

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)

	PROJECT ADDRESS: 3165 Humphrey Court, Turlock, CA & 3/35 Humphrey Co			
atio	ASSESSOR'S PARCEL NUMBER: 044 - 010 - 072/073 AREA OF PROPERTY (ACRES OR SQUARE FEET): 43,750 SF			
orm	EXISTING ZONING: PD-90 I			
t Inj	GENERAL PLAN DESIGNATION: I-PID			
Project Information	DESCRIBE THE PROJECT REQUEST: New Commercial warehouse buildings.			
<u>a</u>				
	NOTE: Information provided on this application is considered public record and will be released upon request by any member of the public.			
n l	APPLICANT Robert Fernandes / Azorean Capital Holdings PHONE NO. 209-495-0708 E-MAIL: robert@jfcinc.com			
atto	** Corporate partnerships must provide a list of principals. FAX NO. 209-634-2341			
orm	ADDRESS OF APPLICANT: PO Box 3520, Turlock, CA 95381			
t Inf	CONTACT PERSON (If different than applicant): *The applicant will be considered the primary point for all contact, correspondence, and billing from the City unless other arrangements are made in			
Appucant information	writing.			
ndd I	SIGNATURE OF APPLICANT PRINT NAME DATE			
	This fee is to be a deposit towards full cost of processing application. Yes No Applicant's Initials			
ī	Applicant's initials			
	Robert Fernandes / Azorean Capital PROPERTY OWNER: Holdings PHONE NO. 209-495-0708 E-MAIL: robert@jfcinc.com			
	ADDRESS OF PROPERTY OWNER: PO Box 3520, Turlock, CA 95381			
<u> </u>				
	APPLICATION TYPE & NO.: MDP 21-05 DATE RECEIVED: 31921			
	A-1			
2 2 ₁	CIBERED B1.			
. II				
	PLANNER'S NOTES:			
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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: Azorean Capital Holdings Humphrey II
APPI ICANTIS STATEMENT OF INTENT (DESCRIPE THE PROPOSED PROTECT)
APPLICANT'S STATEMENT OF INTENT (DESCRIBE THE PROPOSED PROJECT): Industrial Warehouse Rental
PROPERTY OWNER'S NAME: AZOREAN CAPITAL HOLDINGS
Mailing Address: PO Box 3520, Turlock, CA 95381
Telephone: Business (209) 495-0708 Home (209) 495-0709
E-Mail Address: robert@jfcinc.com
APPLICANT'S NAME: Robert Fernandes / Azorean Capital Holding
Phone (209) 495-0708
Address: PO Box 3520, Turlock, CA 95381
Telephone: Business (209) 495-0708 Home (209) 495-0709
E-Mail Address: robert@jfcinc.com
PROJECT SITE INFORMATION:
Property Address or Location: 3165 Humphrey Court, Turlock, CA # 3135 Humphrey Cr
Property Assessor's Parcel Number: 044-010-072 を つうろ
Property Dimensions: 175.00' x 250.00'
Property Area: Square Footage 43,750 Acreage 1 EACH
Site Land Use: Undeveloped/Vacant Yes Developed
If developed, give building(s) square footage

LAND USE DESIG	SNATIONS:	
ZONING:	Current:	BD-90 I
	Proposed (If applicable):	
GENERAL PLAN	Current:	Planned Industrial District
	Proposed (If applicable)	
DESCRIBE ADJAC SITE:	CENT ZONING AND EXIST	TING LAND USE WITHIN 300 FEET OF PROJECT
ZONE - EXI	STING LAND USE (i.e., resi	dential, commercial, industrial)
North Empty Lot		
South Empty Lot		
East Commercial		
West Commercial		
plants and animals, ar	Site	
If yes to above on the site that Will the project chang	e, please attach site plan indicate are proposed for removal.	site? No if yes, are any to be removed?ting location, size and type of all trees, bushes and shrubs quality or quantity, or alter existing drainage patterns?

If there are structures on the project site, attach site plan indicating location of structures and provide the following information: Present Use of Existing Structure(s) N/A Proposed Use of Existing Structure(s) N/A Are any structures to be moved or demolished? No If yes, indicate on site plan which structures are proposed to be moved or demolished. Is the property currently under a Williamson Act Contract? No_____ if yes, contract number: If yes, has a Notice of Nonrenewal been 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, and architectural style of all existing on-site structures (include photos): **Proposed Building Characteristics** Size of any new structure(s) or building addition(s) in gross sq. ft. ____(4) 8,000 Sq.Ft. Building height in feet (measured from ground to highest point): 21'-9" Height of other appurtenances, excluding buildings, measured from ground to highest point (i.e. antennas, mechanical equipment, light poles, etc.): Project site coverage: Building Coverage: Sq.Ft. % Landscaped Area: Sq.Ft. % Paved Surface Area: Sq.Ft. % Total: see attached site plan Sq.Ft. 100% Exterior building materials: Exterior building colors:

Roof materials: see attached project's description				
Total number of of (If not on the	f-street parking spaces ne project site, attach a	s provided: <u>see a</u> Signed Lease Agreer	ttached project's descriptent or Letter of Agenc	ption y)
Describe the type of exterior lighting proposed for the project (height, intensity):				
Building: see attached project's description				
Parking:	see attached projec	t's description		
Estimated Construc	ction Starting Date	7/1/21 Es	timated Completion Dat	te 2/1/22
If the proposal is a	component of an over-	all larger project desc	ribe the phases and show	w them on the site plan:
		Residential Proj (As applicable to pro		
Total Lots	Total Dwelling	UnitsTota	al Acreage	
Net Density/Acre_		Gross Density/A	Acre	
Will the project incl	lude affordable or seni	or housing provisions	? If yes, pleas	e describe:
	Single Family	Two-Family (Duplex)	•	Multi-Family (Condominiums)
Number of Units				
Acreage				
Square Feet/Unit				
For Sale or Rent				
Price Range				
Type of Unit:				
Studio				
1 Bedroom				
2 Bedroom				
3 Bedroom				
4+Bedroom				

Commercial, Industrial, Manufacturing, or Other Project (As applicable to proposal)

Type of use(s)					
Expected influence: Regional	_Citywide	Neighborhood			
Days and hours of operation:	Days and hours of operation:				
Total occupancy/capacity of building(s)	:				
Total number of fixed seats:Total number of employees:					
Anticipated number of employees per sl	nift:				
Square footage of:					
Office area	Warel	house area			
Sales area	Storag	ge area			
Loading area	Manu:	facturing area			
Total number of visitors/customers on si	ite at any one time:	:			
Other occupants (If Applicable)					
Will the proposed use involve any toxic or hazardous materials or waste?					
(Please explain):					
List any permits or approvals required fo	or the project by sta	ate or federal agencies:			

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

TRAFFIC

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		
	7.3 trips/1,000 s.f. bldg. area or 3.8 emp.		
	5.0 trips/1,000 s.f. bldg. area or 4.2 emp.		
Projected Vehicle Trips/Day (using table above): 90 for 16000 sq ft Projected number of truck deliveries/loadings per day: 3 Approximate hours of truck deliveries/loadings each day: 6 am - 8 pm			
Approximate nours of track deriveries/toading	s each day. O am - 8 pm		
What are the nearest major streets? Tegner Road			
Distance from project? 168 +/-			
Amount of off-street parking provided:			
If new paved surfaces are involved, describe them and give amount of square feet involved:			
see attached project's description			

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	on above)2500 gallons day
Source of Water City of Turlock	
SEWAGE	
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)
	2500 gallons day
Estimate the amount (gallons/day) sewage to 2500 gallons day	be generated (using information above):
Describe the type of sewage to be generated	Bathroom/hand sink
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.]
Type: Industrial	Amount: 225 lbs / day
AIR QUALITY Construction Schedule:	
Activity	Approximate Dates
Demolition	
Trenching	
Grading	7/1/21 - 7/15/21
Paving	8/1/21 - 8/15/21
Building Construction	9/1/21 - 2/1/22
Architectural Coatings (includes painting)	N/A
Total Volume of all Building(s) to be Demolis Max Daily Volume of Building(s) to be Demo	shed plished
Total Acreage to be Graded 1.0	
Amount of Soil to Import/Export? balanced	

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: https://www3.epa.gov/enviro/facts/rcrainfo/search.html
NEPAssist: http://www.epa.gov/compliance/nepa/nepassist-mapping.html

California DTSC Envirostor: www.envirostor.dtsc.ca.gov/public California Geotracker: http://geotracker.waterboards.ca.gov/

to determine whether there are any known or potential hazards on the property.

I HEREBY CERTIFY THAT:				
THE PROJECT <i>IS LOCATED</i> ON A SITE WHICH IS INCLUDED ON ONE OR MORE OF LISTS COMPILED PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 65962.5(f). SITE IS INCLUDED ON THE FOLLOWING LIST(S) SPECIFIED BELOW:				
Regulatory ID Number:				
Regulatory ID Number:				
Regulatory ID Number:				
OR				
THE LISTS COMPILED PURSUANT TO CALIF I HEREBY CERTIFY THAT THE STATEMENT REQUIRED BY CALIFORNIA GOVERNMENT	A SITE WHICH IS INCLUDED ON ONE OR MORE OF FORNIA GOVERNMENT CODE SECTION 65962.5(f). T FURNISHED ABOVE PRESENTS THE INFORMATION CODE 65962.5(f) TO THE BEST OF MY ABILITY AND N PRESENTED IS TRUE AND CORRECT TO THE BEST			
Signature of Applicant/Agent	Date			
Print Name and Title of Applicant/Agent	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 20;
- 2. the Acknowledgments/Authorizations/Waivers starting on page 22; and
- 3. the Indemnification on page 24; and

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

4. the Department of Fish and Game CEQA Review Filing Fees on page 26.

Signature of Property Owner	Date
Print Name and Title of Property Owner	DI DI I
Print Name and Title of Property Owner	Phone Number
Applicant(s): (TE J:SS	
Applicant(s): (If different than above)	
Signature of Applicant/Agent	Date
Print Name and Title of Applicant/Agent	Phone Number