

FORM

**DS-710** 

# **Building Demolition/Removal Questionnaire**

This questionnaire shall be used when applying for a Building Demolition/Removal Permit, including the decommissioning of a Wireless Communication Facility.

October 2024 Buildings and structures that have been legally permitted, constructed and passed final inspection are eligible to utilize this application. The types of work that are eligible are defined in <u>Information Bulletin 710</u>, "<u>Building</u> <u>Demolition/Removal.</u>"

### **General Project Information**

Project Address/Location (Include building or suite no.)						
Legal Description (Lot, block, subdivision name & map number				Assessor's Parcel Number (APN)		
Lot Area (Square feet or acres) Building Area (Square feet		quare feet)		Depth of Pool (Feet)		
Existing Use (Check all that apply)						
□ Single Dwelling Unit □ Duplex	🗆 Townhouse	🗆 Apartme	nt/Condo	lo 🛛 Commercial/Non-Residential		
Addresses and/or Designations (If different from above)			Square F	ootage	No. of Dwelling Units	

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Pro	oject Description
1.	Removal of Structure Does the structure to be demolished have a separate electrical/gas meter?  Yes No
	Is the building being removed and relocated to a new site? $\Box$ Yes $\Box$ No, proceed to #2
	<ul> <li>A. Check One:</li> <li>This is a temporary site.</li> <li>This is a permanent site located outside the City of San Diego.</li> <li>This is a permanent site located within the City of San Diego. See project number for the associated building permit for the structure's relocation to the new permanent site.</li> </ul>
	<b>B. New Site Information</b> Address/Location:
	Legal description (i.e., Lot, block, subdivision name and map number):
2.	Multiple Dwelling Unit Structure The project includes the demolition/removal of a structure containing more than four (4) dwelling units. <b>Yes No</b> , proceed to #3
	Each tenant who may be affected by the proposed project has been notified of the owner's intent to apply for a Demolition/Removal Permit per SDMC <u>§129.0504</u> .
3.	Housing Commission Depending on whether a unit (e.g., dwelling units, ADUs) is deemed protected, unit replacement and tenant benefits may be required by state and local law per the Dwelling Unit Protections Regulations under SDMC <u>\$143.1201</u> , the Complete Communities Housing Solutions Regulations under SDMC <u>\$143.1005</u> , and/or the Coastal Overlay Zone Affordable Housing Replacement Regulations under SDMC <u>\$143.0810</u> .
	<ul> <li>A. Will two or more residential units be demolished, altered, or converted from rental units to condominium units?</li> <li>□ Yes □ No</li> </ul>
	<ul> <li>B. Have any units been rented at any time during the last five years?</li> <li>   ☐ Yes   <ul> <li>□ Yes</li> <li>□ No</li> </ul> </li> </ul>
	<ul> <li>C. Does the structure contain efficiency units as defined by the <u>California Health and Safety Code Section</u> <u>17958.1</u>, boarding units, guest rooms (hotel, motel, inn, extended stay), SRO units as defined by SDMC <u>\$113.0103</u>, or units with shared bathrooms and/or partial kitchens, or without kitchen facilities?</li> <li>□ Yes □ No</li> </ul>

### 4. Grading and Stormwater Regulations

- A. The project is located on a lot that is greater than one acre (43,560 square feet).
   □ Yes □ No
- B. The project includes an area of disturbance greater than one acre (43,560 square feet).
   □ Yes □ No
- C. The project<sup>2</sup> results in a slope of five (5) feet or greater and/or a fill exceeding five (5) feet in depth.  $\Box$  Yes  $\Box$  No

<sup>2</sup> Excludes demolition/removal of swimming pools.

# 5. Building and Dwelling Units Summary Required for all projects proposing demolition of 1 or more dwelling units.

- Populate the Demolition Summary Table for every building to be demolished.
- Use a separate row for each individual building.
- For buildings that do not contain dwelling units, use zero.
- For additional information regarding income Category Limits and Area Median Income (AMI), click here.

Example: Demolition Summary Table							
Building Address	Total Number of Bedrooms	Extremely Low Income 0% - 30% AMI	Very Low Income 30% - <b>5</b> 0% AMI	Low Income 50% - 80% AMI	Moderate Income 80% - 120% AMI	Above Moderate Income 120%+ AMI	Total Dwelling Units
Totals:	18	1	1	1	0	6	9
123 Main Street	4	1	0	0	0	1	2
125 Main Street	6	0	1	0	0	2	3
127 Main Street	8	0	0	1	0	3	4

Demolition Summary Table							
Building Address	Total Number of Bedrooms	Extremely Low Income 0% - 30% AMI	Very Low Income 30% - 50% AMI	Low Income 50% - 80% AMI	Moderate Income 80% - 120% AMI	Above Moderate Income 120%+ AMI	Total Dwelling Units
Totals:							

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## Applicant Information

### Applicant Name (check one)

Property Owners	□ Authorized Agent of Property Owner	□ Other Person per SDMC <u>§112.0102</u>
		(i.e. Develities Contractor)

(i.e., Demo	lition (	Contractor)
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Address	City	State
Telephone	Email	

Applicant's Signature: I certify that I have read and understand, as stated in Section II, Stormwater Requirements of Information Bulletin 710, that the City Engineer has adopted minimum requirements for managing urban runoff, including stormwater from land development activities. I certify that the required construction BMPs shall be implemented to minimize the potentially negative impacts of this project's construction and land development activities on water quality. I further agree to install, monitor, maintain, or revise the selected BMPs to ensure their effectiveness. I also understand that failure to implement proper BMPs may result in an escalated enforcement action by the City, including civil penalties, criminal prosecution, civil litigation, and recording the violation with the County Recorder. Furthermore, once the demolition permit has passed final inspection, I shall continue to be responsible for maintaining all BMPs until such time as the property is permitted for redevelopment.

I certify that I have read this application and state that the information above is correct and that I am the owner or authorized agent of the owner. I understand that the project will be distributed/reviewed based on the information provided, which is accurate to the best of my knowledge.

Signature	Date:	