

Pre-Application

Date Received 6.11.2024
By EW
Fee #535.00
Case # ##################################
PA 04-23

General Information		*
APPLICANT David Martinez		Phone <u>630-544-1249</u>
Mailing Address 353 S Broadway Ste 300	Emaildmartinez@lr	na.la
City Los Angeles, CA, 90013	_State	Zip
		Phone 319-470-3112
Mailing Address 612 7th Street	_Email _kumarw94@gn	nail.com
City Fort Madison	_State _IA	Zip _52627
PROPERTY OWNER Skyline Ranch Holdings LLC	¥	Phone
Mailing Address 1321 Upland Drive #16654	Email _jtelliott4@gmai	il.com
City Houston	_StateTX	Zip
Project Information		
Project Address 55536 Santa Fe Trail, Yucca Valley, C	A 92284	
Assessor Parcel Number(s)058612212		
Project Location		*
Project Description: Conversion of an existing single story 6,000 square foot building for use as artists lofts. The scope will consist of four new units roughly corresponding to the current demising, with new kitchens, bathrooms, private outdoor space and new features to allow introduction of natural light.		
Please attach any additional information that is pertinen	t to the application.	

Applicant/Representative: I/We have reviewed this completed application and the at	tached material. The information included with
this application is true and correct to the best of my/our knowledge. I/Me further	

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: David Martinez

Name: 06/07/2024

Owner/Applicant Authorization

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:

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Manager Stayline Rain Hadings LLC

Name:

5-78-24

Date:

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	Di K
Applicants Name (Please print)	David Martinez
Date:	06/07/2024

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