Land Use Compliance Review Application

Date Received 9/19/12
By Robert
Fee $840
Case # LUCR 01-12

General Information

APPLICANT Joe Goodpaster Phone _____ Fax 760 228 1985

Mailing Address _____ Email _____

City Yucca Valley State CA Zip 92284

REPRESENTATIVE Jim Brown Phone _____ Fax 760 228 1880

Mailing Address 55596 YUCCA TRAIL Email _____

City YUCCA VALLEY State CA ZIP 92284

PROPERTY OWNER AMERIGAS LP Phone _____ Fax 760 228 1880

Mailing Address PO BOX 802 Email _____

City VALLEY FORGE State PA Zip 19482

Project Information

Project Address 55596 YUCCA TRI Assessor Parcel Number(s) 594-041-16

Project Location _____

Project Description: New office Bldg 30'x30' & Concrete drive way & Parking

Please attach any additional information that is pertinent to the application.

Town of Yucca Valley
Community Development Department
Planning Division
58928 Business Center Dr
Yucca Valley, CA 92284
760 369-6575 Fax 760 228-0084
www.yucca-valley.org

Environmental Assessment

1. Property boundaries, dimensions and area (also attach an 8 ½ x 11" site plan): 1.85 AC

2. Existing site zoning: OTIC 3. Existing General Plan designation: OTIC

4. Precisely describe the existing use and condition of the site: Propane office Service & delivery

5. Existing Zoning of adjacent parcels:

   North I South OTIC East OTIC West OTIC

6. Existing General Plan designation of adjacent parcels:

   North I South OTIC East OTIC West OTIC

7. Precisely describe existing uses adjacent to the site: _____

8. Describe the plant cover found on the site, including the number and type of all protected plants: NONE

Note: Explain any "Yes" or "'Maybe" responses to questions below. If the information and responses are insufficient or not complete, the application may be determined incomplete and returned to the applicant.

Yes	Maybe	No	
☐	☐	☒	9. Is the Site on filled or slopes of 15% or more or in a canyon? (A geological and/or soils Investigation report is required with this application.)
☐	☐	☒	10. Has the site been surveyed for historical, paleontological or archaeological resources? (If yes, a copy of the survey report is to accompany this application.)
☐	☐	☒	11. Is the site within a resource area as identified in the archaeological and historical resource element?
☐	☐	☒	12. Does the site contain any unique natural, ecological, or scenic resources?
☐	☐	☒	13. Do any drainage swales or channels border or cross the site?
☐	☐	☒	14. Has a traffic study been prepared? (If yes, a copy of the study is to accompany this application.)
☒	☐	☐	15. Is the site in a flood plain? (See appropriate FIRM)

Project Description

Complete the items below as they pertain to your project. Attach a copy of any plans submitted as part of the project application and any other supplemental information that will assist in the review of the proposed project pursuant to CEQA.

1. **Commercial, Industrial, or Institutional Projects:**

   A. Specific type of use proposed: Office & Meeting, Break Room

   B. Gross square footage by each type of use: 900

   C. Gross square footage and number of floors of each building: ONE 900 ☑

   D. Estimate of employment by shift: _____

   E. Planned outdoor activities: NONE

2. **Percentage of project site covered by:**

   _____% Paving, _____% Building, _____ % Landscaping, _____% Parking

3. **Maximum height of structures** 13 ft. 0 in.

4. **Amount and type of off street parking proposed:** 8 Spaces one Handicap

5. **How will drainage be accommodated?** All Ready in place

6. **Off-site construction (public or private) required to support this project:** NONE

7. **Preliminary grading plans estimate** _____ **cubic yards of cut and** _____ **cubic yards of fill**

8. **Description of project phasing if applicable:** _____

9. **Permits or public agency approvals required for this project:** Bldg Permits

10. **Is this project part of a larger project previously reviewed by the Town? If yes, identify the review process and associated project title(s)** no

11. **During construction, will the project:** (Explain any "yes" or "maybe" responses to questions below – attach extra pages if necessary.)

Yes	Maybe	No	
☐	☐	☒	A. Emit dust, ash, smoke, fumes or odors?
☐	☐	☒	B. Alter existing drainage patterns?
☐	☐	☒	C. Create a substantial demand for energy or water?
☐	☐	☒	D. Discharge water of poor quality?
☐	☐	☒	E. Increase noise levels on site or for adjoining areas?
☐	☐	☒	F. Generate abnormally large amounts of solid waste or litter?
☐	☐	☒	G. Use, produce, store, or dispose of potentially hazardous materials such as toxic or radioactive substances, flammable or explosives?
☐	☐	☒	H. Require unusually high demands for such services as police, fire, sewer, schools, water, public recreation, etc.
☐	☐	☒	I. Displace any residential occupants?

Certification

I hereby certify that the information furnished above, and in the attached exhibits, is true and correct to the best of my knowledge and belief.

Signature: Joe Goodpaster Date: Sept 12 2012

Agreement to Pay All Development Application Fees

In accordance with Town Council Resolution 04-38 the Town collects certain fees based on the actual cost of providing service. The application deposit for this project (as indicated below) may not cover the total cost of processing this application. I/We are aware that if the account has 25% or less remaining prior to completion of the project, staff will notify the undersigned in writing, of the amount of additional deposit required to complete the processing of the application, based on Staff's reasonable estimate of the hours remaining to complete this application process.

Further, I understand that if I do not submit the required additional deposit to the Town within 15 business days from the date of the letter, staff may stop processing of the application and/ or not schedule the project for action by the Planning Commission or Town Council.

Any remaining deposit will be refunded to me at time of closeout after I have submitted any required approved project plans and forms, including signed conditions of approval, or upon my written request to withdraw the application.

As the applicant, I understand that I am responsible for the cost of processing this application and I agree that the actual time spent processing this application will be paid to the Town of Yucca Valley

Deposit Paid: $ 840

Applicant's Signature _____ Date: 09-17-12

Applicants Name JIM BROWN
(Please print)

Town of Yucca Valley
Community Development Department
Planning Division
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Owner/Applicant Authorization

Applicant/Representative: I/We have reviewed this completed application and the attached material. The information included with this application is true and correct to the best of my/our knowledge. I/We further understand that the Town may not approve the application as submitted, and may set conditions of approval. Further, I/We understand that all documents, maps, reports, etc., submitted with this application are deemed to be public records. This application does not guarantee approval or constitute a building permit application. Additional fees may be required depending on additional administrative costs.

Signed: _____

Date: 09-17-12

Property Owner: I/We certify that I/We are presently the legal owner(s) of the above described property (If the undersigned is different from the legal property owner, a letter of authorization must accompany the form). Further, I/We acknowledge the filing of this application and certify that all of the above information is true and accurate. I/We understand that I/We are responsible for ensuring compliance with conditions of approval. I/We hereby authorize the Town of Yucca Valley and or/its designated agent(s) to enter onto the subject property to confirm the location of existing conditions and proposed improvements including compliance with applicable Town Code Requirements. Further, I/We understand that all documents, maps, reports, etc., submitted with this application are deemed to be public records. This application does not guarantee approval or constitute a building permit application. Additional fees may be required depending on additional administrative costs. I am hereby authorizing GOODPASTER CONSTRUCTION to act as my agent and is further authorized to sign any and all documents on my behalf.

Signed: _____

Dated: 09-17-12