

### 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: 900 W. Monte Vista Ave  ASSESSOR'S PARCEL NUMBER: 071 - 006 - 021 AREA OF PROPERTY (ACRES OR SQUARE FEET): 9.73 ac  EXISTING ZONING: A RE RL RM RH CO CC CH CT I IBP PD Downtown  GENERAL PLAN DESIGNATION: A VLDR LDR MDR HDR O Comm Comm Heavy Comm I  DESCRIBE THE PROJECT REQUEST: MON LUM & At Sign	MA. 104
mation	NOTE: Information provided on this application is considered public record and will be released upon request by any member of the public.  APPLICANT AMCAL Stanistons LLC PHONE NO. 88-706-0694 E-MAIL:	
Applicant Information		
r Info		
Property Owner Info		
	APPLICATION TYPE & NO.: MDP 17-09 DATE RECEIVED: 4/12/17	
Office Use Only	CASHOR CHECK NO CHECKED BY: PC HEARING DATE: CC HEARING DATE:	
Office	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.

	OF INTENT (DESCRIBE THE PROPOSED PROJECT):
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# 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: <a href="www.envirostor.dtsc.ca.gov/public">www.envirostor.dtsc.ca.gov/public</a> California Geotracker: <a href="http://geotracker.waterboards.ca.gov/">http://geotracker.waterboards.ca.gov/</a>

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

#### I HEREBY CERTIFY THAT:

LISTS COMPILED PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 65962.5(f).	THE
SITE IS INCLUDED ON THE FOLLOWING LIST(S) SPECIFIED BELOW:	11110
Regulatory ID Number:	
Regulatory ID Number:	
Regulatory ID Number:	
OR	
THE PROJECT IS NOT LOCATED ON A SITE WHICH IS INCLUDED ON ONE OR MORTHE LISTS COMPILED PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 65962.5(f	E OF

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.

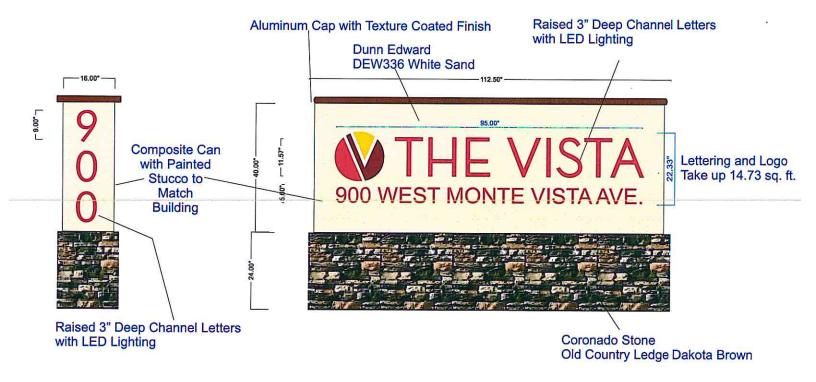
### PROPERTY OWNER/APPLICANT SIGNATURE:

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)

Applicant(s): (If different than above)	
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Signature of Applicant/Agent	Date
Print Name and Title of Applicant/Agent	Phone Number

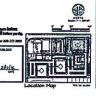


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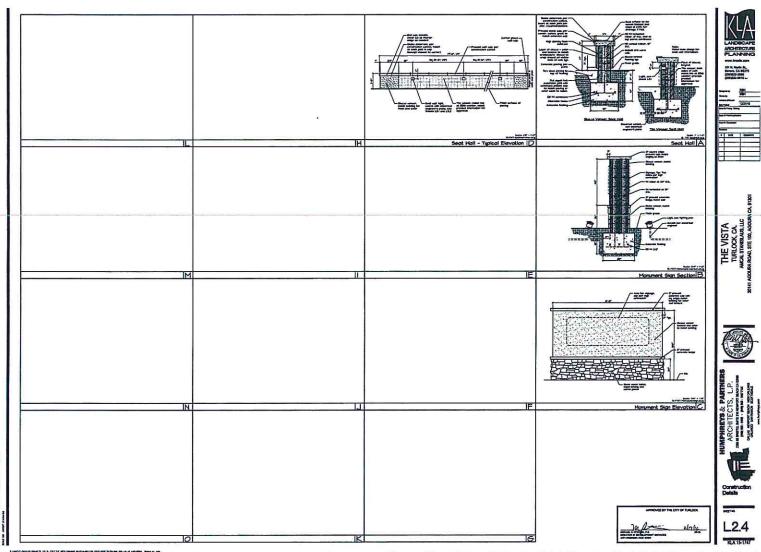




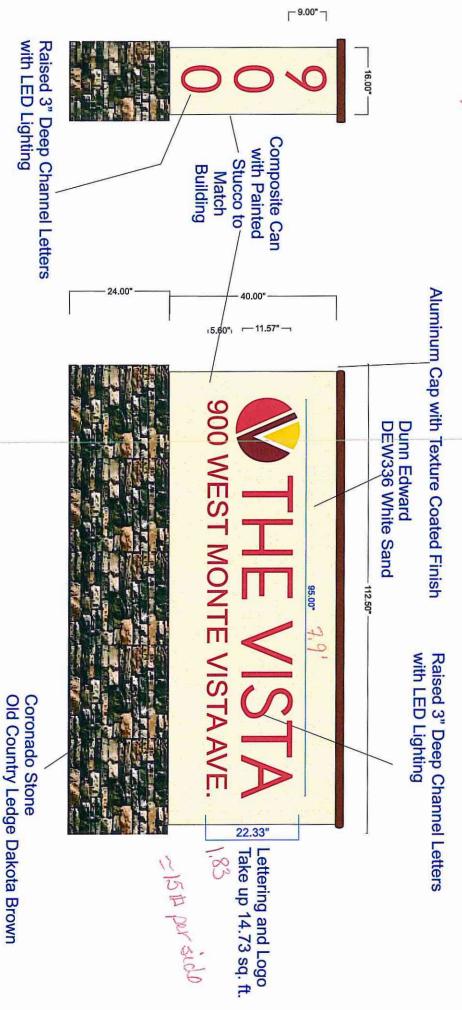


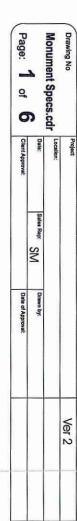


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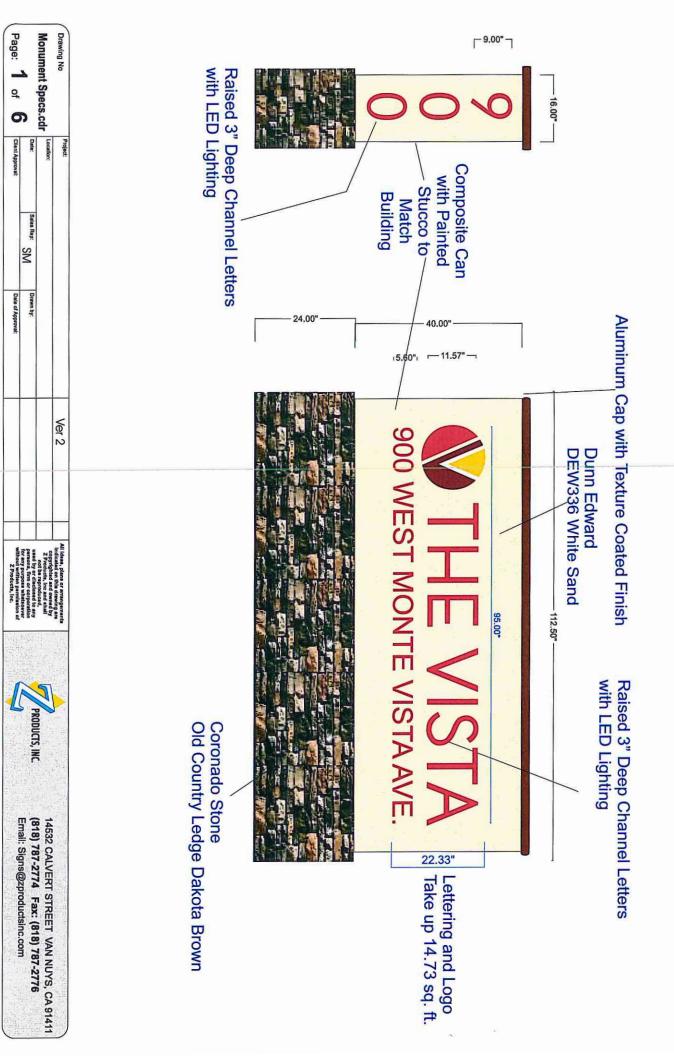
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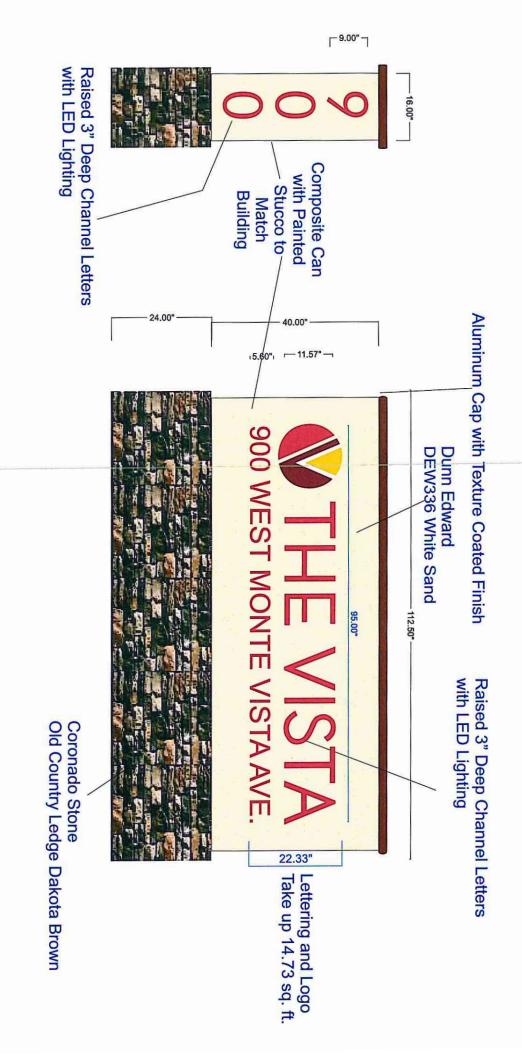


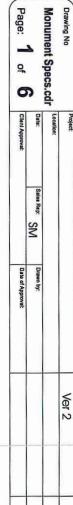




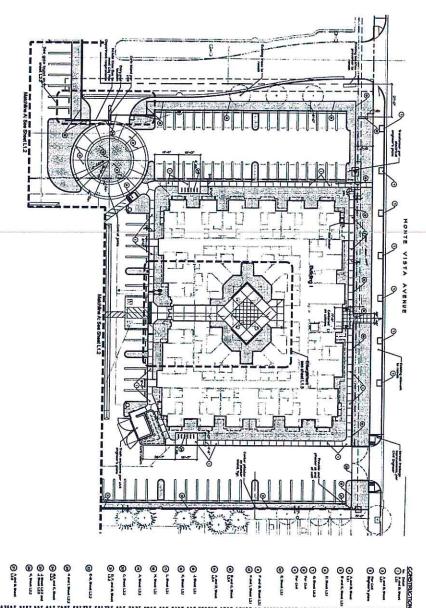
14532 CALVERT STREET VAN NUYS, CA 91411 (818) 787-2774 Fax: (818) 787-2776 Email: Signs@zproductsinc.com

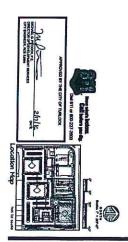












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