	CITY OF TURLOCK DEVELOPMENT SERVICES PLANNING DIVISION 156 SOUTH BROADWAY, SUITE 120 TURLOCK, CA 95380-5456 (209)668-5640 UNIFORM APPLICATION FORM (PLEASE PRINT OR TYPE)	Page 5 of 34
Project Information	PROJECT ADDRESS <u>3900</u> <u>Colarade</u> <u>Ave</u> Assessor's parcel NUMBER: <u>072</u> <u>Ave</u> existing ZONING: A RE RL RM RH CO CC CH CT I IBP PD <u>25</u> GENERAL PLAN DESIGNATION: A VLDR LDR MDB HDR O Comm Comm DESCRIBE THE PROJECT REQUEST: <u>36 month</u> <u>extension to a</u> <u>M'Coon Townhowse</u> <u>project</u>	Heavy Comm I
Applicant Information	NOTE: Information provided on this application is considered public record and will be released upon reques APPLIANT 1 TO M CCOM PHONENO. 4250 ** Corporate partnerships must provide a list of principals. FAX NO.	
Property Owner Info	PROPERTY OWNER: Danald & Dabia ME PHONE NO. 620-4250	
Office Use Only	APPLICATION TYPE & NO.: <u>VTSM_06-09_Time Ext</u> date received cashor chec checked by: pchearingdate: cc hearing date: planner'snotes:	

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PLEASE NOTE:

THIS APPLICATION FORM (ALONG WITH THE REQUIRED ATTACHMENTS AND EXHIBITS) IS MADE AVAILABLE TO THE PUBLIC ON THE CITY'S WEBSITE AND IN THE CITY'S FILES.

IF THERE IS SENSITIVE INFORMATION CONTAINED WITHIN THE APPLICATION, PLEASE CONTACT THE PLANNING DIVISION AT (209) 668-5640 BEFORE SUBMITTING THE APPLICATION.

APPLICATION QUESTIONNAIRE

This document will assist the Planning Department in evaluating the proposed project and its potential environmental impacts. Complete and accurate information will facilitate the review of your project and minimize future requests for information. Please contact the Planning Division, 156 S. Broadway, Suite 120, Turlock, CA 95380 (209) 668-5640 if there are any questions about how to fill out this form.

	PROJECT NAME: McCoon Townhiomes
	APPLICANT'S STATEMENT OF INTENT (DESCRIBE THE PROPOSED PROJECT): <u>36 month Time extension for approved</u> <u>Project</u>
	PROPERTY OWNER'S NAME: Donald & Dobla McCoon
	Telephone: Business <u>R(29) 6204250</u> Home(
	APPLICANT'S NAME: Donald & Debra McCoon -42
	Telephone: Business 709 620-425() Home(
	PROJECT SITE INFORMATION: Property Address or Location: <u>3900 Colorado Ave</u>
	Property Address of Location: $\underline{3900}$ ($\underline{5101200}$ $\underline{7402}$ Property Assessor's Parcel Number: $\underline{072-035}$ Property Dimensions: $\underline{6230'x 245'}$
	Property Area: Square Footage Acreage 3.42 @ Site Land Use: Undeveloped/Vacant Developed
ÇĮ.	If developed, give building(s) square footage

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LAND USE DESIGNATIONS:

ZONING:	Current:	
	Proposed (If applicable):	
GENERAL PLAN	Current	
	Proposed (If applicable)	

DESCRIBE ADJACENT ZONING AND EXISTING LAND USE WITHIN 300 FEET OF PROJECT SITE:

ZONE - EXISTING LAND USE (i.e., residential, commercial, industrial)

North_	Residential	
South_	Residential	
East	Residental	
West_	Residentia	

PROJECT CHARACTERISTICS Site Conditions

Describe the project site as it exists before the project, including information on topography, soil stability, plants and animals, and any cultural, historical or scenic aspects (if applicable)

Property is vacant except for One house

Are there any trees, bushes or shrubs on the project site? <u>yes</u> if yes, are any to be removed? <u>If yes to above, please attach site plan indicating location, size and type of all trees, bushes and shrubs on the site that are proposed for removal.</u>

No changes Ta approved project

If there are structures on the project site, attach site plan indicating location of structures and provide the following information:

Present Use of Exist	ing Structure(s)_	rend			
Proposed Use of Exi	isting Structure(s))			
Are any structures to be mo proposed to be moved or de		d?	_If yes, indicate on a	site plan which structures are	
Is the property currently und	der a Williamson	Act Contract?	if ye	es, contract number:	
If yes, has a Notice of	of Nonrenewal be	en filed?	If yes, date filed:		
	Are there any agriculture, conservation, open space or similar easements affecting the use of the project site? If yes, please describe and provide a copy of the recorded easement				
Describe age, condition, size		-	xisting on-site struc	tures (include photos):	
	Propos	ed Building C	<u>Characteristics</u>		
Size of any new structure(s)	or building addit	tion(s) in gross	sq. ft		
Building height in feet (mea	sured from groun	d to highest po	oint):		
Height of other appurtenanc mechanical equipmen	•	• •••••	ed from ground to h	ighest point (i.e. antennas,	
Project site coverage:	Building Cover	age:	Sq.Ft	%	
	Landscaped Ar	ea:	Sq.Ft	%	
	Paved Surface	Area:	Sq.Ft	%	
	Total:		Sq.Ft	100%	
Exterior building materials:					
Exterior building colors:					

Roof materials:				
Total number of of (If not on th	f-street parking space he project site, attach a	s provided: a Signed Lease Agreer	nent or Letter of Agenc	y)
Describe the type o	f exterior lighting pro	pposed for the project ((height, intensity):	
Building:				
Parking:				
Estimated Construc	ction Starting Date	Es	imated Completion Da	te
~ ~	-		ribe the phases and sho	w them on the site plan:
Total Lots		(As applicable to pro- $\pi \partial$ Chan UnitsTota	ects oposal) 9 eS al Acreage	
			Acre If yes, pleas	e describe:
	Single Family	Two-Family (Duplex)	Multi-Family (Apartments)	Multi-Family (Condominiums)
Number of Units				
Acreage				
quare Feet/Unit				
For Sale or Rent				
rice Range				
Type of Unit:				
Studio				
1 Bedroom				
2 Bedroom				

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				1 age 10 01 54
3 Bedroom				
4+Bedroom				
Ĩ				
		strial, Manufacturin as applicable to propos		
Type of use(s)	•	· · · ·		
Expected influence: R	RegionalCity	wideNeigh	ıborhood	
Days and hours of ope	eration:			
	city of building(s):			
Total number of fixed	seats:Tota	al number of employe	es:	
Anticipated number of	f employees per shift: _			
Square footage of:				
Office area		Warehouse are	ea	
Sales area				
Loading area_		Manufacturing	area	
Total number of visitors/customers on site at any one time:				
Other occupants (If Applicable)				
	involve any toxic or ha			
(Please explain	1):			
List any permits or app	provals required for the	projec ^t by state or fed	leral agencies:	

PROJECT IMPACTS (Please compute each specific impact issue per the following criteria)

TRAFFIC

no Changes

T 1 TT	West-law Tri Frid Conservation Dates (1000/Occ.)			
Land Use	Weekday Trip End Generation Rates (100%Occ.)			
Single Family	10.0 trips/dwelling unit			
Patio Homes/Townhomes	7.9 trips/dwelling unit			
Condominiums	5.1 trips/dwelling unit			
Apartments	6.0 trips/dwelling unit			
Mobile Homes	5.4 trips/dwelling unit			
Retirement Communities	3.3 trips/dwelling unit			
Motel/Hotel	11 trips/room			
Fast-Food Restaurant	553.0 trips/1,000 s.f. bldg. area			
Retail Commercial	51.3 trips/1,000 s.f. bldg. area			
Shopping Center	115 trips/1,000 s.f. bldg. area			
Sit-Down Restaurant	56 trips/1,000 s.f. bldg. area			
General Office	12.3 trips/1,000 s.f. bldg. area			
Medical Office	75 trips/1,000 s.f. bldg. area			
Institutions (Schools/Churches)	1.02 trips/student or 18.4 trips/1,000 s.f. bldg. area			
Industrial_Plant <500,000_s.f.	7.3 trips/1,000 s.f. bldg. area or 3.8 emp.			
Industrial Warehouse	5.0 trips/1,000 s.f. bldg. area or 4.2 emp.			
Desired Webiels This (Des (seine table ab				
Projected Vehicle Trips/Day (using table above):				
Projected number of truck deliveries/loading	s per day:			
Projected number of truck deliveries/loadings per day:				
Approximate hours of truck deliveries/loadin	gs each day:			
What we do not not in streets?				
what are the nearest major success.				
Distance from project?				
Amount of off-street parking provided:				
If new paved surfaces are involved, describe them and give amount of square feet involved:				
If now pavou surfaces are involved, describe ment and give amount of square for mivorved.				

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WATER

Land Use Single-Family Residential Multi-Family Residential Offices Retail Commercial Service Commercial/Industrial	Estimated Water Consumption Rates (gal/day) 800 gallons/day 800/3 bd unit; 533/2 bd unit; 267/1 bd unit 100 gallons/day/1,000 s.f. floor area 100 gallons/day/1,000 s.f. floor area Variable-[Please describe the water requirements for any service commercial or industrial uses in your project.]
Estimated gallons per day (using information	above):
Source of Water.	
<u>SEWAGE</u>	
Land Use Single-Family Residential Multi-Family Residential Commercial Office Industrial	Estimated Sewage Generation Rates (gal/day) 300 gallons/day/unit 200 gallons/day/unit or 100 gallons/day/resident 100 gallons/day/1,000 s.f. floor area 100 gallons/day/1,000 s.f. floor area Variable-[Please describe the sewage requirements for any industrial uses in your project.] (General projection= 2,500 gallons/day/acre)

Estimate the amount (gallons/day) sewage to be generated (using information above):

Describe the type of sewage to be generated:

Will any special or unique sewage wastes be generated by this development?

SOLID WASTE

Land Use Single-Family Residential Multi-Family Residential Commercial Industrial	Estimated Solid Waste Generation (lb/day) 10.96 lbs./day/res. 7.37 lbs./day/unit 50 lbs. /500 s.f. floor area Variable-[Please describe the projected solid waste to be generated by your project.]
Туре:	Amount:
AIR QUALITY	
Construction Schedule:	
Activity	Approximate Dates
Demolition	
Trenching	
Grading	
Paving	
Building Construction	
Architectural Coatings (includes painting)	
Total Volume of all Building(s) to be Demol Max Daily Volume of Building(s) to be Dem	lished
Total Acreage to be Graded	
Amount of Soil to Import/Export?	

Page 22 of 34 HAZARDOUS WASTE AND SUBSTANCE SITES LIST DISCLOSURE PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 65962.5(f)

"(f) Before a lead agency accepts as complete an application for any development project which will be used by any person, the applicant shall consult the lists sent to the appropriate city or county and shall submit a signed statement to the local agency indicating whether the project and any alternatives are located on a site that is included on any of the lists compiled pursuant to this section and shall specify any list. If the site is included on a list, and the list is not specified on the statement, the lead agency shall notify the applicant pursuant to Section 65943..."

Note: You must contact Stanislaus County Environmental Resources at (209) 525-6700; <u>AND</u> either: 1) Contact the Department of Toxic Substances Control at (800) 728-6942; or 2) research the property on <u>all</u> of the following online databases:

EPA RCRA: <u>https://www3.epa.gov/enviro/facts/rcrainfo/search.html</u> NEPAssist: <u>http://www.epa.gov/compliance/nepa/nepassist-mapping.html</u> California DTSC Envirostor: <u>www.envirostor.dtsc.ca.gov/public</u> California Geotracker: <u>http://geotracker.waterboards.ca.gov/</u> to determine whether there are any known or potential hazards on the property.

I HEREBY CERTIFY THAT:

THE PROJECT *IS LOCATED* ON A SITE WHICH IS INCLUDED ON ONE OR MORE OF THE LISTS COMPILED PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 65962.5(f). THE SITE IS INCLUDED ON THE FOLLOWING LIST(S) SPECIFIED BELOW:

Regulatory ID Number:

Regulatory ID Number:

Regulatory ID Number:

OR

THE PROJECT **IS NOT LOCATED** ON A SITE WHICH IS INCLUDED ON ONE OR MORE OF THE LISTS COMPILED PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 65962.5(f).

I HEREBY CERTIFY THAT THE STATEMENT FURNISHED ABOVE PRESENTS THE INFORMATION REQUIRED BY CALIFORNIA GOVERNMENT CODE 65962.5(f) TO THE BEST OF MY ABILITY AND THAT THE STATEMENT AND INFORMATION PRESENTED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Donald D. Mc Coon Print Name and Title of Applicant/Agent

209-620-42.50

Phone Number

PROPERTY OWNER/APPLICANT SIGNATURE:

I hereby certify that the facts, statements, and information presented within this application form are true and correct to the best of my knowledge and belief. I hereby understand and certify that any misrepresentation or omissions of any information required in this application form may result in my application being delayed or not approved by the City. I hereby certify that I have read and fully understand all the information required in this application form including:

- 1. the Hazardous Waste and Substance Sites List Disclosure Pursuant to California Government Code Section 65962.5(f) on page 22;
- 2. the Acknowledgments/Authorizations/Waivers starting on page 24; and
- 3. the Indemnification on page 26; and
- 4. the Department of Fish and Game CEQA Review Filing Fees on page 27.

Property Owner(s): (Attach additional sheets. as necessary)

Print Name and Title of Property Owner

620-4250

Phone Number

Applicant(s): (If different than above)

Signature of Applicant/Agent

Date

Print Name and Title of Applicant/Agent

Phone Number

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