### **USE PERMIT APPLICATIONS**

PJR-001 PLANNING APPLICATION

PJR-126 SUPPLEMENTAL APPLICATION

PJR-011 INDEMNIFICATION AGREEMENT

PJR-095 AT-COST PROJECT REIMBURSEMENT



# **Planning Application**PJR-001

Application Type(s):				File #				
Admin Cert. Compliance Design Review Admin.				☐ Minor Subdivision ☐ Use Permit				
Ag. or Timber Preserve/C				☐ Voluntary Merger ☐ Variance				
Conditional Cert. of Com	pliance		I Plan Amendmer				-	
☐ Cert. of Modification☐ Coastal Permit			e Adjustment Subdivision	Second Unit Permit Other:  Specific/Area Plan Amendment			Other:	
Zoning Permit for:		∐ IVIaj∪i ∪	UDUIVISION	<u></u> ∪ ореошол с	rea Platt Attiction	nent		
_			1.trana ml	· ··········il ·			· · · · · · · · · · · · · · · · · · ·	
and submitting it to S	By placing my contact information (name, address, phone number, email address, etc.) on this application form and submitting it to Sonoma County PRMD, I understand and authorize PRMD to post this application to the internet for public information purposes, including my contact information.							
			PRINT	CLEARLY				
	APPLICAN			•	IF OTHER THA		,	
Name Canyon Rock Compa		d owner of A	PN 083-210-018	8) Name Trappe Family Quarry LLC (owner of APN 083-210-017)				
Mailing Address PO BOX	639	т	<del></del> -	Mailing Address 7310 H	lwy 116	τ		
City Forestville	<del></del>	State CA	Zip 95436	City Forestville			Zip 95436	
Day Ph (707)887-2207	Email wtra	appe@jps.ne		Day Ph (707)887-2207	Email wtrapp			
Signature Windel Trippl		, CEO	Date 9/30/2022	Signature Windel Trupp	P	, President	Date 9/30/2022	
Billing Responsible Pa			<u> </u>	licant Owner	Other:			
				ECEIVE CORRESPON				
Name/Title Perry, Johnson, A	Anderson, M	liller & Mosk	owitz LLP	Name/Title Jon Trappe (	Name/Title Jon Trappe (Canyon Rock Quarry Operations Manager)			
Mailing Address 438 1st Stre	et			Mailing Address 7525 H	wy 116	•		
City Santa Rosa		State CA	Zip 95401	City Forestville		State CA	Zip 95436	
Day Ph (707)525-8800	Email perry	∕@perrylaw.n	net	Day Ph (707) 887-2207	Email jwtrapp	e@canyonrock	kinc.com	
			PROJECT	INFORMATION				
Address(es) 7525 Hwy 116					City Forestv	/ille		
Assessor's Parcel Number(s)	083-210-01	7 and 083-2	10-018					
Project Description Canyon Roo	-		-			-		
The asphalt plant structure would b								
Use Permit PLP97-0046 is proposed. Enuse to the existing quarry operation puru								
	an to coe	00-0-10(2)		Number of new lots proposed	· · · · · · · · · · · · · · · · · · ·	no uso caca	Hauon i ra	
Acreage 11.40								
Site Served by Public Water?								
TO BE COMPLETED BY PRMD STAFF								
Planning Area	Sur	pervisorial Dist	trict	Critical Habitat	Urban Service	Groundwater	r 🗌 1/2	
Current Zoning				NPDES	Williamson Act	Availability	3/4	
			Specific/Area Plan		Subject to	☐ EX		
General Plan Land Use F			Parcel Specific Policy CEQA YES					
Application resolve planning violation? Yes No			Violation? Yes No File No.					
Previous Files			Penalty application? Yes No					
Application accepted by				Date				
Approved by			1	Date				



**LLC-12** 

20-C16581

## **FILED**

In the office of the Secretary of State of the State of California

MAY 27, 2020

IMPORTANT — Read instructions before completing this form.

Filing Fee - \$20.00

Copy Fees - First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees

				1	This Space For O	ffice Use C	Only	
1. Limited Liability Company	/ Name (Enter the exact name of the	LLC. If you r	egistered in Califorr	nia using an a	alternate name, see ins	tructions.)		
TRAPPE FAMILY QUAR	RRY, LLC							
2. 12-Digit Secretary of State File Number 3		3. State,	State, Foreign Country or Place of Organization (only if formed outside of California)					California)
201301910034 CAL			FORNIA					
4. Business Addresses								
a. Street Address of Principal Office - 7525 HWY 116	Do not list a P.O. Box		City (no abbreviati			State CA	Zip C 954	ode 36-0000
b. Mailing Address of LLC, if different than item 4a 7525 HWY 116			City (no abbreviati			State CA	Zip C 9543	ode 36-0000
c. Street Address of <b>California</b> Office, if Item 4a is not in California - Do not list a P.O. Bo 7525 HWY 116			City (no abbreviations) FORESTVILLE			State CA	Zip C 954	ode 136-000
5. Manager(s) or Member(s)	If no <b>managers</b> have been appormust be listed. If the manager/man entity, complete Items 5b and has additional managers/member	ember is an ir 5c (leave Iter	ndividual, complete n 5a blank). Note:	Items 5a and The LLC car	d 5c (leave Item 5b bla nnot serve as its own n	nk). If the ma nanager or me	nager/r	nember is
a. First Name, if an individual - Do not	complete Item 5b		Middle Name		Last Name			Suffix
b. Entity Name - Do not complete Item Gwen A. Trappe Trust o	<sup>15a</sup> f 2012		1		l			ı
c. Address 7525 HWY 116			City (no abbreviati			State CA	Zip C 9543	ode 36-0000
6. Service of Process (Must p	provide either Individual <b>OR</b> Corporati	on.)						
INDIVIDUAL – Complete Item	s 6a and 6b only. Must include agent	t's full name a	nd California street	address.				
a. California Agent's First Name (if age	ent is <b>not</b> a corporation)		Middle Name		Last Name Serres			Suffix
b. Street Address (if agent is <b>not</b> a co	rporation) - Do not enter a P.O. Box		City (no abbreviati	ons)	Series	State	Zip C	ode
1000 Main St., 3rd Floor			Napa			CA		558
CORPORATION – Complete	Item 6c only. Only include the name	of the register	ed agent Corporatio	n.				
c. California Registered Corporate Age	ent's Name (if agent is a corporation) – E	o not complete	e Item 6a or 6b					
7. Type of Business  a Describe the type of business or se	rvices of the Limited Liability Company							
Quarry Business	. Troop of the Emmod Endamy Company							
8. Chief Executive Officer, if	elected or appointed							
a. First Name			Middle Name		Last Name			Suffix
b. Address			City (no abbreviati	ons)	•	State	Zip C	ode
9. The Information contained	d herein, including any attachm	nents, is tru	e and correct.			<u> </u>	l .	
05/27/2020 Wen	del Trappe		F	President				
Date Typ	pe or Print Name of Person Completing t	he Form		itle	Sig	nature		
	r communication from the Secretary oddress. This information will become					document ent	er the r	name of a
Name:			7					
Company:								
Address:								

City/State/Zip:



### Corporation - Statement of Information

Entity Name: CANYON ROCK CO., INC.

Entity (File) Number: C0676365

File Date: 02/08/2022
Entity Type: Corporation
Jurisdiction: CALIFORNIA

Document ID: H211146

### **Detailed Filing Information**

1. Entity Name: CANYON ROCK CO., INC.

2. Business Addresses:

 a. Street Address of Principal Office in California:

> Forestville, California 95436 United States of America

7525 Hwy 116

b. Mailing Address: 7525 Hwy 116

Forestville, California 95436 United States of America

c. Street Address of Principal

Executive Office: 7525 Hwy 116

Forestville, California 95436 United States of America

3. Officers:

a. Chief Executive Officer: Wendel Rae Trappe

7525 Hwy 116

Forestville, California 95436 United States of America

b. Secretary: Gwen Ann Trappe

7525 Hwy 116

Forestville, California 95436 United States of America Officers (cont'd):

c. Chief Financial Officer: Wendel Rae Trappe

7525 Hwy 116

Forestville, California 95436 United States of America

4. Director: Wendel Rae Trappe

7525 Hwy 116

Forestville, California 95436 United States of America

Number of Vacancies on the Board of

Directors:

0

5. Agent for Service of Process: Wendel T Trappe

7525 Hwy 116

Forestville, California 95436 United States of America

6. Type of Business: Manufacturing Quarry

No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code.

By signing this document, I certify that the information is true and correct and that I am authorized by California law to sign.

Electronic Signature: Wendel R Trappe

Use bizfile.sos.ca.gov for online filings, searches, business records, and resources.

# Supplemental Application Information PJR-126

Friedran and a francisco			*
Existing use of property	:		_
			_ Acreage:
Existing structures on p	roperty:		
Proximity to creeks, wat	terways and impoun	ndment areas:	
Vegetation on site:			
General topography: _			
Surrounding uses to	North:	South:	
(Note: An adjoining road is not a use.)	East:	West:	
New structures propose (size, height, type):			
		Part time: Se	
		Hours of operation:	
		Trucks:	
		Sewage disposal:	
		Provider, if applicable:	
New noise sources (compressors, power to	ools, music, etc.):		
than one acre be disturble excavation, building remactivities? Yes	bed by construction noval, building cons No If Yes, in	vds.): Amount of fill (cu. yds.): of access roads, site preparation and struction, equipment staging and main adicate area of disturbance(acres):, storm drain, outflow to creek or dito	d clearing, fill or tenance, or other
Vegetation to be remove	ed:		
Will proposal require an	nexation to a distric	ct in order to obtain public services: Y	'es No
Are there currently any processed on this site?	hazardous materials Yes	s (chemicals, oils, gasoline, etc.) storeNo	ed, used or
Will the use, storage, or project is authorized?	r processing of haza Yes	ardous materials occur on this site in t No	the future if this
Fire safety information (building materials, etc):		water tanks, hydrants, emergency acc	cess and turnaround,



## County of Sonoma Permit & Resource Management Department

#### INDEMNIFICATION AGREEMENT

**PJR-011** 

As part of this application, applicant agrees to defend, indemnify, release and hold harmless the County, its agents, officers, attorneys, employees, boards and commissions from any claim, action or proceeding brought against any of the foregoing individuals or entities, the purpose of which is to attack, set aside, void or annul the approval of this application or the adoption of the environmental document which accompanies it. This indemnification shall include, but not be limited to, damages, costs, expenses, attorney fees or expert witness fees that may be asserted by any person or entity, including the applicant, arising out of or in conjunction with the approval of this application, whether or not there is concurrent passive or active negligence on the part of the County. If, for any reason any portion of this indemnification agreement is held to be void or unenforceable by a court of competent jurisdiction, the remainder of the agreement shall remain in full force and effect."

Applicant Name:		
Applicant Signature:	Trappl	
Owner Name:		
Owner Name.		
Owner Name:Owner Signature:	roppl	
Date:		
File No.:		

NOTE: The purpose of the Indemnification Agreement is to allow the County to be held harmless in terms of potential legal costs and liabilities in conjunction with permit processing and approval.



# County of Sonoma Permit & Resource Management Department

#### AT COST PROJECT REIMBURSEMENT PJR-095

Project File:	; request for
I,	, the undersigned, hereby authorize the County of
Sonoma to process the above referenced pe	rmit request in accordance with the Sonoma County Code. I am
depositing \$	as a minimum deposit to pay for County staff review,
	o my permit request based on actual staff time expended and other owledge and understand that the deposit may only cover a portion
of the total processing costs. Actual costs f	or staff time are based on hourly rates adopted by the Board of
•	ounty fee schedule. I also understand and agree that I am he application is withdrawn or not approved.

I understand and agree to the following terms and conditions of this Reimbursement Agreement:

- 1. Time spent by County of Sonoma staff in processing my application and any direct costs will be billed against the available deposit. "Staff time" includes, but is not limited to, time spent reviewing application materials, site visits, responding by phone or correspondence to inquiries from the applicant, the applicant's representatives, neighbors and/or interested parties, attendance and participation at meetings and public hearings, preparation of staff reports and other correspondence, processing of any appeals, responding to public records act requests or responding to any legal challenges related to the application. "Staff" includes any employee of the Permit and Resource Management Department (PRMD), the Department of Transportation and Public Works and/or the Office of the County Counsel.
- 2. Staff will review the application for completeness and provide me with a good faith estimate of the full cost of processing the permit. This good faith estimate will be included in an At-Cost Fee Agreement The At-Cost Fee Agreement shall be signed by the party responsible for payment of fees, and the requested additional deposit shall be submitted to PRMD to allow continued processing of the project.
- 3. If processing costs exceed the available deposit, I will receive quarterly invoices payable within 30 days of billing.
- 4. I understand that the County desires to avoid incurring permit processing costs without having sufficient funds on deposit. If staff determines that inadequate funds are on deposit for continued processing, staff shall notify me in writing and request an additional deposit amount estimated necessary to complete processing of my application. I agree to submit sufficient funds as requested by staff to process the project through the hearing process within 30 days of the request.
- 5. If the final cost is less than any additional deposits requested by the County (deposits that exceed the initial minimum deposit described above), the unused portion of the additional deposit will be refunded to me within 60 days of final project action.
- 6. If the final cost is more than the available deposit, I agree to pay the difference within 30 days of billing.
- 7. If I fail to pay any invoices or requests for additional deposits within 30 days, the County may either stop processing my permit application, or after conducting a hearing, deny my permit application If I fail to pay any invoices after my application is approved, I understand that my permit may not vest and may expire, or may be subject to revocation.

2550 Ventura Avenue, Santa Rosa, CA 95403-2829 (707) 565-1900

- 8. If the County determines that any study submitted by the applicant requires a County-contracted consultant peer review, I will pay the actual cost of the consultant review. This cost may vary depending on the complexity of the analysis. Selection of any consultant for a peer review shall be at the sole discretion of the PRMD Director or his designee. The estimated cost of the peer review shall be paid prior to the County initiating any peer review by consultant.
- 9. I agree to pay the actual cost of any public notices for the project as required by State Law and Local Ordinance.
- 10. I may, in writing, request a further breakdown or itemization of invoices, but such a request does not alter my obligation to pay any invoices in accordance with the terms of this agreement.
- 11. I agree to pay all costs related to permit condition compliance as specified in any conditions of approval for my permit/entitlement.

Note: This agreement does not include other agency review fees or the County Clerk Environmental Document filing fees.

Name of Property Owner or Corporate Principal Responsible or Appointed Designee for Payment of all County Processing Fees (*Please Print*):

Name of Company or Corporation (if applicable):

Mailing Address of the Property Owner or Corporation/Company responsible for paying processing fees:

If a Corporation, please attach a list of the names and titles of Corporate officers authorized to act on behalf of the Corporation

Signature	Windel Troppl	
Date		
Email Address _		
Phone Number		

\*ATTENTION - The property owner (or Corporate principal) will be held responsible for all charges.

2550 Ventura Avenue, Santa Rosa, CA 95403-2829 (707) 565-1900 Version: 02/16/2020