



**Environmental Assessment**

1. Property boundaries, dimensions and area (also attach an 8 1/2 x 11" site plan):  
100' x 220'
2. Existing site zoning: R-M10 3. Existing General Plan designation: \_\_\_\_\_
4. Precisely describe the existing use and condition of the site: VACANT LOT
5. Existing Zoning of adjacent parcels:  
North R-M10 South R-M10 East R-M10 West R-M10
6. Existing General Plan designation of adjacent parcels:  
North R-M10 South R-M10 East R-M10 West R-M10
7. Precisely describe existing uses adjacent to the site: MULTI FAMILY RESIDENTIAL, EXISTING HOMES.
8. Describe the plant cover found on the site, including the number and type of all protected plants: JOSHUA TREE, 2 PCS., WEEDS.

**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?  |

**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](http://www.yucca-valley.org)**

- 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: MULTI FAMILY
- B. Gross square footage by each type of use: 685 sqft
- C. Gross square footage and number of floors of each building: 685 sqft, 1 floor
- D. Estimate of employment by shift: N/A
- E. Planned outdoor activities: N/A

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

12 % Paving, 26 % Building, 56 % Landscaping, 4 % Parking

**3. Maximum height of structures** 10 ft. 9 in.

**4. Amount and type of off-street parking proposed:** 4

**5. How will drainage be accommodated?** 2pc of RETENTION WATER BASIN. 18'x18' each.

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

**7. Preliminary grading plans estimate** 16 cubic yards of cut and 0 cubic yards of fill

**8. Description of project phasing if applicable:** \_\_\_\_\_

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

**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?



## 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 TOM WISNIEWSKI

Signature 

Date: 06/03/24

**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 TOM WISNIEWSKI

Signature  Date: 06/03/24

## Developer Disclosure Statement

This portion of the application must be fully completed and signed by the applicant. If not fully completed and signed, the application will be deemed incomplete.

Address of subject property: 7250 PALO ALTO AVE , YUCCA VALLEY CA 92284

Cross street: YUCCA TRAIL

Date this Disclosure Statement is completed: 06/03/2024

Name of Applicant: SOUTHWEST EL SOL INVESTMENTS LLC

The Applicant is a:

- Limited Liability Company (LLC)  
 Partnership  
 Corporation  
 None of the above

### Information for LLC, Partnership, Corporation

Name SOUTHWEST EL SOL INVESTMENTS LLC Phone 909-961-9898 Fax \_\_\_\_\_

Mailing Address 1885 NEWPORT AVE Email chua@agenceouvray.com

City PASADENA State CA Zip 91103

State of Registration TEXAS

### Managing member(s), General Partner(s) officer(s)

Name SAMSON CHUA Phone 909-961-9898 Fax \_\_\_\_\_

Mailing Address 1885 NEWPORT AVE Email chua@agenceouvray.com

City PASADENA State CA Zip 91103

Attach additional sheets if necessary

### Agent for Service of Process

Name TOMASZ WISNIEWSKI Phone 323-363-9360 Fax \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### For Corporations, Shareholder with Fifty Percent or More Share or Controlling Shareholder

Name WENHAO DENG Phone 210-862-4632 Fax \_\_\_\_\_

Mailing Address 1110 RODEO RD Email bulletfund@hotmail.com

City ARCADIA State CA Zip 91780



The Owner is a:

- Limited Liability Company (LLC)
- Partnership
- Corporation
- None of the above

**Information for LLC, Partnership, Corporation**

Name SOUTHWEST EL SOL INVESTMENTS LLC Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mailing Address SAME AS ABOVE Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

State of Registration \_\_\_\_\_

**Managing member(s), General Partner(s) officer(s)**

Name SAME AS ABOVE Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Attach additional sheets if necessary

**Agent for Service of Process**

Name SAME AS ABOVE Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**For Corporations, Shareholder with Fifty Percent or More Share or Controlling Shareholder**

Name SAME AS ABOVE Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Application modified 02-02-2023



The Party in escrow is a (if property is in escrow):

- Limited Liability Company (LLC)
- Partnership
- Corporation
- None of the above

**Information for LLC, Partnership, Corporation**

Name \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

State of Registration \_\_\_\_\_

**Managing member(s), General Partner(s) officer(s)**

Name \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Attach additional sheets if necessary

**Agent for Service of Process**

Name \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**For Corporations, Shareholder with Fifty Percent or More Share or Controlling Shareholder**

Name \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email \_\_\_\_\_


City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

For any deeds of trust or other liens on the property (other than real property tax liens) please state the following:

A. Name of beneficiary of the deed of trust or lien N/A

B. Date of the deed of trust or lien. N/A

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on the date and location set forth below.

Signature 

Print Name: SAMSON CHUA

Title: MANAGING PARTNER

Date of signing: 6/03/2024

Location: PASADENA, CA



## HAZARDOUS WASTE SITE STATEMENT

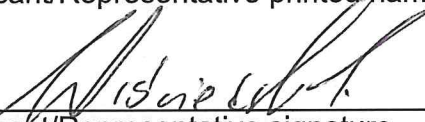
I have been informed by the Town of Yucca Valley of my responsibilities, pursuant to California Government Code Section 65962.5, to notify the Town as to whether the site for which a development application has been submitted is located within an area which has been designated as the location of a hazardous 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: 06/03/24

TOMASZ WISNIEWSKI  
Applicant/Representative printed name

  
Applicant/Representative signature