



CITY OF ANTIOCH
ADMINISTRATIVE USE PERMIT APPLICATION
INSTALLATION OF TEMPORARY
ENVIRONMENTAL REMEDIATION EQUIPMENT

PURPOSE:

An administrative use permit is required for the installation of temporary environmental remediation equipment (including, but not limited to electrical receptacles, vacuum pumps, compressors, filter vessels, etc.). Staff will review impacts associated with noise, lighting, and location.

PROCESS:

Processing of an administrative use permit application takes approximately 5 weeks. Please submit your application and all requirements (listed below).

SUBMITTAL should be made to:

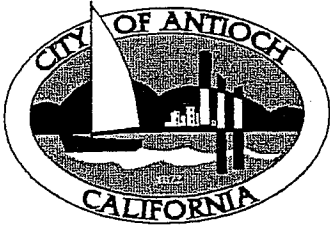
City of Antioch
Community Development Department
P.O. Box 5007
Third & "H" Streets
Antioch, CA 94531-5007

***Note: You may also need to apply for a separate permit from other agencies depending on the type of event. Please contact them directly for their requirements.*

Contra Costa County Fire Department	(925) 930-5500
Contra Costa County Environmental Health	(925) 692-2500
City of Antioch Building Department	(925) 779-7065

REQUIREMENTS:

- Three copies of a site plan showing the location of the equipment as well as any monitoring wells, boring locations, up-gradient wells, etc.
- Written description of the equipment to be installed (including dimensions), noise output of the system, hours of operation, length of time the equipment is expected to be on the property, and removal schedule.
- Written documentation from applicable state agency (i.e. Regional Water Quality, Air Quality, or DTSC) stating that the remediation unit(s) is necessary.
- Written property owner approval for the installation and operation of the equipment.
- \$56.00 processing fee.
- Completed application (attached).



DEVELOPMENT APPLICATION

Community Development Department

P.O. Box 5007

Third & "H" Streets

Antioch, CA 94531-5007

Phone: (925) 779-7035 Fax: (925) 779-7034

SITE LOCATION: _____

ASSESORS PARCEL NO. (S): _____ **TOTAL ACREAGE:** _____

BRIEF DESCRIPTION OF REQUEST: _____

PROPERTY OWNER OF RECORD

Name: _____

Company Name: _____

Address: _____

Telephone No. _____

Fax No. _____

Email: _____

Signature: _____

APPLICANT

Name: _____

Company Name: _____

Address: _____

Telephone No. _____

Fax No. _____

Email: _____

Signature: _____

ANY OTHER PERSON THAT YOU WOULD LIKE THE CITY OF ANTIOCH TO NOTIFY OF THE PUBLIC HEARING

Name: _____

Company Name: _____

Address: _____

Telephone No. _____

Fax No. _____

Email: _____

AGENT/DESIGNER

Name: _____

Company Name: _____

Address: _____

Telephone No. _____

Fax No. _____

Email: _____