



Site Plan Review Application

Date Received 3/8/2021
 By J. Jereval
 Fee \$2910
 Case # SPR 01-21
 EA # ~~003-03-21~~ 03-21

General Information

APPLICANT CARMEN MELO Phone 917-723-0283 Fax _____
 Mailing Address 56581 MOUNTAIN VIEW TRL Email CARMENGMELLO@GMAIL.COM
 City YUCCA VALLEY State CA Zip 92284

PERSONAL OR LLC

REPRESENTATIVE _____ Phone _____ Fax _____
 Mailing Address _____ Email _____
 City _____ State _____ ZIP _____

PROPERTY OWNER DAVE LEACH Phone 760-799-7232 Fax _____
 Mailing Address 7022 CHOLIA AVE Email _____
 City YUCCA VALLEY State CA Zip 92284

Project Information

Project Address 57205 29 PALMS HWY #2 Assessor Parcel Number(s) 0595-723-0283
 Project Location 29 PALMS OHS - BETWEEN DUMOSA AVE + JOSHUA LN.
 Project Description: CONSTRUCT RESTAURANT IN EXISTING BUILDING

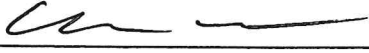
Please attach any additional information that is pertinent to the application.

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

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.

Name CARMEN MELO


Signature 

Date: 4/7/21

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.

Name DAVE LEACH

Signature 

Date: 4/7/21

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 notification by the Town, the Town will cease processing of the application and/ or not schedule the project for action by the Planning Commission or Town Council until the fees have been paid.

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 costs incurred processing this application will be paid to the Town of Yucca Valley.

Deposit Paid: \$ 2910

Applicants Name CARMEN MELO

 Applicant's Signature 

Date: 5/7/21

(Please print)



HAZARDOUS WASTE SITE STATEMENT

I have been informed by the Town of Yucca Valley of my responsibilities, pursuant to California Government Code Section 65962.5, to notify the Town as to whether the site for which a development application has been submitted is located within an area which has been designated as the location of a hazardous waste site by the Office of Planning and Research, State of California (OPR).

I am informed and believe that the proposed site, for which a development application has been submitted, is not within any area specified in said Section 65962.5 as a hazardous waste site.

I declare under penalty of perjury of the laws of the State of California that the foregoing is true and correct.



Dated: 5/7/21

CARMEN MELLO
Applicant/Representative printed name


Applicant/Representative signature