



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: 673 West Main St Turlock CA

ASSESSOR'S PARCEL NUMBER: 0610-14064000 AREA OF PROPERTY (ACRES OR SQUARE FEET): Lot Size 10,200 sq ft

EXISTING ZONING: RL Retail Commercial

GENERAL PLAN DESIGNATION: LDR

DESCRIBE THE PROJECT REQUEST: \_\_\_\_\_

Applicant Information

NOTE: Information provided on this application is considered public record and will be released upon request by any member of the public.

APPLICANT Susana Avalos PHONE NO. 209) 416 7871 E-MAIL: SUSYSWORK.82@gmail.com

Property Owner Info

Office Use Only

APPLICATION TYPE & N

DATE RECEIVED: 2/27/2020

CASH

CHECKED BY: js

PC HEARING DATE: \_\_\_\_\_

CC HEARING DATE: \_\_\_\_\_

PLANNER'S NOTES: \_\_\_\_\_

## 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:** 673 West Main St Turlock

**APPLICANT'S STATEMENT OF INTENT (DESCRIBE THE PROPOSED PROJECT):**

673 West Main St Turlock Beauty salon

**PROPERTY OWNER'S NAME:** Susana Avalos

Mailing Address: 1506 Placer Av Modesto CA 95358

Telephone: Business (209) 581-9518 Home (209) 416-7871

E-Mail Address: SUSANWORK.82@gmail.com

**APPLICANT'S NAME:** Susana Avalos

Phone (209) 416-7871

Address: 1506 Placer Av Modesto CA 95358

Telephone: Business (209) 581-9518 Home (209) 416-7871

E-Mail Address: SUSANWORK.82@gmail.com

**PROJECT SITE INFORMATION:**

Property Address or Location: 673 West Main St Turlock CA

Property Assessor's Parcel Number: 661014064000  
68x155'

Property Dimensions: Building size 1917 sq ft Lot size 10,200 sq ft  
1,772 sq ft interior

Property Area: Square Footage \_\_\_\_\_ Acreage 0.21 AC

Site Land Use: Undeveloped/Vacant \_\_\_\_\_ Developed \_\_\_\_\_

If developed, give building(s) square footage \_\_\_\_\_

**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](http://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 ***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: \_\_\_\_\_

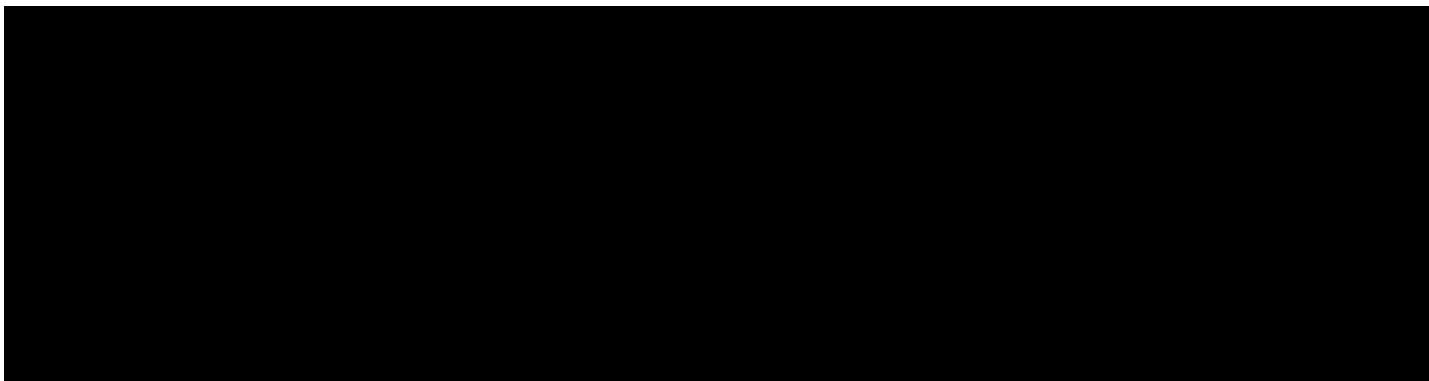
Regulatory ID Number: \_\_\_\_\_

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.



**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.]

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Type: \_\_\_\_\_ Amount: \_\_\_\_\_

**AIR QUALITY***Construction Schedule:*ActivityApproximate Dates

Demolition

\_\_\_\_\_

Trenching

\_\_\_\_\_

Grading

\_\_\_\_\_

Paving

\_\_\_\_\_

Building Construction

\_\_\_\_\_

Architectural Coatings (includes painting)

\_\_\_\_\_

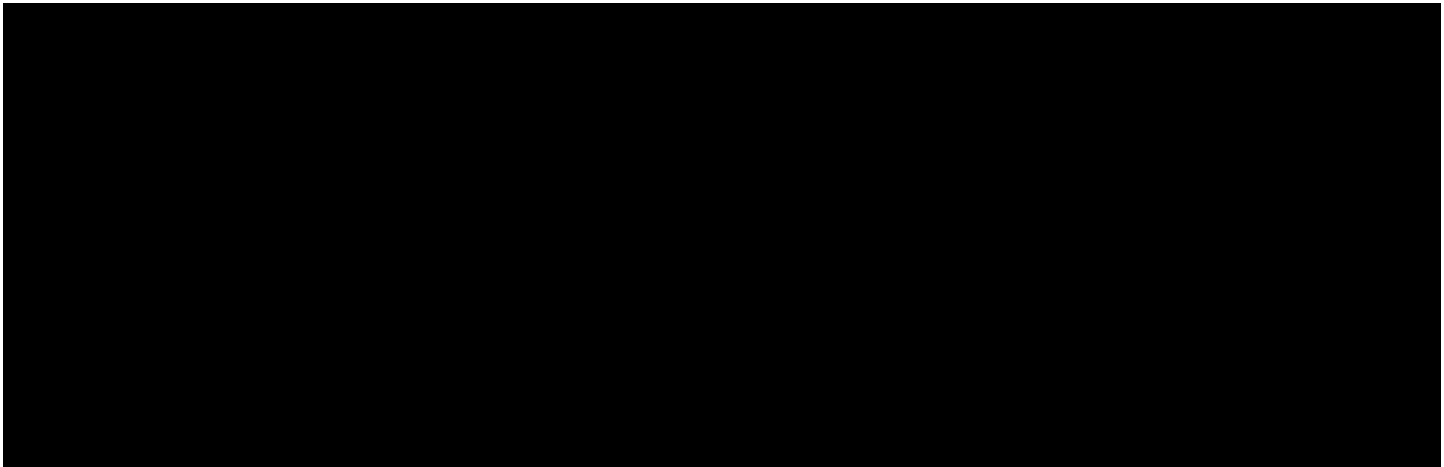
*Total Volume of all Building(s) to be Demolished* \_\_\_\_\_*Max Daily Volume of Building(s) to be Demolished* \_\_\_\_\_*Total Acreage to be Graded* \_\_\_\_\_*Amount of Soil to Import/Export?* \_\_\_\_\_

**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)



**Applicant(s):** (If different than above)

\_\_\_\_\_  
Signature of Applicant/Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name and Title of Applicant/Agent

\_\_\_\_\_  
Phone Number

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