City and County of San Francisco
DEPARTMENT OF PUBLIC HEALTH
POPULATION HEALTH AND PREVENTION
OCCUPATIONAL & ENVIRONMENTAL HEALTH

Gavin Newsom., Mayor
Mitchell Katz, M.D.
Director of Health
Rajiv Bhatia, M.D., M.P.H.
Director of O&E Health

MAHER ORDINANCE APPLICATION

A. Site Name:_____

Site Address:_____ Assessor's Parcel Number:_____

_____ Zip Code:_____

B. Project Sponsor:_____

Mailing Address:_____

_____ Zip Code:_____

Contact person:_____ Telephone: ( )_____

Invoices will be sent to this address unless other arrangements are made.

C. Application Submitted by:_____

Contact Person:_____ Telephone: ( )_____

Company Name:_____

Mailing Address:_____ Zip Code:_____

D. Brief Project Description:_____

_____

_____

E. List Document(s) submitted:_____

_____

_____

For Office Use Only Below This Line

Date Rec'd:_____ Date Data Entered:_____ Check No.:_____

Rec'd By:_____ Entered By:_____ Check Amt:_____

Initial Filing Fee: $ 498.00

SMED SITE#:_____