



BUSINESS CLEARANCE

SAN LUIS OBISPO COUNTY DEPARTMENT OF PLANNING AND BUILDING
976 OSOS STREET ♦ ROOM 200 ♦ SAN LUIS OBISPO ♦ CALIFORNIA 93408 ♦ (805) 781-5600

Promoting the Wise Use of Land ♦ Helping to Build Great Communities

Location of Business (Address): _____

Assessor's Parcel Number: _____

Applicant's Name: _____ Phone Number: _____

Applicant's Address: _____

Property Owner's Name*: _____ Phone Number: _____

Property Owner's Address: _____

*Must have property owner's consent in writing for Home Business

COMMERCIAL:

Your Proposed Business: _____

Your Business Name: _____

Previous Use (use being replaced): _____

Any tenant improvements proposed? No Yes If yes, your project will be subject to a construction permit and the state Title 24 accessibility regulations.

Is space located above ground floor? No Yes

NOTE: Even though you are not doing tenant improvements, our review of your business license does not warrant compliance to the Federal "Americans With Disabilities Act". According to this act, these standards should have been accomplished by July 1992 and we assume that the building structure within which you are located complies to those standards. For questions regarding these federal standards, we urge you to contact the "Architectural and Transportation Barriers Compliance Board" (ATBCB) hotline at 1-800-USA-ABLE.

Number of parking spaces reserved for this business _____

HOME BUSINESS:

Your Proposed Business: _____

Your Business Name: _____

Materials/equipment used: _____

How would products be distributed or service made available to customers: _____

How would products/materials be delivered to residence: _____

Are any chemicals/hazardous materials to be used: _____

I have completed this form accurately and declare that all statements herein are true.

Signature: _____ Date: _____