



APPLICATION FOR REASONABLE ACCOMMODATION

City of San Mateo Planning Division
330 West 20th Avenue
San Mateo, CA 94403
(650) 522-7212

Community Development Department
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planning@cityofsanmateo.org
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Under Chapter 27.70 of the San Mateo Municipal Code, it is the City of San Mateo's policy to provide persons with disabilities reasonable accommodations in regulations and procedures to ensure equal access to housing, and to facilitate the development of housing for persons with disabilities. The purpose of this application form is to commence the process for making a request for reasonable accommodation.

I. Applicant Information:

Name: _____
Mailing Address: _____

Daytime Phone: _____
Fax Number: _____
Email Address: _____

Property Owner(s) Information:

Name: _____
Mailing Address: _____

Daytime Phone: _____
Fax Number: _____
Email Address: _____

Applicant's Relationship to Person(s) with Disability:

Please provide the above information for each additional property owner or applicant, if applicable, on a separate sheet of paper.

II. Project and Property Information:

Site Address(s): _____
Assessor Parcel Number(s): _____ Zoning: _____
Brief Project Description: _____

Current Use of Property Description:

Are any other alterations proposed to the property that will require the filing of a Planning Application in conjunction with the reasonable accommodation request (e.g., second-story addition, replacement of single-family residence, etc.)?

A. Yes

B. No

A. If 'yes' selected above, please select the appropriate Planning Application below, and the reasonable accommodation request will be submitted, reviewed, and noticed with the related Planning Application(s).

SFDDR

SPAR

SUP (for residential care facility)

B. If 'no' selected above, please move on to the submittal requirements on the second half of this sheet.

Planning Application # (if available): _____

Please describe the other alterations proposed **outside** of the reasonable accommodation request (a separate Planning Application will be required):

iv. Reasonable Accommodation Submittal Requirements

- Completed application form signed by the property owner
- Verification of property ownership, such as a copy of a current grant deed that includes a full property description, including any easements, build-to-lines, etc. In some cases, a current title report will be required (Note: current means within one year of application date)
- Plans showing details of the proposal (Full-size 24" x 36", scalable plans)
- Other relevant information as requested by the Zoning Administrator (e.g., arborist report, geotechnical report, etc.)
- Medical Certification of Disability (e.g., letter from physician. Note: it is not required that the name or extent of the disability be identified for the individual seeking the reasonable accommodation)
- Photos of the property & buildings
- Proof of income (if applicable, see page 5)
- Power of Attorney (if applicable, see page 3)

III. Property Owner Authorization

I certify that as the property owner, I authorize the filing of this application for reasonable accommodation. I understand that pursuant to the City of San Mateo Municipal Code, conditions of project approval are binding upon both the applicant and the property owner(s). I agree to implement the conditions to the best of my ability subject only to the right to object at public hearing on this application.

Property Owner's Statement

I hereby certify that I am the owner of record of the property described in the above Project and Property Information and that I approve of the requested action herein.

Property Owner's Signature

Date

Property Owner's Signature

Date

I certify that I am designated by the partnership, corporation, or other entity which is the property owners, to authorize the filing of this application for reasonable accommodation and submit, herewith, Power of Attorney, or other evidence of my designation. I understand that pursuant to the City of San Mateo Municipal Code, conditions of project approval are binding upon both the applicant and the property owner(s). I agree to implement the conditions to the best of my ability subject only to the right to object at public hearing on this application.

Agent's Signature

Date

Request for Accommodation:

Please be brief.

1. Specify nature of the reasonable accommodation request, and cite zoning code section from which a reasonable accommodation is requested:

2. Explanation of why the reasonable accommodation is necessary to make the specific housing accessible to the person(s) with disabilities:

3. List any potential impacts on the surrounding properties if the reasonable accommodation request were granted:

4. Please describe any uses existing on the premises (e.g., community care facility, home occupation, etc):

Technical Report Assistance:

Request financial assistance for the preparation of any required Technical Reports¹ (must be low income household)²:

Yes

No

If 'yes' selected above, please attach proof of income with application

¹ Technical reports would include any required arborist report, geotechnical report, etc.

² For low income households (as defined in Health and Safety Code Section 50079.5), the City will fund the cost of any required technical reports so long as doing so would not constitute an "undue financial burden"