

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 Information	PROJECT ADDRESS: 2247 Mentagen De. ASSESSOR'S PARCEL NUMBER: 089 - 020 - 010 AREA OF PROPERTY (ACRES OR SQUARE FEET): EXISTING ZONING: A RE RL RM RH CO CC CH CT I IBP PD 257 Downtown GENERAL PLAN DESIGNATION: A VLDR LDR MDR HDR O Comm Comm Heavy Comm I DESCRIBE THE PROJECT REQUEST:	ų
	NOTE: Information provided on this application is considered public record and will be released upon request by any APPLICANT Day Motora PHONE NO. 209 5353672-MA	
Applicant Information	150 15 50 50 to deposit to mando fain cost of processing application, 1 co 140 Applicant 5 Initials	
Property Owner Info		
e Use Only	APPLICATION TYPE & NO : MAA 18-07 DATE RECEIVED: 5/24/8 CHECKED BY: PC HEARING DATE: CC HEARING DATE: PLANNER'S NOTES:	
\dashv		

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: Lifted fitness	
APPLICANT'S STATEMENT OF INTENT (DESCRIBE THE PROPOSED PROJECT): The intent of the project is to have a gym for personal and group training. Operating between the hours of 6 am and 9 pm.	
PROJECT SITE INFORMATION:	
Property Address or Location: 2747 Maryan 7.	
Property Assessor's Parcel Number:	
Property Dimensions: 3,3 acres	
Property Area: Square FootageAcreage	
Site Land Use: Undeveloped/VacantDeveloped	
If developed, give building(s) square footage 1740	

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; AND either: 1) Contact the Department of Toxic Substances Control at (800) 728-6942; or 2) research the property on all 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 HEDERY CEDTIEV THAT.

HEREDI CERTIFI HIAI.	
THE PROJECT <i>IS LOCATED</i> 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:	IE IE
Regulatory ID Number:	
Regulatory ID Number:	
Regulatory ID Number:	
OR /	
THE PROJECT <i>IS NOT LOCATED</i> ON A SITE WHICH IS INCLUDED ON ONE OR MORE OF THE LISTS COMPILED PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 65962.5(f).	F
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	D

I R OF MY KNOWLEDGE AND RELIEF

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)



Lifted Fitness Daily Schedule

Monday-Friday

5am-7am Group Classes consisting of no more than 16

8am-5pm Personal and Small group training of no more than 3

5pm-9pm Group Classes consisting of no more than 16

Saturday- Sunday

9am-4pm Personal and Small group training of no more than 10