

CITY OF TURLOCK DEVELOPMENT SERVICES PLANNING DIVISION 156 SOUTH BROADWAY, SUITE 120 TURLOCK, CA 95380-5456 (209)668-5640

UNIFORM APPLICATION FORM

(PLEASE PRINT OR TYPE)

	PROJECT ADDRESS: 400 WACKINGTON PA
ıtion	PROJECT ADDRESS: 400 WACKINGTON RAC ASSESSOR'S PARCEL NUMBER: 089-00-023 AREA OF PROPERTY (ACRES OR SQUARE FEET):
Project Information	EXISTING ZONING: A RE RL RM RH CO CC CH CT (I) IBP PD Downtown
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ojec.	DESCRIBE THE PROJECT REQUEST: Construction Staging (Stoing materials
P'	DESCRIBE THE PROJECT REQUEST: Construction Stagny (Stoing materials Fabrication, etc
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	NOTE: Information provided on this application is considered public record
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Applicant Information	
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App	
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	PROPERTY OWNER.
Owner Into	PROPERTY OWNER. E-MAIL:
ner	ADDRESS OF PROPERTY OWNER:
	Consent of Owner: I declare that I am the owner of the herein described property and that I have familiarized myself with this completed application and give consent to the action requested.
erty	AND THE PROPERTY OF THE PROPER
L L	SIGNATURE OF PROPERTY OWNER PRINT NAME DATE
<u></u>	
***************************************	APPLICATION TYPE & NO.: MAA 17-6 DATE RECEIVED: (0/28/17
	CASHOR CHECKED BY: DW
Se	PC HEARING DATE: CC HEARING DATE:
اد	PLANNER'S NOTES:
5	
1	

PLEASE NOTE:

THIS APPLICATION FORM

(ALONG WITH THE REQUIRED

ATTACHMENTS AND EXHIBITS)

IS MADE AVAILABLE TO THE PUBLIC

ON THE CITY'S WEBSITE AND IN THE CITY'S FILES.

IF THERE IS
SENSITIVE INFORMATION CONTAINED WITHIN THE
APPLICATION, PLEASE CONTACT THE
PLANNING DIVISION AT (209) 668-5640
BEFORE SUBMITTING
THE APPLICATION.

APPLICATION QUESTIONNAIRE

This document will assist the Planning Department in evaluating the proposed project and its potential environmental impacts. Complete and accurate information will facilitate the review of your project and minimize future requests for information. Please contact the Planning Division, 156 S. Broadway, Suite 120, Turlock, CA 95380 (209) 668-5640 if there are any questions about how to fill out this form.

PROJECT NAME: 2-8646					
APPLICANT'S STATEMENT OF INTENT (DESCRIBE THE PROPOSED PROJECT): Lonstruction staging (Storing materials, Fabrication, et c.					
CHAIN LINK FENCE WITH BARBED WIRE					
PROPERTY OWNER'S NAME: NAME: NAME:					
Mailing Address:					
Telephone: Business (Home (
E-Mail Address:					

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LAND USE DESIG	NATIONS:	
ZONING:	Current:	
	Proposed (If applicable):	
GENERAL PLAN	Current:	
	Proposed (If applicable)	
DESCRIBE ADJA SITE:	CENT ZONING AND EXIST	FING LAND USE WITHIN 300 FEET OF PROJECT
ZONE - EX	ISTING LAND USE (i.e., res	idential, commercial, industrial)
North		
East		
	Sit	ect, including information on topography, soil stability, cenic aspects (if applicable)
If yes to abov	oushes or shrubs on the project re, please attach site plan indicate at are proposed for removal.	site? No If yes, are any to be removed?ating location, size and type of all trees, bushes and shrubs
	ge waterbody or ground water but If yes, please explain:	quality or quantity, or alter existing drainage
	,	

following information: Present Use of Existing Structure(s) Proposed Use of Existing Structure(s) Are any structures to be moved or demolished? ND If yes, indicate on site plan which structures are proposed to be moved or demolished. Is the property currently under a Williamson Act Contract? _____ If yes, contract number: _____ If yes, has a Notice of Nonrenewal been filed? Notice of Nonrenewal been filed? Are there any agriculture, conservation, open space or similar easements affecting the use of the project site? \wedge° If yes, please describe and provide a copy of the recorded easement. Describe age, condition, size, and architectural style of all existing on-site structures (include photos): **Proposed Building Characteristics** Size of any new structure(s) or building addition(s) in gross sq. ft. Building height in feet (measured from ground to highest point): Height of other appurtenances, excluding buildings, measured from ground to highest point (i.e. antennas, mechanical equipment, light poles, etc.): Building Coverage: Sq.Ft. % Project site coverage: Landscaped Area: Sq.Ft. % Paved Surface Area: Sq.Ft. % Total:______Sq.Ft._____100% Exterior building materials: Exterior building colors:

If there are structures on the project site, attach site plan indicating location of structures and provide the

Roof materials:						
Total number of off-street parking spaces provided: (If not on the project site, attach a Signed Lease Agreement or Letter of Agency)						
Describe the type o	f exterior lighting pro	posed for the project (height, intensity):			
Building:	Building:					
If the proposal is a	Estimated Construction Starting DateEstimated Completion Date If the proposal is a component of an overall larger project describe the phases and show them on the site plan:					
		Residential Projection (As applicable to pro	pposal)			
Total Lots	Total Dwelling	UnitsTota	l Acreage			
Net Density/Acre_		Gross Density/A	Acre			
Will the project include affordable or senior housing provisions? If yes, please describe:						
	Single Family	Two-Family (Duplex)	Multi-Family (Apartments)	Multi-Family (Condominiums)		
Number of Units						
Acreage						
Square Feet/Unit						
For Sale or Rent						
Price Range						
Type of Unit:						
Studio						
1 Bedroom						
2 Bedroom	and the second s	A CONTROL OF STANCE OF STA				
3 Bedroom						
4+Bedroom						

Commercial, Industrial, Manufacturing, or Other Project (As applicable to proposal)

Type of use(s)
Expected influence: Regional Citywide Neighborhood
Days and hours of operation:
Total occupancy/capacity of building(s):
Total number of fixed seats:Total number of employees:
Anticipated number of employees per shift:
Square footage of:
Office area Warehouse area
Sales area Storage area
Loading area Manufacturing area
Total number of visitors/customers on site at any one time:
Other occupants (If Applicable)
Will the proposed use involve any toxic or hazardous materials or waste?
(Please explain):
List any permits or approvals required for the project by state or federal agencies:

 $\frac{PROJECT\ IMPACTS}{\text{(Please compute each specific impact issue per the following criteria)}}$

TRAFFIC

Land Use	Weekday Trip End Generation Rates (100%Occ.)			
Single Family	10.0 trips/dwelling unit			
Patio Homes/Townhomes	7.9 trips/dwelling unit			
Condominiums	5.1 trips/dwelling unit			
Apartments	6.0 trips/dwelling unit			
Mobile Homes	5.4 trips/dwelling unit			
Retirement Communities	3.3 trips/dwelling unit			
Motel/Hotel	11 trips/room			
Fast-Food Restaurant	553.0 trips/1,000 s.f. bldg. area			
Retail Commercial	51.3 trips/1,000 s.f. bldg. area			
Shopping Center	115 trips/1,000 s.f. bldg. area			
Sit-Down Restaurant	56 trips/1,000 s.f. bldg. area			
General Office	12.3 trips/1,000 s.f. bldg. area			
Medical Office	75 trips/1,000 s.f. bldg. area			
Institutions (Schools/Churches)	1.02 trips/student or 18.4 trips/1,000 s.f. bldg. area			
Industrial Plant <500,000 s.f.	7.3 trips/1,000 s.f. bldg. area or 3.8 emp.			
Industrial Warehouse	5.0 trips/1,000 s.f. bldg. area or 4.2 emp.			
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Projected Vehicle Trips/Day (using table above	re):			
Projected number of truck deliveries/loadings	per day: NA			
	N/L			
Approximate hours of truck deliveries/loading	s each day: // //			
What are the nearest major streets? N				
Distance from project? /U/A				
Amount of off atreat parking provided. N/A				
Amount of off-street parking provided:				
If new paved surfaces are involved, describe them and give amount of square feet involved:				
NIA				

<u>WATER</u>

Land Use Single-Family Residential Multi-Family Residential Offices Retail Commercial Service Commercial/Industrial	Estimated Water Consumption Rates (gal/day) 800 gallons/day 800/3 bd unit; 533/2 bd unit; 267/1 bd unit 100 gallons/day/1,000 s.f. floor area 100 gallons/day/1,000 s.f. floor area Variable-[Please describe the water requirements for any service commercial or industrial uses in your project.]		
Estimated gallons per day (using information	above):		
Source of Water:			
<u>SEWAGE</u>			
Land Use Single-Family Residential Multi-Family Residential Commercial Office Industrial	Estimated Sewage Generation Rates (gal/day) 300 gallons/day/unit 200 gallons/day/unit or 100 gallons/day/resident 100 gallons/day/1,000 s.f. floor area 100 gallons/day/1,000 s.f. floor area Variable-[Please describe the sewage requirements for any industrial uses in your project.] (General projection = 2,500 gallons/day/acre)		
Estimate the amount (gallons/day) sewage to l			
Describe the type of sewage to be generated:_			
Will any special or unique sewage wastes be g	generated by this development?		

SOLID WASTE

Land Use Single-Family Residential Multi-Family Residential Commercial Industrial	Estimated Solid Waste Generation (lb/day) 10.96 lbs./day/res. 7.37 lbs./day/unit 50 lbs./500 s.f. floor area Variable-[Please describe the projected solid waste to be generated by your project.]
Type:	Amount:
AIR QUALITY	
Construction Schedule:	
Activity	Approximate Dates
Demolition	·
Trenching	
Grading	Address designation of the contract of the con
Paving	
Building Construction	
Architectural Coatings (includes painting)	·
Total Volume of all Building(s) to be Demo Max Daily Volume of Building(s) to be Den	lished nolished
Total Acreage to be Graded	
Amount of Soil to Import/Export?	

HAZARDOUS WASTE AND SUBSTANCE SITES LIST DISCLOSURE PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 65962.5(f)

"(f) Before a lead agency accepts as complete an application for any development project which will be used by any person, the applicant shall consult the lists sent to the appropriate city or county and shall submit a signed statement to the local agency indicating whether the project and any alternatives are located on a site that is included on any of the lists compiled pursuant to this section and shall specify any list. If the site is included on a list, and the list is not specified on the statement, the lead agency shall notify the applicant pursuant to Section 65943..."

Note: You must contact Stanislaus County Environmental Resources at (209) 525-6700; <u>AND</u> either:

1) Contact the Department of Toxic Substances Control at (800) 728-6942; or 2) research the property on <u>all</u> of the following online databases:

EPA RCRA: https://www3.epa.gov/enviro/facts/rcrainfo/search.html
NEPAssist: http://www.epa.gov/compliance/nepa/nepassist-mapping.html

California DTSC Envirostor: www.envirostor.dtsc.ca.gov/public California Geotracker: http://geotracker.waterboards.ca.gov/

to determine whether there are any known or potential hazards on the property.

I HEREBY CERTIFY THAT:

THE PROJECT IS LOCATED ON A SITE WHICH IS INCLUDED ON ONE OR MORE OF	THE
LISTS COMPILED PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 65962.5(f).	ГНЕ
SITE IS INCLUDED ON THE FOLLOWING LIST(S) SPECIFIED BELOW:	
Regulatory ID Number:	
Regulatory ID Number:	
Regulatory ID Number:	
OR	
THE PROJECT <i>IS NOT LOCATED</i> ON A SITE WHICH IS INCLUDED ON ONE OR MORE THE LISTS COMPILED PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 65962.5(f).	OF
I HEREBY CERTIFY THAT THE STATEMENT FURNISHED ABOVE PRESENTS THE INFORMAT	ION

I HEREBY CERTIFY THAT THE STATEMENT FURNISHED ABOVE PRESENTS THE INFORMATION REQUIRED BY CALIFORNIA GOVERNMENT CODE 65962.5(f) TO THE BEST OF MY ABILITY AND THAT THE STATEMENT AND INFORMATION PRESENTED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

PROPERTY OWNER/APPLICANT SIGNATURE:

I hereby certify that the facts, statements, and information presented within this application form are true and correct to the best of my knowledge and belief. I hereby understand and certify that any misrepresentation or omissions of any information required in this application form may result in my application being delayed or not approved by the City. I hereby certify that I have read and fully understand all the information required in this application form including:

- 1. the Hazardous Waste and Substance Sites List Disclosure Pursuant to California Government Code Section 65962.5(f) on page 22;
- 2. the Acknowledgments/Authorizations/Waivers starting on page 24; and
- 3. the Indemnification on page 26; and
- 4. the Department of Fish and Game CEQA Review Filing Fees on page 27.

Property Owner(s): (Attach additional sheets. as necessary)			
Signature of Property Owner	Date		
Print Name and Title of Property Owner	Phone Number		

Applicant(s): (If different than above)

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TO: City of Turlock Development Services Department

APPLICANT:	PGÉ			
PROJECT NAMI	R-864(3		
The undersigned does site. The sign has bee Planning Division.	s hereby declare that the s n posted in conformance	sign (shown in the with the Turlock	e attached photograph) Municipal Code as ins	has been posted on the tructed by the Turlock
I do further agree to i of Turlock, its officer sign on the property.	ndemnify, defend all law s and employees, free an	suits, including r d harmless for an	easonable attorney's fe y and all liability that r	es, save and hold the City may arise from posting the
20000	CERTIFIC	ATION OF P	OSTING	
	NOTICE OF PLAN			
for applica				
on the subject 1	property located at:			Turlock, CA
at _	AM / PM	on	Date	
I de	clare under penalty of pe	rjury that the fore	going is true and corre	et.
Exc	ecuted this	day of	, 200	- ·
APPLICANT'S SIG			APPLICANT'S PR	INTED NAME
Attachment: Photo o	f project sign			

PUBLIC NOTIFICATION REQUIREMENTS

Any project that requires a public hearing before the Planning Commission requires public noticing to adjacent neighbors. The Zoning Ordinance requires the following:

- Posting of a Notification Sign Applicant's responsibility
- Notification of all Property Owners of Record located within 500 feet of the Proposed Project City's responsibility

In addition to the notification of property owners within 500 feet of the proposed project, a sign must also be posted at the site. Attached is a copy of the On-Site Posting Requirement and Certification of Posting. It is the applicant's responsibility to post and remove this public notice sign.

If you have any questions regarding these requirements, please contact the Planning Division at (209) 668-5640.