

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: 901 E. MONTE VISTA AVE TURLOCK, CA			
Project Information				
	ASSESSOR'S PARCEL NUMBER: 072 045 040 AREA OF PROPERTY (ACRES OR SQUARE FEET): 30,056			
nfor	EXISTING ZONING: PD 164			
ct I	GENERAL PLAN DESIGNATION:			
roje	DESCRIBE THE PROJECT REQUEST: TO BUILD A PARKING SHADE STRUCTURE FOR FUTURE SOLAR			
P				
	NOTE: Information provided on this application is considered public record and will be released upon request by any member of the public.			
	APPLICANT_ROB_SANTOS / RANCHO RIAD LLC PHONE NO. 209-634-0023 F-MAIL: PIZZLEROT@GMAIL.com			
no				
Applicant Information				
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icar				
lpp!				
				
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Owner Info	PROPERTY OWNER: SAME PHONE NO. E-MAIL;			
ner	ADDRESS OF PROPERTY OWNER:			
Ow.	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.			
ķ	completed application and give consent to the action requested.			
roperty				
<u>-</u>	SIGNATURE OF PROPERTY OWNER PRINT NAME DATE			
	APPLICATION TYPE & NO.: MIDP 2020-16 DATE RECEIVED: 7/24/2620			
nly	144			
se O	CHECKED BY: 770			
Office Use Only	PC HEARING DATE: CC HEARING DATE:			
THE	PLANNER'S NOTES:			
2				

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.

DDO TECT NAME. MONTE VISTA SMALL ANIMAL SHADE CANODY

APPLICANT'S STATEMENT OF INTENT (DESCRIBE THE PROPOSED PROJECT):
13-PARKING STALL SHADE STRUCTURE FOR FUTURE SOLAR
PROPERTY OWNER'S NAME: ROB SANTOS / RANCHO RIAD LLC
Mailing Address: 901 E. MONTE VISTA AVE TURLOCK, CA
Telephone: Business (209) 634-0023 Home ()
E-Mail Address: PIZZLEROT@GMAIL.com
APPLICANT'S NAME:
Phone ()
Address:
Telephone: Business () Home ()
E-Mail Address:
PROJECT SITE INFORMATION:
Property Address or Location: 901 E. MONTE VISTA AVE TURLOCK, CA
Property Assessor's Parcel Number: 072-045-040
Property Dimensions: 170.02' x 180.11'
Property Area: Square Footage 30,056 Acreage .70
Site Land Use: Undeveloped/VacantDeveloped_ PD 164
If developed give building(s) square footage, 5.802

LAND USE DESIG	NATIONS:	
ZONING:	Current:	PD 164
	Proposed (If applicable):	
GENERAL PLAN	Current:	
	Proposed (If applicable)	
DESCRIBE ADJAC SITE:	CENT ZONING AND EXIST	ING LAND USE WITHIN 300 FEET OF PROJECT
ZONE - EXI	STING LAND USE (i.e., resid	lential, commercial, industrial)
North COMMERCIA	AL	
South COMMERCIA	AL	
EastCOMMERCIA	AL.	
West COMMERCIA	\L	
plants and animals, an	Site	
If yes to above, on the site that Will the project change	, please attach site plan indicating are proposed for removal.	te? YES if yes, are any to be removed? NO ng location, size and type of all trees, bushes and shrubs hality or quantity, or alter existing drainage patterns?

following information: Present Use of Existing Structure(s) SMALL ANIMAL HOSPITAL Proposed Use of Existing Structure(s) SAME Are any structures to be moved or demolished? NO 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? _____ If yes, date filed: _____ Are there any agriculture, conservation, open space or similar easements affecting the use of the project site? NO ___ 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. 2,640 S.F. Building height in feet (measured from ground to highest point): 14'-4" Height of other appurtenances, excluding buildings, measured from ground to highest point (i.e. antennas, mechanical equipment, light poles, etc.): Project site coverage: Building Coverage:_____Sq.Ft. Landscaped Area: Sq.Ft. % Paved Surface Area: Sq.Ft. % Total: Sq.Ft. 100% Exterior building materials: Exterior building colors:

Roof materials: MI	ETAL PANELS - WHITE			
Total number of of (If not on the	f-street parking space ne project site, attach a	s provided:a Signed Lease Agree	ment or Letter of Agenc	у)
Describe the type of exterior lighting proposed for the project (height, intensity):				
Building:				
Parking:				
Estimated Construc	ction Starting Date	Es	timated Completion Da	te
If the proposal is a			ribe the phases and sho	
Total Lots	Total Dwelling	Residential Proj (As applicable to pro		
			Acre	
			? If yes, pleas	
	Single Family	Two-Family (Duplex)	•	Multi-Family
Number of Units		(Duplex)	(Apartments)	(Condominiums)
Acreage				
Square Feet/Unit				
For Sale or Rent				
Price Range				
Type of Unit:				
Studio				
1 Bedroom				
2 Bedroom				
3 Bedroom				

				Page 16 of 32		
4+Bedroom						
Commercial, Industrial, Manufacturing, or Other Project						

(As applicable to proposal) Commercial parking Type of use(s) Expected influence: Regional X Citywide_____Neighborhood____ Days and hours of operation: Mon-Fri 7am to 10pm / Sat 8am to 8pm / Sun 9am to 8pm 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:

PROJECT IMPACTS
(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.			
Projected Vehicle Trips/Day (using table above): 634 Projected number of truck deliveries/loadings per day: 3				
Approximate hours of truck deliveries/loading	s each day: 8 am - 8 pm			
What are the nearest major streets? Monte Vista Ave / Olive				
Distance from project?				
Amount of off-street parking provided:				
If new paved surfaces are involved, describe them and give amount of square feet involved:				

WATER

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 inform	ation 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) sewag	ge to be generated (using information above):
Describe the type of sewage to be general	ted:
Will any special or unique sewage wastes	be generated by this development?

SOLID WASTE	/ mgs 17 01 32
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	8/3/2020 ASPAALT ONLY
Trenching	
Grading	8/5/2020
Paving	8/5/2020 8/6/2020 8/12/2020 8/20/2020
Building Construction	8/12/2020
Architectural Coatings (includes painting)	8/20/2020
Total Volume of all Building(s) to be Demolis Max Daily Volume of Building(s) to be Demo	
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; AND 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:

OF MY KNOWI FDGE AND BEI IEE

THE PROJECT IS LOCATED ON A SITE WHICH IS INCLUDED ON ONE OR MORE OF THI
LISTS COMPILED PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 65962.5(f). THI
SITE IS INCLUDED ON THE FOLLOWING LIST(S) SPECIFIED BELOW:
Regulatory ID Number:
Regulatory ID Number:
·
Regulatory ID Number:
OR Control of the Con
THE PROJECT IS NOT LOCATED ON A SITE WHICH IS INCLUDED ON ONE OR MORE OF
THE LISTS COMPILED PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 65962.5(f).
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

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	······································