Priority Development Area Application

Use this form to express jurisdictional interest in: a) establishing a <u>new PDA;</u> or b) <u>modifying</u> the boundaries of <u>an existing PDA.</u>

Instructions: Complete this form and send it to pdas@bayareametro.gov along with a GIS shapefile of the PDA boundaries, and any additional attachments, by July 31, 2023. Forms may be signed by planning directors or city managers/administrators. Following review of this form by MTC/ABAG staff and additional discussion with applicants if needed, City Council or Board of Supervisors resolutions nominating new PDAs will be required by September 30, 2023. Resolutions are not required to modify an existing PDA.

•	utions are not required to modify an existing PDA.				
	1: APPLICATION TYPE				
I want to:	□ Propose a new PDA □ Modify an existing PDA				
	2: PDA DESIGNATION				
•	ermine the designation for your PDA by reviewing this map. If the area esignate a PDA is not shown as eligible, complete Section 6.				
Step Two: Che	ck the appropriate box below:				
	☐ Transit-Rich ☐ Connected Community (Within High Resource Area ☐ Connected Community (Outside High Resource Area)* **Also complete VMT-Reduction Letter of Confirmation, available here				
3:	TRANSIT ORIENTED COMMUNITIES POLICY APPLICABILITY				
•	ermine if the area you would like to designate a PDA is t-Oriented Communities Policy Area by reviewing this map.				
Step Two: Che	ck any TOC Policy Areas that apply to the PDA Tier 1 □ Tier 2 □ Tier 3 □ Tier 4 □ N/A				
Step Three: Correction Policy	onfirm that you have reviewed and understand the requirements of the TOC I have reviewed and understand the TOC Policy				
	4: GENERAL PDA INFORMATION				
City or County	: Date:				
PDA Name:	Acres:				
Staff Contact/	Title:				
Email:	Phone:				

5: PLANNING STATUS								
		Ad	opted	In Progre	ess None*	*		
Level of	Specific Plan							
Planning Completed	Other* Plan							
	EIR							
for PDA:	Consistent Zo	oning						
*If "Other Plan" selected, please describe: **If "None" selected, indicate expected start and completion year:								
		6: 1	LAND US	SE				
Housing &		2022 or recer		Planned**	"Planned"	year		
Jobs	Dwelling Uni	ts* 						
	Jo	bs*						
*All figures can be estimates **Can be based upon buildout in most recently adopted plan, such as the "Project" analyzed in an EIR, or a staff estimate								
		DED - ADDITION						
If the majority of land in the PDA is <u>not shown as eligible</u> on the PDA designation map, please describe existing or planned transit service in the PDA that meets eligibility criteria:								
Mode		9	Status		Agency & Route	e/Station		
☐ Rail		Existing	□ Pl	anned				
☐ Ferry		Existing	□ Pl	anned				
☐ 15 minu	te bus 🗆	Existing	□ Pl	anned				
☐ 30 minu	te bus 🗆	Existing	□ Pl	anned				
Please attach a map, preferably a GIS shapefile, of the stop location(s) when submitting this form.								
		PTIONAL - PRI						
		•	•	•	ment site with the site(s) below:	ine capacity		
Name Current Us		Potential	•	ial Future	Approximate	Phase		
		Future DU	Commo	ercial SF	% Affordable			

Name & Title:	
Signature:	
Date:	