City of El Segundo

Planning and Building Safety
350 Main Street
El Segundo CA 90245
(310) 524-2344; FAX (310) 524-4167
www.elsegundo.org

APPLICATION FOR A SMOKY HOLLOW SPECIFIC PLAN SITE PLAN REVIEW APPLICATION

Environmental Assessment No.: _____ **Smoky Hollow Specific Plan Site Plan Review No.:** _____

Date: _____

Applicant:

Name (print or type)	**Phone**	**Fax**
Address	**Email**	
City/St/Zip	**Signature**	

Check One: **Owner** ☐ **Lessee** ☐ **Agent** ☐

Property Owner:

Name (print or type)	**Phone**	**Fax**
Address	**Email**	
City/St/Zip	**Signature**	

Representative of applicant: **(i.e., attorney, expeditor, etc.)**

Name (print or type)	**Phone**	**Fax**
Address	**Email**	
City/St/Zip	**Signature**	

Architect/Engineer:

Name (print or type)	**Phone**	**Fax**
Address	**Email**	
City/St/Zip	**Signature**	

Property situated at: _____
(Exact legal description. Provide attachment, if necessary.)

General location: _____ **between** _____
Address (Street/Avenue) **Street/Avenue**

Existing Zoning: _____ **Requested Zoning:**

General Plan Land Use Designation: _____

El Segundo Municipal Code Section(s) Relating To Request: _____

Request: Under the provisions of Title 15 of the Municipal Code, application for consideration of a Specific Plan for the above described property.

1. Describe in detail the entire proposed project (type of construction, materials to be used, uses involved (e.g., bank, general office, industrial, restaurant, etc.) including buildings and other equipment necessary to the project.

_____

_____

_____

_____

2. Describe the existing development on the site. Include square footages and uses of each building on the site.

3. Explain in detail why this particular site is especially suited for the proposed development.

4. Describe how the proposed project will compare/contrast to the development of adjacent properties and the immediate area and will not have detrimental effects to the adjacent properties or neighborhood. How will potential impacts be mitigated?

5. Describe the technological processes and equipment employed on-site and their compatibility with existing and potential land uses within the general area.

6. Please indicate if you are requesting implementation of a Floating Zone (GAC or MDR), which one, and how the requested is consistent with the Smoky Hollow Specific Plan Goals, Policies, and Objectives and the Design Guidelines.

NOTE: Separate Affidavits must be submitted if there are multiple owners.

OWNER'S AFFIDAVIT

I, We _____ being duly sworn depose and say that I/we am the **OWNER** of the property involved in this application and that I/we have familiarized myself (ourselves) with the rules and regulation of the City of El Segundo with respect to preparing and filing this application and that the foregoing statements herein contained and the information documents and all plans attached hereto are in all respects true and correct to the best of my/our knowledge and belief.

_____ _____ 20 __
Signature Date

STATE OF CALIFORNIA,)
County of Los Angeles)ss.

On this _____ day of _____ 20 _____ , before me, the undersigned Notary Public in and for said County and State, personally appeared _____ known to me to be the person whose name _____ subscribe to the within instrument, and acknowledged to me that he/she executed the same.

WITNESS my hand and official seal.

_____
Notary Public in and for said County and State

AGENT AUTHORIZATION

I hereby authorize _____ to act for me/us in all matters relevant to this application. I understand that this person will be the exclusive contact on the project and will be sent all information and correspondence.

_____ _____ 20 ___
Owner's Signature

AGENT AFFIDAVIT

I, We _____ being duly sworn depose and say that I/we am the **AGENT** of the property involved in this application and that I/we have familiarized myself (ourselves) with the rules and regulation of the City of El Segundo with respect to preparing and filing this application and that the foregoing statements herein contained and the information documents and all plans attached hereto are in all respects true and correct to the best of my/our knowledge and belief.

_____ _____ 20 ___
Signature Date

STATE OF CALIFORNIA,)
County of Los Angeles)ss.

On this _____ day of _____ 20 _____ , before me, the undersigned Notary Public in and for said County and State, personally appeared _____ known to me to be the person whose name _____ subscribe to the within instrument, and acknowledged to me that he/she executed the same.

WITNESS my hand and official seal.

_____
Notary Public in and for said County and State

Procedures for filing application

1. Submit the properly completed application to the office of the Planning Division. Signature of the owner, owners, lessee, and/or agent shall be notarized before a Notary Public.

2. File application property completed in the office of the Planning and Building Safety Dept. along with completed Initial Study Applicant Questionnaire. Signature of the owner/owners, lessee (if applicant), and/or agent shall be required on all applications.

3. Applicant shall provide all information, drawings, and other materials as requested by the Planning Department as indicated.

4. Pay filing fee. (see fee schedule)

5. Applicant and affected property owners will be notified of time of hearing.

6. Applicant must be present at the hearing and may offer additional evidence to support his/her support.

7. There shall be an additional fee for filing an appeal.

8. A map of all properties within a 300-foot radius of the subject property, keyed to a list of names and address of the current property owner(s). Planning Staff can assist in the preparation of the radius map. The names and addresses of the property owner(s) can be obtained by contacting: Los Angeles County Assessors Office, 6120 Bristol Parkway, Culver City, CA 90230. Telephone Number: (310) 665-5300.

9. Certification that the names and addresses provided are those of the property owner(s) currently listed in the latest available Tax Assessor's records. (Your hearing may be delayed if an excessive number of notices are returned).

10. Unaddressed business envelopes with no return address, stamped with first class postage, of sufficient number to contact every property owner within the 300-foot radius map. The subject property owner(s), the applicant(s), and any other interested party which the applicant wants notified (sufficient for two mailings).

11. Two sets of adhesive mailing labels and one copy of a list of names and addresses, both keyed into The radius map in item #1 with the names and addresses of every person indicated in item #3.

12. Provide eight (8) sets of plans (site plans, floor plans, and elevations), preliminary title report (new construction only), and all other information request by the Planning Division. All plans must be folded to a maximum of 8 ½" x 11".

13. Signature page of application must be notarized, as noted on the fee schedule.

14. Fish and Game Document Handling fee - $50.00 (all projects). County of Los Angeles Public Hearing Notice posting fee - $50.00 (for projects with an Initial Study and Negative Declaration. Mitigated Negative Declaration, or Environmental Impact Report. Not required for projects which are exempt from CEQA). Two separate checks, each made payable to the County of Los Angeles.

15. Any other information as determined necessary by the Director of Planning and Building Safety.
16. Applicant will be notified within five (5) working days as to the completeness of application.

17. Applicant must be present at the hearing and may offer additional evidence to support his/her request.

18. There shall be an additional fee for filing an appeal.

19. The Director of Planning and Building Safety will approve or deny the application within ten (10) working days from the date the application is deemed complete.

20. The Director's decision will be set for the next available agenda of the Planning Commission meeting as a receive and file item, and noticed through the Public Notice process. Any Planning Commission may request that an item be discussed. The decision of the Director is not final until received and filed or acted upon by the Planning Commission or upheld on appeal.
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Planning Staff to complete

Date Received: _____ **EA No:** _____

Planner: (print name) _____ **Smoky Hollow Site Plan Review No:** _____

Signature: _____ **Fee Paid:** _____

Rev: 03-01-07
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