



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 Information

PROJECT ADDRESS: 1150 Angels (lots facing So. Sockergist)
ASSESSOR'S PARCEL NUMBER: 050 - 005 - 059 AREA OF PROPERTY (ACRES OR SQUARE FEET): 27,180.1
EXISTING ZONING: R-m
GENERAL PLAN DESIGNATION: Medium Density - Multi-Family
DESCRIBE THE PROJECT REQUEST: New Construction of A Triplex on Parcel #4
A Duplex on Parcel #3 and A Duplex on Parcel #1

Applicant Information

NOTE: Information provided on this application is considered public record and will be released upon request by any member of the public.

APPLICANT FRANK Sequeira PHONE NO. 209 756 7085 E-MAIL: FRANKASEQUEIRA@hotmail.com
** Corporate partnerships must provide a list of principals. FAX NO. None

ADDRESS OF APPLICANT: 2031 N. Daubenberger, TURLOCK CA

CONTACT PERSON (If different than applicant):
for all contact, correspondence, and billing from the City unless other arrangements are made in

FRANK Sequeira
PRINT NAME

9/19/2022
DATE

This fee is to be a deposit towards full cost of processing application. Yes No Applicant's Initials

Property Owner Info

PROPERTY OWNER: PHONE NO. E-MAIL:

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 application and agree to the action requested.

FRANK Sequeira
PRINT NAME

9/19/2022
DATE

Office Use Only

APPLICATION TYPE & NO.: MDP 2022-15

DATE RECEIVED: 9/29/22

CASH OR CHECK NO. / \$

CHECKED BY: JS

PC HEARING DATE: CC HEARING DATE:

PLANNER'S NOTES:

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: Sequeira Duplexes and Triplexes

APPLICANT'S STATEMENT OF INTENT (DESCRIBE THE PROPOSED PROJECT):

CONSTRUCTION of A Duplex on Parcel #1 and Parcel #3
And A Triplex on Parcel #4 AT The New/ly
subdivided Parcel AT The Corner of So. Soderquist And
Angelus. All site/onsite improvements TO be completed.

*NOTE: The Triplex on Parcel #2 has A completed
 PROPERTY OWNER'S NAME: FRANK Sequeira MINOR Discretionary Permit

Mailing Address: 2031 N. DAUBENBERGER Rd. Turlock CA 95382

Telephone: Business (209) 756-7085 Home () None

E-Mail Address: FRANKASequeira@hotmail.com

APPLICANT'S NAME: SAME AS OWNER

Phone () _____

Address: _____

Telephone: Business () _____ Home () _____

E-Mail Address: _____

PROJECT SITE INFORMATION:

Property Address or Location: 1150 Angelus - Soderquist Address to follow

Property Assessor's Parcel Number: 050-005-059

Property Dimensions: PARCEL #1 = 8947^{SQ. FT.}, PARCEL #3 = 7069^{SQ. FT.}, PARCEL #4 =
See Parcel MAP

Property Area: Square Footage 27,180.1 Acreage .624 11165 SQ. FT.

Site Land Use: Undeveloped/Vacant 100% Developed ☒

If developed, give building(s) square footage _____

LAND USE DESIGNATIONS:

ZONING: Current: R-m
 Proposed (If applicable): _____
 GENERAL PLAN Current: Medium Density
 Proposed (If applicable): _____

DESCRIBE ADJACENT ZONING AND EXISTING LAND USE WITHIN 300 FEET OF PROJECT SITE:**ZONE - EXISTING LAND USE (i.e., residential, commercial, industrial)**

North Medium Density Residential
 South medium Density Residential
 East Medium Density Residential
 West Industrial

PROJECT CHARACTERISTICS**Site Conditions**

Describe the project site as it exists before the project, including information on topography, soil stability, plants and animals, and any cultural, historical or scenic aspects (if applicable)

VACANT Lot w/ Sandy loam type soil. Lot has
CURB AND Gutter on all street frontage and sidewalks
Along Angeles. No utilities on site. TID irrig.
Pipeline (old) to be Abandoned and Removed

Are there any trees, bushes or shrubs on the project site? No if yes, are any to be removed? _____

If yes to above, please attach site plan indicating location, size and type of all trees, bushes and shrubs on the site that are proposed for removal.

Will the project change waterbody or ground water quality or quantity, or alter existing drainage patterns?

yes If yes, please explain:

Sites will incorporate on-site Drain system within
Parking lots. Landscape Areas will Retain A portion
of storm water and be incorporated into the Drainage plan

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

Present Use of Existing Structure(s) N/A

Proposed Use of Existing Structure(s) N/A

Are any structures to be moved or demolished? N/A If yes, indicate on site plan which structures are proposed to be moved or demolished.

Is the property currently under a Williamson Act Contract? No 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):

None

Proposed Building Characteristics

Size of any new structure(s) or building addition(s) in gross sq. ft. 918 x 7 = 6426

Building height in feet (measured from ground to highest point): 15'

Height of other appurtenances, excluding buildings, measured from ground to highest point (i.e. antennas, mechanical equipment, light poles, etc.):

None

Project site coverage:

Building Coverage: 6426 Sq.Ft. .24 %

Landscaped Area: 14,650 Sq.Ft. .54 %

Paved Surface Area: 6104 Sq.Ft. .22 %

Total: 27,180.1 Sq.Ft. — 100%

Exterior building materials: Stucco, Rock Veneer, 30 year comp.

Exterior building colors: See color charts and Renderings

Roof materials: Composition Asphalt shingles

Total number of off-street parking spaces provided: 11 (3+3+5)
(If not on the project site, attach a Signed Lease Agreement or Letter of Agency)

Describe the type of exterior lighting proposed for the project (height, intensity):

Building: Standard Coach / lantern wall Fixtures (LED)

Parking: LED, Solar - down facing

Estimated Construction Starting Date 11/10/2022 Estimated Completion Date 6/10/2022

If the proposal is a component of an overall larger project describe the phases and show them on the site plan:

Residential Projects
(As applicable to proposal)

Total Lots 3 Total Dwelling Units 7 Total Acreage .624

Net Density/Acre _____ Gross Density/Acre _____

Will the project include affordable or senior housing provisions? No If yes, please describe:

	Single Family	Two-Family (Duplex)	Multi-Family (Apartments)	Multi-Family (Condominiums)
Number of Units		<u>2</u>	<u>1</u>	
Acreage				
Square Feet/Unit		<u>918</u>	<u>918</u>	
For Sale or Rent		<u>Rent</u>	<u>Rent</u>	
Price Range		<u>\$1000-\$1200</u>	<u>\$1000-\$1200</u>	
Type of Unit:		<u>single story</u>	<u>single story</u>	
Studio		<u>—</u>	<u>—</u>	
1 Bedroom		<u>—</u>	<u>—</u>	
2 Bedroom		<u>yes</u>	<u>yes</u>	
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:

PROJECT IMPACTS

(Please compute each specific impact issue per the following criteria)

TRAFFIC

<u>Land Use</u>	<u>Weekday Trip End Generation Rates (100%Occ.)</u>
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): 42Projected number of truck deliveries/loadings per day: 2Approximate hours of truck deliveries/loadings each day: 10 min.What are the nearest major streets? West MainDistance from project? 1/2 mileAmount of off-street parking provided: None

If new paved surfaces are involved, describe them and give amount of square feet involved:

DRIVEWAYS AND PARKING AREAS (concrete paved)
APPRX. 5000 SQ. FT.

WATERLand 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): $533 \times 7 = 3731$ Source of Water: City water (3 - 1" meters) 1 meter per lot**SEWAGE**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 be generated (using information above):

$$200 \times 7 = 1400 \text{ GAL/DAY}$$

Describe the type of sewage to be generated: Waste water from Kitchen sink
bath/shower and toilets

Will any special or unique sewage wastes be generated by this development?

N/A

SOLID WASTELand 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: 7.37 X 7 Amount: 51.6 LBS / DAY

AIR QUALITY*Construction Schedule:*ActivityApproximate Dates

Demolition

N/A

Trenching

11/20/2022

Grading

11/15/2022

Paving

4/1/2023

Building Construction

12-1-2023

Architectural Coatings (includes painting)

2-1-2023Total Volume of all Building(s) to be Demolished 0Max Daily Volume of Building(s) to be Demolished 0Total Acreage to be Graded .624

Amount of Soil to Import/Export? N/A Import or export
of soil anticipated

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 all of the following online databases to determine whether there are any known or potential hazards on the property.

EPA: <https://enviro.epa.gov>

NEPAssist: <https://epa.gov/nepa/nepassist>

California DTSC Envirostor: www.envirostor.dtsc.ca.gov/public

California Geotracker: <http://geotracker.waterboards.ca.gov/>

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). THE SITE IS INCLUDED ON THE FOLLOWING LIST(S) SPECIFIED BELOW:

Regulatory ID Number: _____

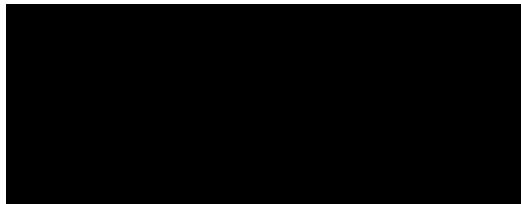
Regulatory ID Number: _____

Regulatory ID Number: _____

OR

X 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).

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.



9/19/2022

Date

FRANK Sequim OWNER
 Print Name and Title of Applicant/Agent

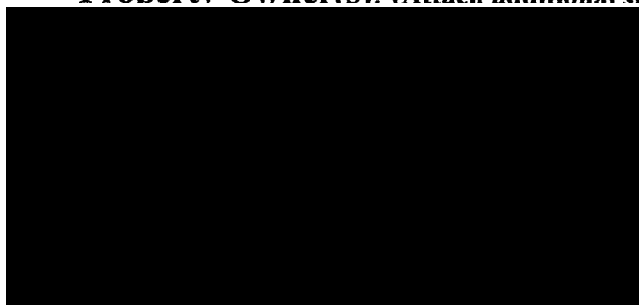
(209) 756-7085
 Phone Number

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 20;
2. the Acknowledgments/Authorizations/Waivers starting on page 22; and
3. the Indemnification on page 24; and
4. the Department of Fish and Wildlife CEQA Review Filing Fees on page 26.

Property Owner(s): (Attach additional sheets, as necessary)



9/19/2022
Date

FRANK Sequerra owner
Print Name and Title of Property Owner

(209) 756-7085
Phone Number

Applicant(s): (If different than above)

Signature of Applicant/Agent

Date

Print Name and Title of Applicant/Agent

Phone Number