

Letter-of-Interest: Priority Development Area

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

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 **May 31, 2020**. Forms may be signed by planning directors or city managers/administrators. Resolutions from a City Council or Board of Supervisors are required for new PDAs, and must be adopted or agendized by May 31, 2020, with all agendized resolutions adopted by June 30, 2020.

1: APPLICATION TYPE

I want to: ☐ Propose a new PDA ☐ Modify an existing PDA

2: PDA DESIGNATION

Step One: Determine the **designation** for your PDA by reviewing [this map](#). If the area you wish to designate a PDA is not shown as **eligible**, complete Section 6.

Step Two: Check the appropriate box below:

- ☐ Transit-Rich ☐ Connected Community/High Resource Area
☐ Connected Community/Outside High Resource Area*

*Also complete VMT-Reduction Letter of Confirmation, available [here](#)

3: GENERAL PDA INFORMATION

City or County: _____ Date: _____

PDA Name: _____ Acres: _____

Staff Contact/Title: _____

Email: _____ Phone: _____

4: PLANNING STATUS

		Adopted	In Progress	None**
Level of Planning Completed for PDA:	Specific Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other* Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	EIR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Consistent Zoning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*If "Other Plan" selected, please describe:

**If "None" selected, indicate expected start and completion year: 2024 (completion)

5: LAND USE

		2017 or most recent	Planned**	"Planned" year
Housing & Jobs	Dwelling Units*			
	Jobs*			

*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

6: IF NEEDED - ADDITIONAL TRANSIT INFORMATION

If the majority of land in the PDA is not shown as eligible on the PDA designation map, please describe existing or planned transit service in the PDA that meets eligibility criteria:

Mode	Status	Agency & Route/Station
<input type="checkbox"/> Rail	<input type="checkbox"/> Existing <input type="checkbox"/> Planned	
<input type="checkbox"/> Ferry	<input type="checkbox"/> Existing <input type="checkbox"/> Planned	
<input type="checkbox"/> 15 minute bus	<input type="checkbox"/> Existing <input type="checkbox"/> Planned	
<input type="checkbox"/> 30 minute bus	<input type="checkbox"/> Existing <input type="checkbox"/> Planned	

Please attach a map, preferably a GIS shapefile, of the stop location(s) when submitting this form.

7: OPTIONAL - REGIONAL CATALYST SITES

If the PDA includes one or more planned or potential development site with the capacity to provide at least 1,000 new housing units, please describe the site(s) below:

Name	Current Use	Potential Future DU	Potential Future Commercial SF	Approximate % Affordable	Phase

Name & Title:

Signature:

U. S.

Date: