

ALBANY CALIFORNIA

APPLICATION FORM Request for Driveway Red Curb Treatment

Please complete this application form, submit payment of application fee, and provide supporting documentation to initiate City review of your application.

Name: _____

Address: _____

Phone Number: _____ **Email:** _____

Briefly explain why you are requesting a red curb adjacent to your driveway. Provide any information that you consider relevant to your request, such as photos of the area in question.

I have reviewed the City of Albany Driveway Red Curb Policy including the criteria for review of driveway red curb requests.

If approved, the applicant will be required to pay for installation of the red curb per City Master Fee Schedule.

Requests to repaint existing red curbs should be made through a new application.

If you have questions, please contact the City Transportation Planner, (510) 528-5759.

FOR OFFICE USE ONLY



Request Approved: YES _____ NO _____ **Date:** _____

Applicant Notified of Decision **Date:** _____

Appeal Received: YES _____ NO _____ **Date:** _____

If Appealed:

Traffic & Safety Commission Notifications Sent **Date:** _____

Notice Posted at Property **Date:** _____

Request Approved: YES _____ NO _____ **Date:** _____

If Approved:

Installation Invoice Sent to Applicant **Date:** _____

Invoice Copy provided to Finance Department **Date:** _____

Installation Payment Received **Date:** _____

Public Works Work Order Submitted **Date:** _____

Approved Treatment:

Left Side Facing Driveway From Street:

YES _____ NO _____ **LENGTH:** _____ feet

Right Side Facing Driveway From Street:

YES _____ NO _____ **LENGTH:** _____ feet