



Land Use Compliance Review Application

Date Received 11/25/15
 By D Olsen
 Fee \$840
LUCR 04-15

General Information

APPLICANT SA FOODS SERVICES, LLC Phone (253) 292-6907 Fax (253) 517-8563
 Mailing Address 5005 Pacific Hwy E. #14 Email SUNNY@FOOD-SERVICES.CO
 City FIFE, WA 98424 State WA Zip 98424
 REPRESENTATIVE CHRIS POST (ATC DESIGN GROUP) Phone (760) 497-4292 Fax N/A
 Mailing Address 1282 PACIFIC OAKS PL. "C" Email CPPOST@ATCDESIGNGROUP.COM
 City ESCONDIDO State CA ZIP 92029
 PROPERTY OWNER NETRETT, INC Phone (760) ⁴⁷¹ ~~471~~ - 8536 Fax (760) 471-0399
 Mailing Address 1282 PACIFIC OAKS PL. "A" Email CKATZ@NETRETT.COM
 City ESCONDIDO State CA Zip 92029

Project Information

Project Address 57622 29 PALMS HWY. Assessor Parcel Number(s) 0595-271-40
 Project Location BETWEEN WARREN VISTA DR. AND AIRWAY AVE.
 Project Description: INTERIOR & EXTERIOR RENOVEL OF AN EXISTING RESTAURANT
BLDG. AND SITE

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 1/2 x 11" site plan):
230.14' OF FRONTAGE BY 150' OF DEPTH (PIE SHAPE) SEE ATTACHED ALTA SURVEY
2. Existing site zoning: C6 3. Existing General Plan designation: COMMERCIAL
4. Precisely describe the existing use and condition of the site: VACANT RESTAURANT BLDG. AND POORLY MAINTAINED SITE
5. Existing Zoning of adjacent parcels:
North C6 South C6 East C6 West C6
6. Existing General Plan designation of adjacent parcels:
North COMM. South COMM. East COMM. West COMM.
7. Precisely describe existing uses adjacent to the site: ALL RETAIL / RESTAURANT OR COMMERCIAL INCLUDING; MCDONALD'S, VONS, PACC, BIG O', DEL TACO, ETC.
8. Describe the plant cover found on the site, including the number and type of all protected plants: VEGETATION IS NOT EXISTING OTHER THAN A FEW MEXICAN FAN PALMS "WASHINGTONIA ROBUSTA" AND SEVERAL JUNIPER PLANTS "JUNIPERUS"

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

- | | | | |
|--------------------------|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 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.) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 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.) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11. Is the site within a resource area as identified in the archaeological and historical resource element? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 12. Does the site contain any unique natural, ecological, or scenic resources? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 13. Do any drainage swales or channels border or cross the site? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 14. Has a traffic study been prepared? (If yes, a copy of the study is to accompany this application.) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 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: ARBY'S RESTAURANT
- B. Gross square footage by each type of use: 2438
- C. Gross square footage and number of floors of each building: N/A
- D. Estimate of employment by shift: 8
- E. Planned outdoor activities: NONE

2. Percentage of project site covered by:

25 % Paving, 10% % Building, 15 % Landscaping, 50 % Parking

3. Maximum height of structures 17 ft. 0 in.

4. Amount and type of off street parking proposed: 84 EXISTING STANDARD PARKING SPACES INCL. 1 ACCESSIBLE

5. How will drainage be accommodated? RUN OFF TO EXISTING FACILITIES

6. Off-site construction (public or private) required to support this project:

NONE REQUIRED

7. Preliminary grading plans estimate N/A cubic yards of cut and _____ cubic yards of fill

8. Description of project phasing if applicable: N/A

9. Permits or public agency approvals required for this project: BUILDING / PLANNING /
FIRE / HEALTH

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

- | | | | |
|--------------------------|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | A. Emit dust, ash, smoke, fumes or odors? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | B. Alter existing drainage patterns? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | C. Create a substantial demand for energy or water? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | D. Discharge water of poor quality? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | E. Increase noise levels on site or for adjoining areas? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | F. Generate abnormally large amounts of solid waste or litter? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | G. Use, produce, store, or dispose of potentially hazardous materials such as toxic or radioactive substances, flammable or explosives? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | H. Require unusually high demands for such services as police, fire, sewer, schools, water, public recreation, etc. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 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:  Date: 12/6/15

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: _____

12/01/15

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

~~to act as my agent and is further authorized to sign any and all documents on my behalf.~~

Signed: _____



Dated: _____

12/1/15

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: 12/01/15

Applicants Name CHRIS POST
(Please print)

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