-acid batteries, fertilizers or pesticides. Call the City of Oxnard/Fire at (805)385-7722
Does your business handle, store, or use any of the above classifications? Yes No

ADDITIONAL PERMITS

Approval of this permit does not eliminate the need for other permits, licenses, or certificates required (i.e. Health Permit, Hazardous Material Permit, Occupancy Permit, Tenant Improvement Permit, Temporary Use Permit (special event), Special Use Permit, Sign Permit, etc).
No outdoor business activity, storage or displays are permitted unless approved through a Special Use Permit or Temporary Use Permit. Banners, pennants, flags, and any other outdoor promotional displays are only permitted through a Temporary Use Permit. If you have any questions or wish to inquiry on any of the permits mentioned above, please contact the Planning Division at (805) 385-7858.

APPLICANT STATEMENT

I hereby certify under penalty of perjury that I have read and understand all of the sections above and that the information provided on this form is true and correct to the best of my knowledge. I also state that I have read and familiarized myself with the portions of the Oxnard Zoning Regulations which apply to my business in this location. I agree to comply with these regulations and any other local, state, and federal regulations that may relate to this proposed business.
Applicant's Signature _____ Date _____

OFFICE USE ONLY

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Planning Review _____ Date _____ Zone _____ Rel. Pmt. _____
Dev Svs. Review _____ Date _____ Inspection Required Yes No
Dev Svs. Approval _____ Date _____ C/O Permit # _____
Planning Approval _____ Date _____ Zone Clearance No. _____
Conditions / Remarks _____

APPLICANT COPY · BUSINESS LICENSING COPY · CUPA/FIRE ADMIN · PLANNING COPY