



Pre-Application

Date Received	<u>5/23/23</u>
By	<u>Kuan</u>
Fee	<u>\$535,00</u>
Case #	PA 03-23 PA 04-23

[Handwritten initials]

General Information

APPLICANT Camille Walkinshaw Phone 2536514973

Mailing Address 2902 Rowena Ave Email walkinshaw@thhouseinc.com

City Los Angeles State CA Zip 90039

REPRESENTATIVE _____ Phone _____

Mailing Address _____ Email _____

City _____ State _____ Zip _____

PROPERTY OWNER Frank Yang Phone 8779887770

Mailing Address 5654 Acoma Trail Email fyang@simplehuman.com

City Yucca Valley State CA Zip 92284

Project Information

Project Address 5654 Acoma Trail Yucca Valley CA 92284

Assessor Parcel Number(s) 0596011030000

Project Location Yucca Valley, CA

Project Description: Subdividing 160 acres to 4 different parcels total;
one 24.4 acre lot, two 5-acre lots and a
remaining 125.6 acres

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

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.

Signature: Camille Walkinshaw

Digital signed by Camille Walkinshaw
DN: cn=Camille Walkinshaw, o=Town of Yucca Valley, ou=Community Development Department, email=camille.walkinshaw@yuccavalley.org, c=US

Name: Camille Walkinshaw

Date: 05/09/23

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.

Signature: 

Name: Frank Yang

Date: 5/12/23

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

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: \$ \$535

Applicant's Signature Camille Walkinshaw
Digitally signed by Camille Walkinshaw
DN: cn=Camille Walkinshaw, o=Town of Yucca Valley
ou=Planning Division, email=camille@yuccavalley.org, c=US

Applicants Name Camille Walkinshaw
(Please print)

Date: 05/09/23

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