



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: 1391 FIFTH ST TURLOCK, CA 95380
 ASSESSOR'S PARCEL NUMBER: 43-17-24 AREA OF PROPERTY (ACRES OR SQUARE FEET): _____
 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: Time extension for CUP 2006-04

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 Hassimian Singh

** Corporate partnerships must provide a list of principals.

Property Owner Info

Office Use Only

APPLICATION TYPE & NO.: CUP Time Extension 06-04 DATE RECEIVED: 7/25/17

CASH _____ OR CHECK _____

PC HEARING DATE: _____ CC HEARING DATE: _____

PLANNER'S NOTES: _____

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: Time Extension for CUP 2006-04

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

Time extension for CUP

PROPERTY OWNER'S NAME: _____

Mailing Address: _____

Telephone: Business () _____ Home () _____

E-Mail Address: _____

APPLICANT'S NAME: _____

Phone () _____

Address: _____

Telephone: Business () _____ Home () _____

E-Mail Address: _____

PROJECT SITE INFORMATION:

Property Address or Location: _____

Property Assessor's Parcel Number: _____

Property Dimensions: _____

Property Area: Square Footage _____ Acreage _____

Site Land Use: Undeveloped/Vacant _____ Developed _____

If developed, give building(s) square footage _____

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

Regulatory ID Number: _____

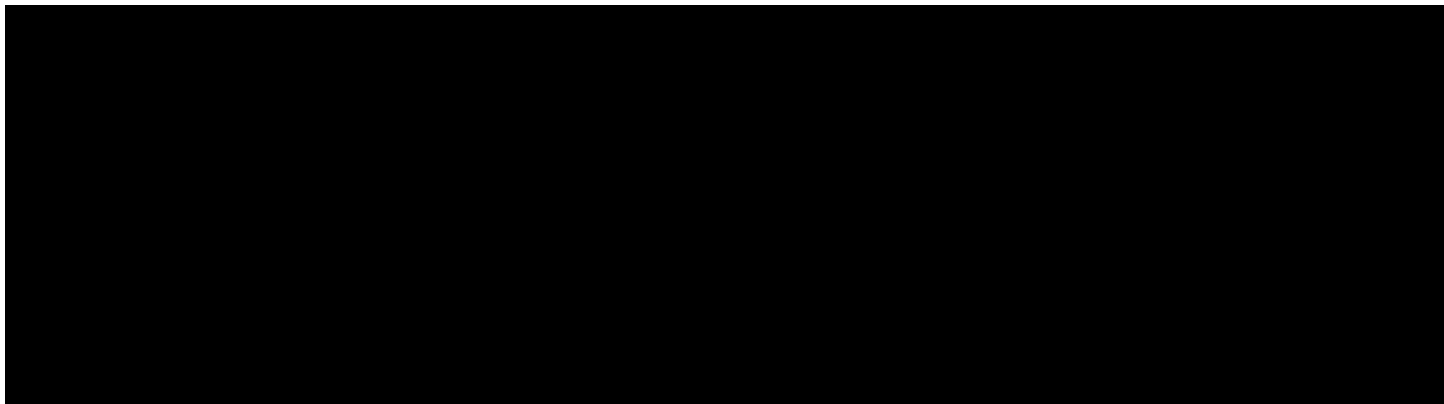
Regulatory ID Number: _____

Regulatory ID Number: _____

OR

 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.



SOLID WASTE

<u>Land Use</u>	<u>Estimated Solid Waste Generation (lb/day)</u>
Single-Family Residential	10.96 lbs./day/res.
Multi-Family Residential	7.37 lbs./day/unit
Commercial	50 lbs./500 s.f. floor area
Industrial	Variable-[Please describe the projected solid waste to be generated by your project.]

Type: _____ Amount: _____

AIR QUALITY***Construction Schedule:***

<u>Activity</u>	<u>Approximate Dates</u>
Demolition	_____
Trenching	_____
Grading	_____
Paving	_____
Building Construction	_____
Architectural Coatings (includes painting)	_____

Total Volume of all Building(s) to be Demolished _____

Max Daily Volume of Building(s) to be Demolished _____

Total Acreage to be Graded _____

Amount of Soil to Import/Export? _____

**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)

Print Name and Title of Applicant/Agent

Phone Number

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