

E

Type

14

Docs

0

Plans

SEP97-0520

Building Permit Number

5511

Street Number

Braehurst Ln

Street Name

HES

Community Code

062-130-003

APN

Application is hereby made to the Sonoma County Health Officer for a permit to construct or repair a sewage disposal system as described below in compliance with the code of Sonoma County or for clearance for other construction.

This permit application must be signed on all 3 signature lines by the same person (i.e., contractor or owner/builder). A letter of authorization from owner must accompany this application if agent is signing on owner's behalf.

APPLICANT: PLEASE PRESS HARD (USE BLACK INK). FILL IN BETWEEN HEAVY LINES ONLY AND SEE REVERSE SIDE FOR INSTRUCTIONS.

BLDG. PERMIT NO.
A

SDS PERMIT NO.
SEP 97
0520

DATE ISSUED
5/5/97

CLEARANCE

NEW

REPAIR

JOB ADDRESS 5511 BRAEHURST LN, Sebastopol 15472

NEAREST CROSS STREET BLANK & TURNER

ASSESSOR'S PARCEL NO. 062-130-003

SUBDIVISION LOT BLK
CITY SEBASTOPOL STATE CA ZIP 15472

SEWAGE DISPOSAL SYSTEM CONTRACTOR Jim Tunzi

ADDRESS 4505 ROBLER RD, Petaluma TEL 795-5001

GENERAL CONTRACTOR OWNER

OWNER'S NAME JAMES H. KANE

MAILING ADDRESS 5509 BRAEHURST LANE (55029)

CITY SEBASTOPOL STATE CA ZIP 95472 PHONE NUMBER 823-1075

INSTALLATION WILL SERVE:

RESIDENCE ☐ APARTMENT HOUSE ☐ COMMERCIAL ☐ MOBILE HOME ☐
MOTEL ☐ OTHER ☐ BUILDING CONST. NEW ☒ ADD/ALTER ☐
Relocated and UNIT = New-manufactured

WATER SUPPLY: PUBLIC ☐ PRIVATE ☒
LOT SIZE 4.75 ACRES
725' x 276' + 173' x (241')

TERMS OF PERMIT

1. HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SPECIALIST WILL BE NOTIFIED A MINIMUM OF 24 HOURS PRIOR TO COMMENCING WORK.
2. HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SPECIALIST AND ENGINEER'S OR CONSULTING ENVIRONMENTAL HEALTH SPECIALIST'S INSPECTION, WHEN INDICATED, WILL BE OBTAINED PRIOR TO COVERING THE SYSTEM.
3. THE JOB CARD AND A COPY OF THE APPROVED SEWAGE DISPOSAL SYSTEM DESIGN SHALL BE AVAILABLE AT THE JOB SITE AT ALL TIMES.
4. ANY DEVIATION FROM APPROVED PLAN WITHOUT PRIOR APPROVAL OF THE HEALTH OFFICER WILL BE CAUSE FOR STOPPING WORK UNTIL THE CHANGES ARE FULLY JUSTIFIED AND APPROVED.
5. THE SEPTIC TANK MUST BE I.A.R.M.O. APPROVED.
6. PRIOR TO AUTHORIZING OCCUPANCY OF ANY BUILDING WITH AN ENGINEER OR CONSULTING ENVIRONMENTAL HEALTH SPECIALIST DESIGNED SYSTEM, A SIGNED STATEMENT BY THE DESIGNER CERTIFYING THAT THE SYSTEM WAS INSTALLED IN COMPLIANCE WITH THE APPROVED PLAN MUST BE SUBMITTED TO THE PUBLIC HEALTH OFFICER.
7. THIS PERMIT IS SUBJECT TO REVOCATION IF FOUND TO BE IN NONCONFORMANCE WITH SONOMA COUNTY CODE OR STANDARDS OF THE PUBLIC HEALTH DEPARTMENT.
8. THIS PERMIT IS NOT TRANSFERABLE.

IT IS UNDERSTOOD THAT THE ISSUANCE OF A PERMIT IN NO WAY INDICATES THAT A GUARANTEE OF PERFECT AND INDEFINITE OPERATION OF THIS SYSTEM IS MADE BY THE COUNTY OF SONOMA PUBLIC HEALTH DEPARTMENT AND THAT THE OWNER IS REQUIRED TO MAKE ANY REPAIRS NECESSARY TO CONFINE SEWAGE BELOW THE SURFACE OF THE GROUND. APPROVAL IS BASED UPON INFORMATION SUBMITTED BY THE APPLICANT. FIELD CONDITIONS AT VARIANCE WITH APPLICATION MAY VOID PERMIT.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND THE INSTRUCTIONS ON THE REVERSE SIDE AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING CONSTRUCTION OF PRIVATE SEWAGE DISPOSAL SYSTEMS. THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS.

X James H. Kane

SIGNATURE OF APPLICANT

The undersigned applicant for private sewage disposal permit certifies as follows:

CONTRACTOR'S LICENSE LAW CERTIFICATE

☐ (COMPLETE EITHER A OR B)
A. THE APPLICANT IS LICENSED UNDER THE PROVISIONS OF THE CONTRACTORS LICENSE LAW UNDER LICENSE NUMBER

WHICH LICENSE IS IN FULL FORCE AND EFFECT.

☒ B. THE APPLICANT IS EXEMPT FROM THE PROVISIONS OF THE CONTRACTORS LICENSE LAW FOR THE FOLLOWING REASONS:

- 1) OWNER/BUILDER ☒
- 2) OTHER (EXPLAIN) ☐

4-25-97 X
DATE

James H. Kane
APPLICANT

WORKMEN'S COMPENSATION CERTIFICATE 1087 04/25/97B01

☐ (One or Two must be completed)
1. A currently effective certificate of Workmen's Compensation Insurance coverage is on file with the Sonoma County Public Health Department.

Compensation Insurance Policy # SIERRA

☒ 2. I certify that in the performance of the work for which this permit is issued I shall not employ any person in any manner so as to become subject to the workmen's compensation laws of California.

X James H. Kane
APPLICANT

3970520
\$636.00
\$636.00
\$636.00
\$0.00

LAYOUT PLAN
APPROVED BY

DATE 5-5-97

CONSTRUCTION
APPROVED BY

DATE 7-19-97

NEW SEPTIC SYSTEM APPLICATION FOR
REPLACEMENT SECOND UNIT 5511 BRAEHURST LANE (aka Blank Road)
Sebastopol, Sonoma County

APN 062-130-003
Project No. JF297-0027

4 - 24 - 97

James H. Kane 5509 Blank Rd. (aka Braehurst Lane) Sebastopol, 95472
Phone: 823-1075

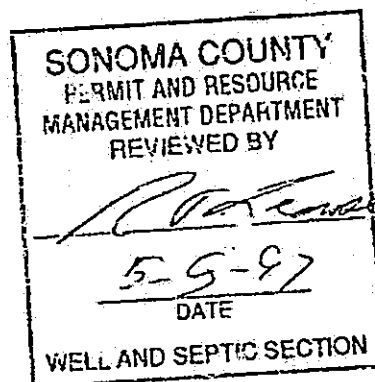
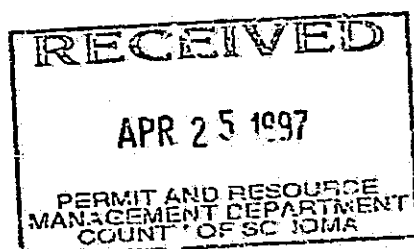
TANK SIZE 1500

LEACH TRENCH

LENGTH 210' WIDTH 24"

DEPTH 30" ROCK 12"

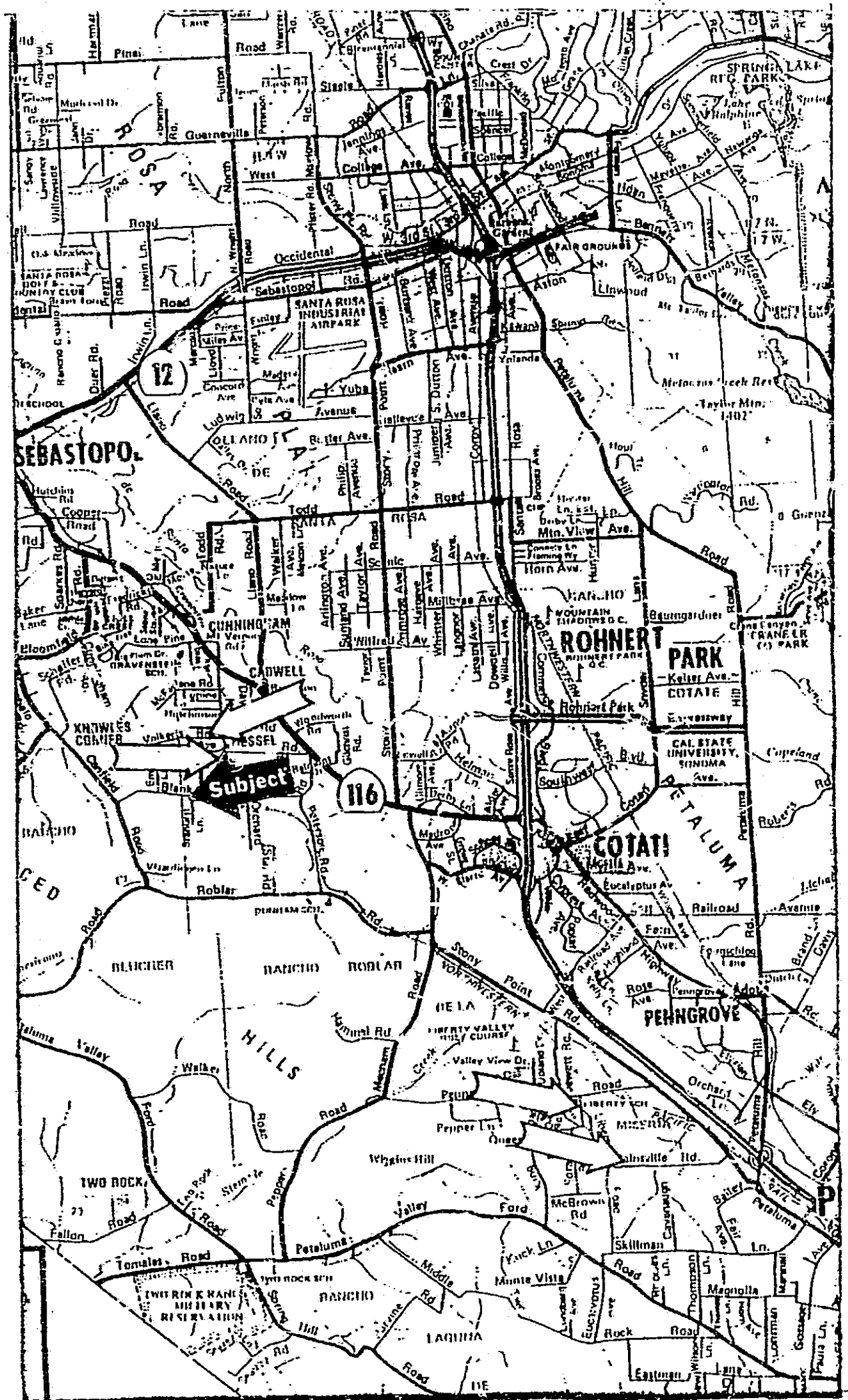
NO. OF BEDROOMS 2



Site of Relocated Second Unit

5511 BRAEHURST LANE, SEBASTOPOL, SONOMA COUNTY
(also known as: 5509-5511 Blank Road, Sebastopol)

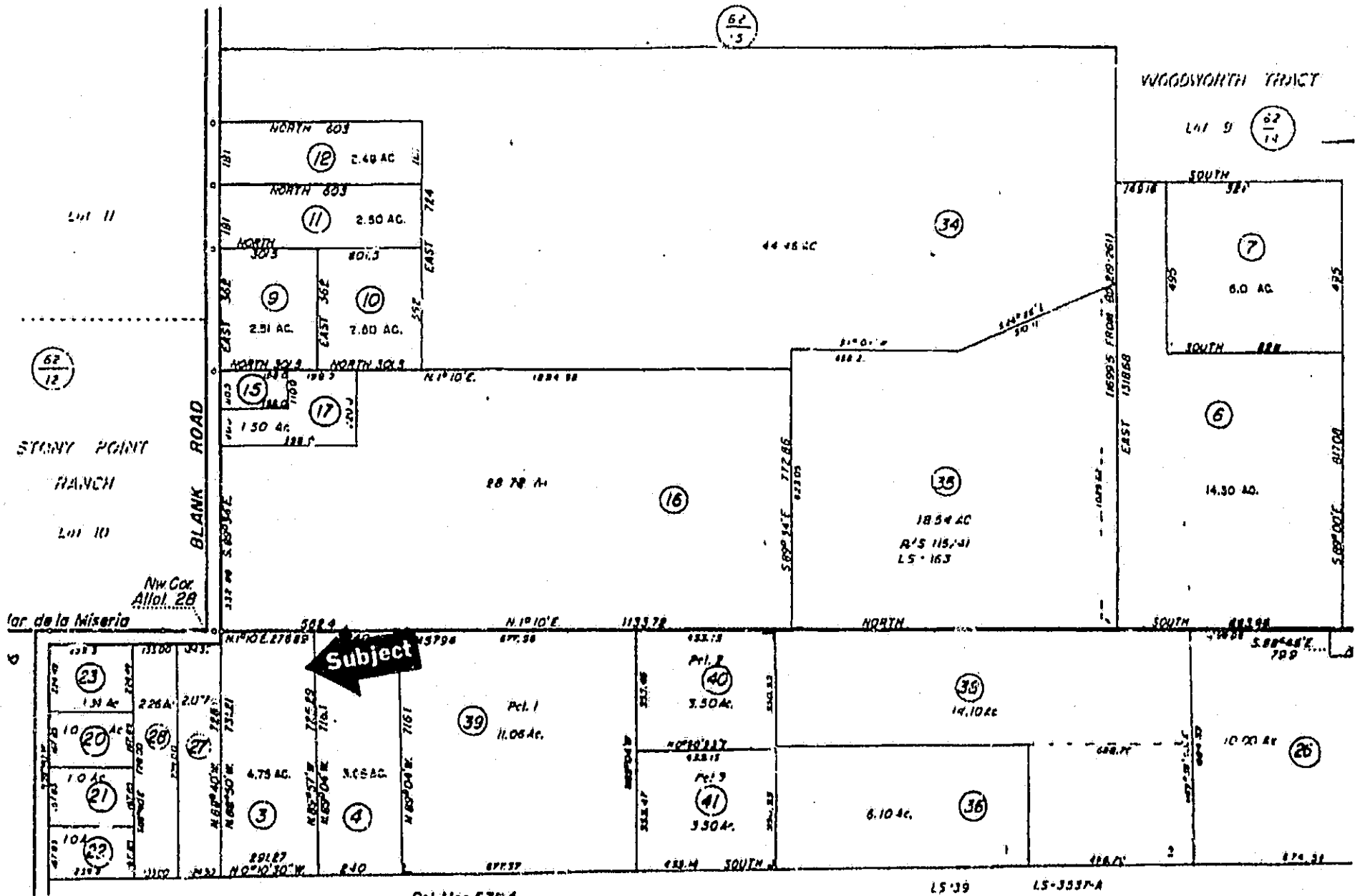
APN 062-130-003



COUNTY ASSESSOR'S PARCEL MAP

TAX CODE
90-01

Site of Relocated Second Unit
5511 BRAEKENST LANE, SEBASTOPOL, SONOMA COUNTY
(also known as: 5509-5511 Blank Road, Sebastopol)
APN 062-130-003



Pol. Map 579-A
By 253 Pg. 84 Rec. 6/16/77

NOTE: THIS MAP WAS PREPARED FOR
ASSESSMENT PURPOSES ONLY. NO
LIABILITY IS ASSUMED FOR THE

ASSISTANT

SITE PLAN PROPOSED REPLACEMENT SECOND UNIT
5511 Braehurst Lane, (aka Blank) Sebastopol
JAMES KANE
AP # 062-130-003

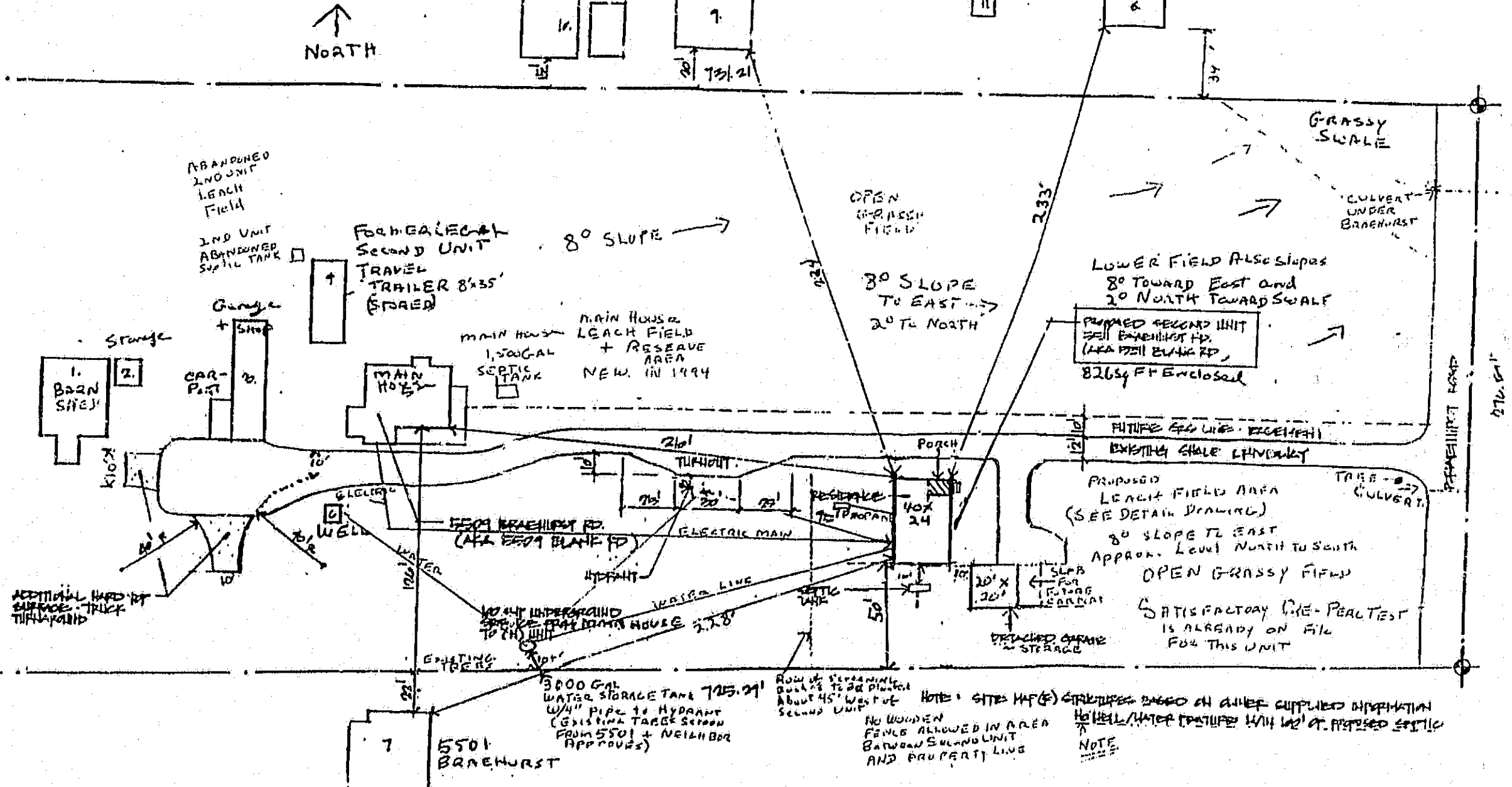
NEW SEPTIC SYSTEM APPLICATION FOR
REPLACEMENT SECOND UNIT 5511 BRAEHURST LANE (aka Blank Road)
Sebastopol, Sonoma County APN 062-130-003
4 - 24 - 97

REAR UNIT
5519

5517 BLANK
MIDDLE UNIT

5517
BLANK
FRONT

JAMES H. KANE
5509 BLANK ROAD
SEBASTOPOL, CA 95471
PHONE 823-1075

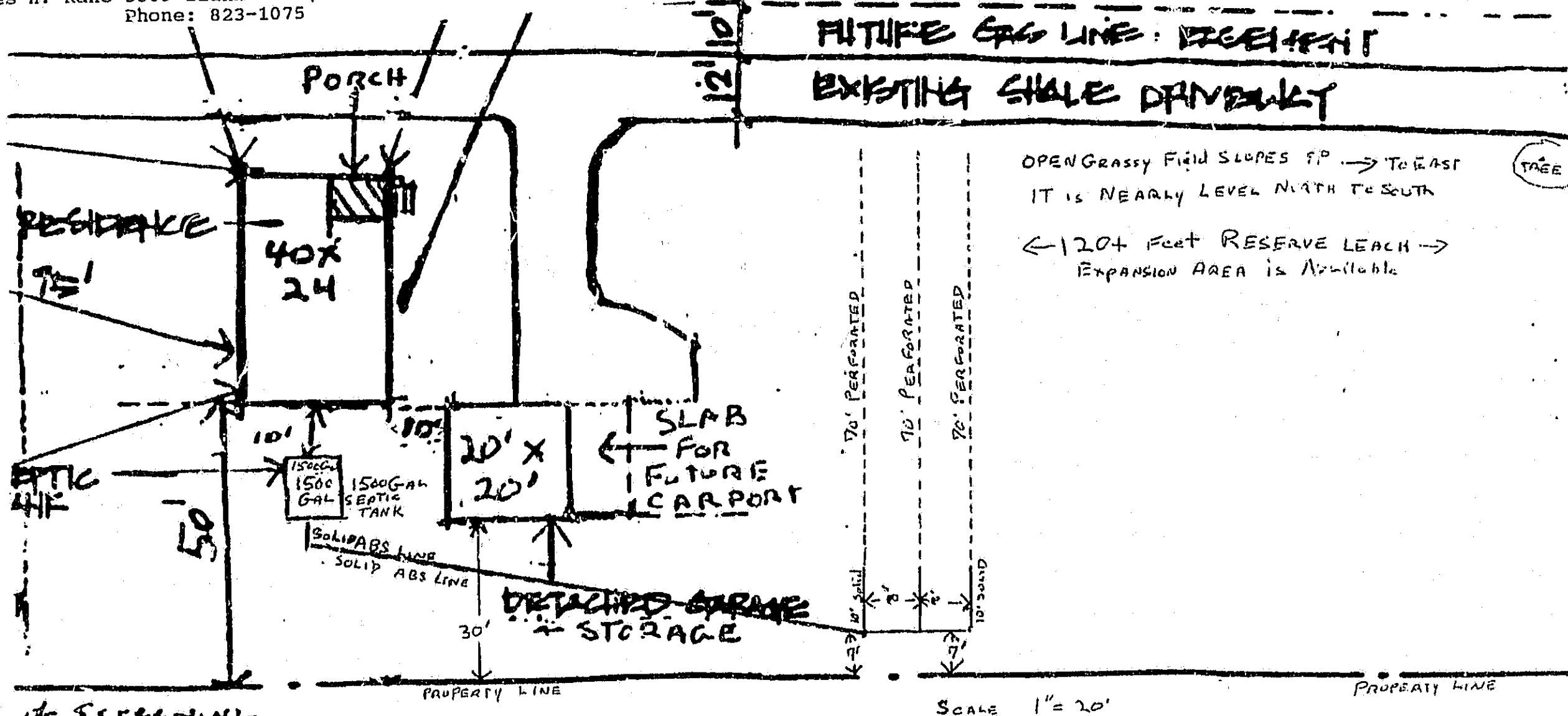


NOTE: SITE MAP(S) STRUCTURES BASED ON OWNER SUPPLIED INFORMATION
HOLE/WATER FEATURE WITH 10' OF PROPOSED SEPTIC
NOTE

826sq Ft Enclosed

NEW SEPTIC SYSTEM APPLICATION FOR
REPLACEMENT SECOND UNIT 5511 BRAEHURST LANE (aka Blank Road)
Sebastopol, Sonoma County APN 062-130-003
4 - 24 - 97
James H. Kane 5509 Blank Rd. (aka Braehurst Lane) Sebastopol, 95472
Phone: 823-1075

↑
NORTH



of screening
as to BE planter
at 45' west of
IND UNIT

NO WOODEN

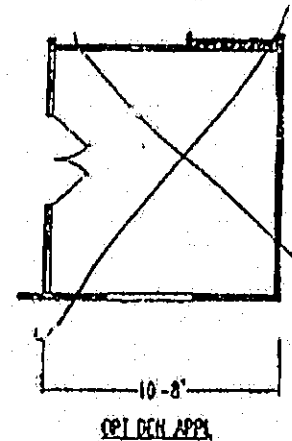
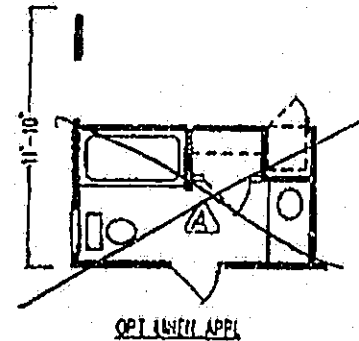
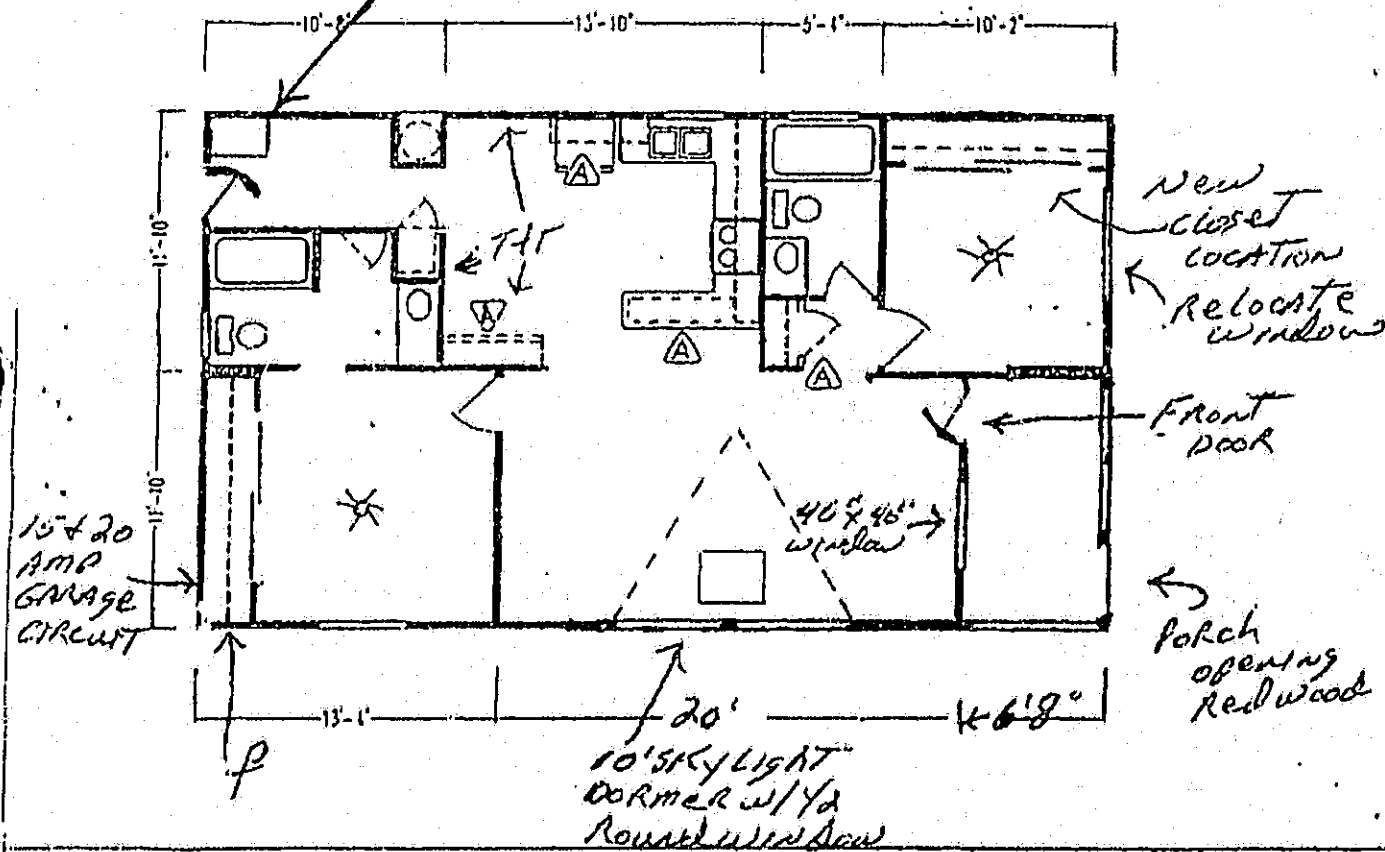
NOTE: SITE MAP (F) STRUCTURES BASED ON OWNER SUPPLIED INFORMATION
NO WELL/WATER FEATURES WITHIN 100' OF PROPOSED

NEW SEPTIC SYSTEM APPLICATION FOR
REPLACEMENT SECOND UNIT 5511 BRAEHURST LANE (aka Blank Road)

Sebastopol, Sonoma County APN 062-130-003
4 - 24 - 97

JAMES H. KANE
5509 BLANK ROAD
SEBASTOPOL, CA 95472-6109
PHONE 823-1075

(5) CAB. DOOR PANTRY-BROOM



▲ = ADVANTAGE PACKAGE

DIVISIONS			REVISIONS	DATE	BY	DESCRIPTION	SKYLINE	
NO.	DATE	BY					DRAWN BY	WFOF NO. (S)
111	341	652						
112	342	653						
113	343	654						
125	355	691						
131	520	612						
143	631							
165	535							
171	538							
181	539							

APR-10-1997 15:39

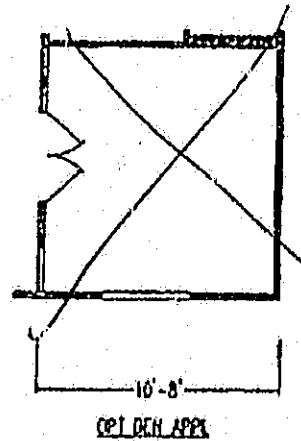
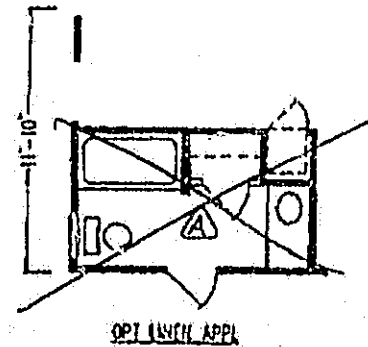
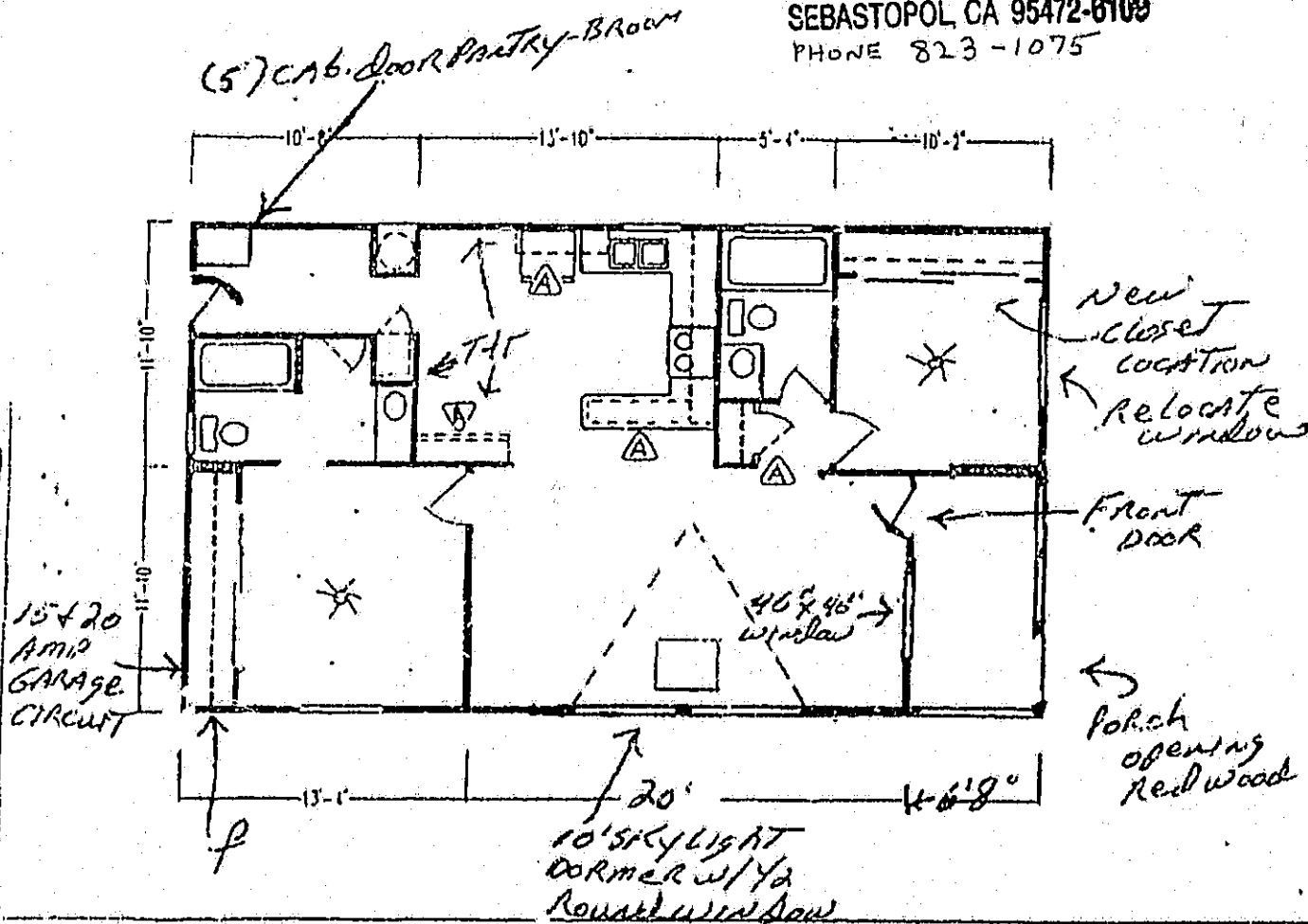
SKYLINES HOMES INC.

916 666 7962 P. 02/03

NEW SEPTIC SYSTEM APPLICATION FOR
REPLACEMENT SECOND UNIT 5511 BRAEHURST LANE (aka Blank Road);

Sebastopol, Sonoma County APN 062-130-003
4 - 24 - 97

JAMES H. KANE
5509 BLANK ROAD
SEBASTOPOL, CA 95472-8100
PHONE 823-1075



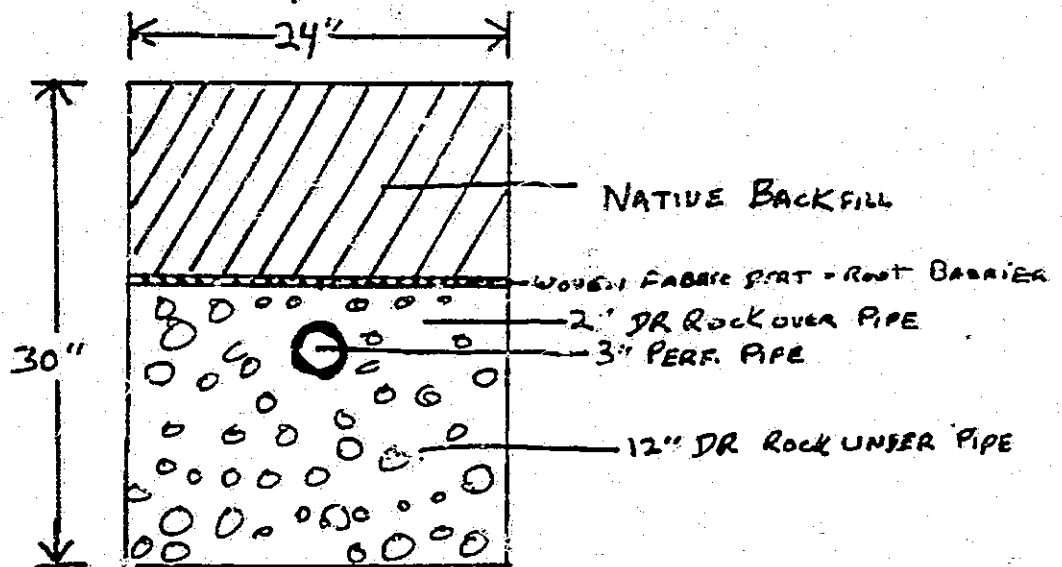
△ = ADVANTAGE PACKAGE

DIVISIONS			REVISIONS	DESCRIPTION	DATE	BY	SHEET	OF	DRAWING NUMBER
111	341	532							
112	344	533							
113	345	534							
125	353	539							
131	522	512		8 INCH FOR WITH ROOMS & LANE 20V	12/20/98	MR			
143	631			A UNIT OF RE-ENTRY		MR			
163	535			BOX LENGTH					
171	538								
191	539			10'-0"					
				1024-JCK-28-CAH					
							SKYLIGHT		
							DRAWN BY P J		WORD BOOK IS
							D. JEN/11/99		ROOF BRICK
							A902 JCI		

5511 BRAEHURST LANE, SEBASTOPOL, SONOMA COUNTY
(also known as: 5509-5511 Blank Road, Sebastopol)

APN 062-130-003

4-24-97 Plan for Septic Field of Relocated Second Unit



LEACH TRENCH

DETAIL

(NOT TO SCALE)

LOCATION OF SOIL PERCOLATION TEST HOLES AND PROFILE HOLES

See Richard T. Lease for his report on the Pre-perc. test of this field which he inspected and approved last year.

The test holes showed that this field has a consistent 30-32 inch layer of sandy top soil overlaying a layer of sandy clay more than six feet deep.

In staking out the tentative location of the leach lines, Septic System Contractor Jim Tunzi dug additional holes along the lines. These holes all confirmed the 30-32 inch depth of the sandy top soil.

USE PERMIT CONDITIONS

Zone 2 Water Avail.
Area

DATE:

3-18-97

TO:

Permit and Resource Management Department, Project Review Section, Planning

ATTN: Gail Davis

FROM:

Nancy Lingafeldt, R.E.H.S., Project Review Section, Health

PROJECT TYPE:

Use permit (second unit)

SUBJECT:

Project Address:

Project#: UPE 97-0027

Name: James H. Kane

AP# 062-130-003

Purpose:

Request a use permit to replace and relocate an existing legal non-conforming second unit with an 840 square foot unit on a 4.75 acre parcel.

The application has been reviewed by this Division (see x1 through x4).

x1) If the application is approved, it is recommended it be subject to the following circled conditions:

x2) Further information is needed before we can respond to the project.

FOR MARGINAL AND WATER SCARCE AREAS, ONE 3 AND ZONE 4:

A geological report prepared by a Registered Geologist, addressing Water Availability according to the General Plan requirements of RC-3h shall be submitted to the Project Review - Health Specialist prior to the discretionary decision.

x3) We can see no environmental health reason to deny this request.

x4) We recommend denial for the following reasons:

Water:

1. Connection shall be made to public sewer and water.

2. A safe, potable water supply shall be provided and maintained.

3. Provide this division with the bacteriological results of a sample of your water tested by a State-certified lab. If the analysis shows contamination, the applicant will be required to treat the well per County requirements and re-test the well.

4. Prior to the issuance of building permits or project operation, obtain a water supply permit or letter of clearance from the State Health Department, Office of Drinking Water for 15 or more connections, or the Division of Environmental Health for 5-14 connections. (This process should begin as soon as possible, as the application, plan check and sampling may take some time.)

5. Prior to the issuance of building permits or project operation, obtain a water supply permit or letter of clearance from the State Health Department, Office of Drinking Water if more than 25 persons per day in a 60 day period are served by the water system. (This process should begin as soon as possible, as the application, plan check and sampling may take some time.)

6. Proof of water availability must be submitted in accordance with Section 13 of the Sonoma County Code, Chapter 7. (Provide a 4-hour yield test that indicates a minimum of 1 gallon per minute/Provide an 8-hour yield test that indicates a minimum of 1 gallon per minute for each dwelling unit).

7. Abandon existing wells under permit from the Well and Septic Section of the Permit and Resource Management Department. This division may review a request to upgrade the well to current standards relating to setback's and annular well seals.

Septic:

8. All wastewater shall be discharged to a sewage disposal system that is designed by a Registered Civil Engineer or Registered Environmental Health Specialist. The design will/may require both soils analysis and percolation testing. The applicant's engineer shall design the system to meet peak flow discharge of the wastewater from all sources.

9. Application for wastewater discharge requirements shall be filed with the (the North Coast Regional Water Quality Control Board/the San Francisco Bay Regional Water Quality Control Board).
10. An analysis shall be made by a Registered Civil Engineer or Registered Environmental Health Specialist regarding the existing septic system's ability to accommodate the proposed sewage loading. Any necessary system expansion or modifications shall be done under permit from the Well and Septic Section of the Permit and Resource Management Department and may require both soils analysis and percolation testing.
11. Abandon existing septic tank(s) under permit and inspection from the Well & Septic Section of the Permit and Resource Management Department.
12. Toilet facilities shall be provided for patrons and employees.
13. The proposed second dwelling unit shall be provided with a septic system and septic system reserve area meeting current Permit and Resource Management Department standards. Adequate reserve area must remain available for the primary and the second dwelling unit.

Haz Mat:

14. Prior to the issuance of building permits, the applicant shall apply for an underground storage tank permit from the Certified Unified Program Agency (C.U.P.A.) or the participating agency. (An operational permit is required after tank installation./A closure permit is required if the tank is not in use.)
15. Prior to a Negative Declaration, a qualified consultant shall perform an environmental assessment to determine if hazardous materials have been used in the past and if any impacts have occurred through releases to the environment. A report shall be submitted to the appropriate State or County Agency for review and approval. Contact the State at San Francisco Regional Water Quality Control Board (510) 296-1255 or North Coast Regional Water Quality Control Board (707) 576-2220 or the County at Environmental Health (707) 525-6565. (Fees may apply for review.)
16. Prior to a Negative Declaration, a work plan for remediation of any hazardous materials shall be submitted by the applicant and approved by the appropriate State or County agency. (Fees may apply.)
17. Prior to a Negative Declaration, a risk assessment of the site's soil and/or groundwater contamination shall be completed by a qualified consultant and submitted to the appropriate State or County Agency for review and approval. Contact the State at San Francisco Regional Water Quality Control Board (510) 286-1255 or North Coast Regional Water Quality Control Board (707) 576-2220 or the County at Environmental Health (707) 525-6565. The assessment should include the length and types of exposure, the population at risk, and the potential health effects. (Fees may apply.)
18. If hazardous waste is generated or hazardous materials stored, then the applicant shall comply with hazardous waste generator laws and AB2185 requirements and obtain a permit or approval from the C.U.P.A. or the participating agency. (Additional information and fees may be required).
19. Applicant shall obtain approval from the North Coast Regional Water Quality Control Board/San Francisco Regional Water Quality Control Board for any hazardous materials stored in above ground tanks.

Consumer Protection:

20. Prior to the issuance of building permits, complete plans and specifications must be submitted to Environmental Health Division of the Health Services Department for review and approval for all areas where food and beverages are prepared, stored or handled and all ancillary facilities.
21. Prior to the issuance of building permits, complete plans and specifications must be submitted to Environmental Health Division of the Health Services Department for review and approval for all pools and/or spas and their related toilet and shower facilities.
22. Prior to operation, an annual Environmental Health Food Industry permit must be obtained for all food services and sales.
23. Prior to operation, an annual Public Pool Permit must be obtained for the pool(s) and/or spa(s).
24. Without prior written approval from Environmental Health, this use permit does not allow for food service or the consumption of food on site.

25. Any Special Events in which food or beverages are served shall have those services obtained from a permitted catering service.
26. Wholesale warehousing, food distribution or production operations shall obtain a permit from the State Department of Health Services at 50 "D" Street, Santa Rosa, CA. Prior to the issuance of building permits, complete plans and specifications must be submitted to the State Department of Health Services for review and approval.

Noise:

27. Noise barrier walls shall be constructed in accordance with the acoustic report by _____ of _____. The design and final construction of the barriers must be approved in writing by the acoustic consultant. Barrier height in relation to pad elevation must be certified by the project engineer.
28. Noise shall be controlled in accordance with the standards set in the Noise Element of the Sonoma County General Plan.

Solid Waste:

29. Applicant shall submit a design for trash enclosures for review and approval to Environmental Health. (Fees may apply.)
30. Trash containers shall meet the current standards of the State and County. Contact Environmental Health at (707) 525-6546 for requirements.

Medical Waste:

31. Facilities generating medical waste shall obtain approval/permits from Environmental Health prior to operation. Contact Environmental Health at (707) 525-6546 for requirements.

OTHER:

Please feel free to contact Nancy Lingafeldt at (707) 527-1683, between 7:30 a.m. and 9:00 a.m., Monday through Friday, should you have any questions on the above information.

cc: Rich Hease
Applicant



Received from Gail Davis 4-23-77

COUNTY OF SONOMA

PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA 95403
(707) 527-1900 FAX (707) 527-1103

Field Operations • Code Enforcement • Permits • Environmental & Comprehensive Planning

To: Interested Agencies

March 4, 1997

The following application has been filed with the Sonoma County Permit and Resource Management Department.

UPE 97-0027
JAMES H. KANE
5511 BRAEHURST LANE, SEBASTOPOL
A.P.N. 062-130-003

Request a use permit to replace and relocate an existing legal non-conforming second unit with an 840 square foot unit on 4.75 acres.

We are submitting the above application for your review and recommendation. Additional information is on file in this office.

Responses to referrals should include: (1) statement of any environmental concerns or uncertainties your agency may have with the project; (2) any comments you wish to make regarding the merits of the project; and (3) your proposed conditions and mitigations for this project. Responsible agencies under CEQA are requested to indicate whether permits will be required for this project.

Your comments will be appreciated by **March 18, 1997** and should be sent to the attention of **UPE 97-0027, Gail Davis.**

If no reply is received by the above mentioned date, it will be assumed that your agency has no concern on the environmental aspect of the project. Please send a copy of your comments to the applicant(s) or their representatives.

☐ County Surveyor
☒ Well & Septic ☐ E/H Consumer Prot. - Bob Herr
☐ Sanitation
☐ Land Development/Road
☐ Public Works - Land Dev/Road - John Kottage
☐ Ag Commissioner
☐ Flood & Drainage Review
☐ PRAC Planner
☐ General Plan Staff
☐ Northwest Information Center, S.S.U.
☐ Betty Guggolz, Native Plant Society
☐ Public Works - Transit
☐ Public Works - Traffic - Dave Wallace
☒ Building Inspection
☐ Army Corps of Engineers
☐ P.G. & E.
☐ Pacific Bell
☐ Sheriff - Crime Prevention
☐ LAFCO
☐ ALUC
☐ Board of Supervisors - Supervisor
☐ County Communications - Joe Perez

☐ Fire Marshall
☒ Fire District - Gold Ridge FPD
☐ School District -
☐ Santa Rosa School District
☐ Water District -
☐ State Coastal Commission
☐ Cal Trans (State)
☐ State Fish & Game
☐ State Department of Forestry
☐ State Department of Health
☐ State Parks and Recreation
☐ Regional Water Quality Control (Northern/Bay)
☐ Regional Air Pollution Control (Sonoma Co./Bay)
☐ Regional Parks Department
☐ City of _____ Dept.
☐ Alcohol Beverage Control
☒ Treasurer/Special Assessment
☒ Assessor
☐ Farm/Home Advisor U.C.C.E. - Rick Bennett
☐ Landmarks Commission
☐ Other:
☐ Other:



COUNTY OF SONOMA
PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA 95403
(707) 527-1900 FAX (707) 527-1103

Field Operations • Code Enforcement • Permits • Environmental & Comprehensive Planning

PLANNING APPLICATION

File #: UPE 97-0027 Date Filed: 2/21/97

Accepted By: SPS

TYPE OF APPLICATION REQUESTED:

☐ Appeal of Ord. Interp.	☐ Design Review Residential	☐ Major Subdivision	☐ Use Permit
☐ Cert. of Compliance	☐ Design Review Signs	☐ Minor Subdivision	☐ Variance
☐ Cert. of Modification	☐ General Plan Amendment	☐ Mobile Home Permit	☐ Zone Change
☐ Coastal Permit	☐ General Plan Appeal	☐ Parcel Status Determination	☐ Other
☐ Coastal Permit/Use Permit	☐ Lot Line Adjustment	☒ Second Unit Permit	☒ Replace Existing <u>LEGAL</u> <u>Second UNIT</u>
☐ Design Review Comm./Ind.	☐ Major Sub. Extension	☐ Specific Plan Amendment	

APPLICANT OR AGENT:

Name: James H. Kane
Mailing Address: 5509 BRADHURST
City/Town: SEBASTOPOL
State/Zip: CALIF 95472-6109
Phone: (707) 823-1075
Signature: James H. Kane
Date: 2-10-97

OWNER, IF OTHER THAN APPLICANT

Name: _____
Mailing Address: _____
City/Town: _____
State/Zip: _____
Phone: _____
Signature: _____
Date: _____

OTHER PERSONS TO BE NOTIFIED: Includes Agents, Lenders, parties to Deed of Trusts, Etc.

Name: <u>Letter of Approval</u>	Name: <u>Second Mortgage</u>	Name: _____
Address: <u>File From FIRST</u>	Address: <u>Bank Expanded</u>	Address: _____
City: <u>Marysville</u> Zip: <u>99901</u>	City: <u>To Dover</u> Zip: <u>Costa</u>	City: _____ Zip: _____
Title: _____ Phone: _____	Title: _____ Phone: _____	Title: _____ Phone: _____

PROJECT INFORMATION:

Address: 5511 BRADHURST City/Town: SEBASTOPOL Zip: 95472-6109
Assessor's Parcel Number(s): 062-130-002 Acreage: 4.75
Project Description: Replace Existing Small Legal Second Unit with MANUFACTURED House on perimeter concrete foundation AT A Different Location

Site Served by Public Water? (Y/N): N
Number of New Lots Proposed: 0

Site Served by Public Sewer? (Y/N): N

COMMERCIAL/INDUSTRIAL USES: (Enter Numbers where applicable)

Bldg. Sq. Ft. Proposed: _____ Existing Employees: _____ New Employees Proposed: _____

RESIDENTIAL USES: (Enter Numbers where applicable)

New Single Family Homes: 1 New Multi-Family Units: _____
New Mobile Homes: _____ New Units For Sale: _____ For Rent: X Density Bonus Units: _____
Replacement
(New Second Units: 2)

===== DO NOT WRITE BELOW THIS LINE =====

Staff Planner: _____ Planning Area: 6 Supervisorial District: 581 2
Current Zoning: AR B64 General Plan Land Use: RR 4
Specific Plan Title: _____ S.P. Land Use: _____ Needs CEQA Review: N
1975 Rolls Checked: ✓ Previous Files: 3336 21 94-236

PLANNING APPLICATION