





General Informat	ion				
APPLICANT David Martinez			Pho		ne 630-544-1249
Mailing Address	353 S Broadway #300				manifolds common man contra and to obtain a contra and
City Los Angeles					90013
REPRESENTATIVE					630-544-1249
	353 S Broadway ste 300	Email	-l		
City Los Angele	S	State	CA	Zip	90013
PROPERTY OWNER	Mott Franch				
Nailing Address 5240 Curtis Road		Email	matt@pioneertown-motel.com		
		State	CA	Zip _	92268
Project Information					
Project Address	55727 Twentynine Palms Highwa	ау			
Assessor Parcel Nu	mber(s)058634106, -07, & -08	annonnon annon annon annon anno	annannannannannannannannannannannannann		
Project Location	Southeast corner of Twentynine	Palms I	lighway an	d Fox Trail	gonosia i i i i i i i i i i i i i i i i i i
Project Description	: New mixed-use building included apartment in the open yard and Flea is located; work includes and the creation of a surface process. Fox Trail and Santa Fe Trail. For including widening of the pavernment.	ljacent to clearing carking I Road im	o the existing the walled- ot on the pa provements	g 1987 buil in courtyare arcel to the a are assum	ding where Moja d to build the pro south at the corn led on Santa Fe
Please attach any a	dditional information that is pertine	ent to the	application		

Owner/Applicant Authorization Applicant/Representative: I/We have reviewed this completed application and the attached material. The information included with this

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:

David Martinez

Date:

Name:

08/08/2024

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:

Matt French

Name:

08/08/2024

Date:

JO/00/2024

Town of Yucca Valley
Community Development Department
Planning Division
58928 Business Center Drive
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 24-07 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: \$ \$1,036

Applicant's Signature

Applicants Name (Please print)

Date: \$1,036

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