

CITY OF COALINGA
ENVIRONMENTAL REVIEW APPLICATION

Application Number _____

Date _____

APPLICANT INFORMATION:

Applicant: _____

Mailing Address: _____

Telephone Number: _____ Assessor Parcel Number: _____

Property Owner's Name: _____

Property Owner's Address: _____

Contact Person: _____

PROPERTY USE INFORMATION:

Size of Parcel (Square Feet/Acres) _____

Describe Existing Use of Property: _____

Square Feet of Existing Building Area _____ Square Feet of Existing Paved Area _____

Current Zoning _____ Proposed Zoning _____

Describe in General Terms Existing Uses to the:

North: _____

South: _____

East: _____

West: _____

Are there any man-made or natural water channels on property? _____

If there are, where are they located _____

Number of existing trees on the site _____ Number of trees to be moved (Age & Type) _____

Residential

a. Number of Dwelling Units: _____ b. Unit Size(s) _____

c. Range of Sales Prices and/or Rents (projected): _____

d. Type of Household Size Expected: _____

Commercial

a. Orientation:

Neighborhood: _____

City or Regional: _____

b. Square Footage of Sales Area: _____

c. Range of Sales Prices and/or Rents (Projected): _____

d. Type of Household Size Expected: _____

e. Number of Employees: Full Time _____ Part Time _____ Seasonal _____

f. Days and Hours of Operation _____

Signature of BOTH the APPLICANT and RECORDED PROPERTY OWNER (S) are required below as applicable.

The forgoing statements and answers herein contained and the information herewith submitted are in all respects true and correct to the best of my knowledge and belief.

Signature of APPLICANT/AGENT

Signature of OWNER

Name of APPLICANT/AGENT (Please Print)

Name of OWNER (Please Print)

Mailing Address

Mailing Address

Telephone Number

Telephone Number



City of Coalinga
Community Development Department

APPLICATION FOR ENVIRONMENTAL EVALUATION

1. Owner/Applicant Information

PROPERTY OWNER'S NAME: _____

PROPERTY OWNER'S ADDRESS: _____

TELEPHONE: _____ EMAIL: _____

APPLICANT'S NAME, COMPANY/ORGANIZATION: _____

APPLICANT'S ADDRESS: _____

TELEPHONE: _____ EMAIL: _____

CONTACT FOR PROJECT INFORMATION: _____

ADDRESS: _____

TELEPHONE: _____ EMAIL: _____

2. Location and Classification

STREET ADDRESS OF PROJECT: _____

CROSS STREETS: _____

ASSESSOR'S PARCEL NUMBER(S): _____

LOT DIMENSIONS: _____ LOT AREA (SQ FT): _____

ZONING DESIGNATION: _____ GENERAL PLAN DESIGNATION: _____

3. Project Description (please check all that apply)

- Change of Use
- Change of Hours
- New Construction
- Alterations
- Demolition
- Other (please clarify): _____

PRESENT OR PREVIOUS USE: _____

PROPOSED USE: _____

BUILDING APPLICATION PERMIT #: _____ DATE FILED: _____

4. Project Summary Table

If you are not sure of the eventual size of the project, provide the maximum estimates.

	Existing Uses	Existing Uses to be Retained	Net New Construction and/or Addition	Project Totals
Project Features				
Dwelling Units				
Parking Spaces				
Loading Spaces				
Bicycle Spaces				
Number of Buildings				
Height of Buildings				
Number of Stories				
Gross Square Footage (GSF)				
Residential				
Retail				
Office				
Industrial				
Parking				
Other _____				
Other _____				
Other _____				
Total GSF				

Please provide a narrative project description that summarizes the project and its purpose or describe any additional features that are not included in this table. Please list any special authorizations or changes to the Planning Code or Zoning Maps if applicable.

All Projects

Land Use

What is the current use of the site? _____

Please list all previous land uses of the site for the last 10 years. _____

Neighborhood Contact

Please describe any contact you have had regarding the project with the following: neighbors/property owners adjacent to the subject site, Neighborhood Associations, Business Associations, or Community Groups in the project area.

Site Characteristics

Providing the following information regarding the environmental setting with your application is one of the most effective ways to expedite your project's environmental review. If your site contains structures, large trees, mature vegetation, natural drainage ways, low lying areas where water pools during the rainy season, or wetland areas, supplemental information may be requested in order to conduct the environmental review of your project.

Are there any structures or buildings on the project site? Yes No

If yes, how many? _____

What is the construction date of each structure? _____

Current use of existing structure(s)? _____

Proposed use of existing structure(s)? _____

Are there any trees on the project site? Yes No

Are any trees proposed to be removed? Yes No

Does the site contain any natural drainage ways? Yes No

Does the site contain any wetland areas or areas where water pools during the rainy season? Yes No

What land uses surround the project site? (i.e., single-family residential, commercial, etc.)

Please describe: _____

Are you proposing any new fencing or screening? Yes No

If yes, please describe the location, the height, and the materials (i.e., wood, masonry, etc.) of the fencing. _____

Is there parking on-site? Yes No

If yes, how many spaces are existing (for the entire property) and how many are proposed on-site for the project?
Existing _____
Proposed _____

Is any parking proposed off-site? Yes No

If yes, where will it be located and how many spaces? _____

Are you proposing new signs with the project? Yes No

If yes, please describe the number and type. _____

Are there any easements crossing the site? Yes No

Are there any trash/recycling enclosures on-site? Yes No

If yes, what is the size/height/materials of the enclosure(s) and where are they located?

What is the total number of cubic yards allocated for recycling? _____

Building Setback from Property Lines		
	Existing (feet/inches)	Proposed (feet/inches)
Front		
Rear		
Streetside		
Interior Side		

What are the front setbacks of the two nearest buildings (on adjacent property) on the same side of the block? If there are no other properties, please write "N/A."

1st Address: _____ 2nd Address: _____

Setback: _____ Setback: _____

Exterior Materials

Existing Exterior Building Materials: _____

Existing Roof Materials: _____

Existing Exterior Building Colors: _____

Proposed Exterior Building Materials: _____

Proposed Roof Materials: _____

Proposed Exterior Building Materials: _____

Residential Projects

Fill in this section if your project has residential units. Complete both residential and non-residential sections if you are submitting a mixed-use project. Provide information below for the proposed project unless the question specifically requests information on the existing conditions of the property.

Total Number of Lots: _____

Net Acreage of Site: _____

Total Dwelling Units: _____

Density/Net Acre: _____

of Single-Family Units: _____

of Duplex/Half-Plex Units: _____

of Multi-Family/Apartment Units: _____

of Condominium Units: _____

Structure Size

Please identify the size of all existing structures to be retained (identify separately).

Residence

Gross Square Footage: _____

Garage

Gross Square Footage: _____

Other

Gross Square Footage: _____

Size of new structure(s) or building addition(s):

Gross Square Footage: _____

Total Square Footage: _____

Building Height

Building height means the vertical dimension measured from the average elevation of the finished lot grade at the front of the building to the plate line, where the roof meets the wall.

Existing Building Height and # of Floors (from ground to the plateline): _____

Existing Building Height and # of Floors (from ground to the top of the roof): _____

Proposed Building Height and # of Floors (from ground to the plateline): _____

Proposed Building Height and # of Floors (from ground to the top of the roof): _____

Lot Coverage

Total Building Coverage Area* (proposed new and existing to be retained) (sq. ft.): _____

Project Site Lot Area (sq. ft.): _____

Total Lot Coverage Percentage: _____

(Example: building area (2,000') / lot area (5,000') = 40% total lot coverage)

* Include all covered structures (patios, porches, sheds, detached garages, etc.)

Non-Residential Projects

Fill in this section if your project has a non-residential component. Complete both residential and non-residential sections if you are submitting a mixed-use project.

Hours of operation of the proposed use: _____
If your project includes fixed seats, how many are there? _____

Building Size

Total Building Square Footage On-Site (gross sq. ft.) _____

Breakdown of Square Footage – Please Mark All That Apply		
	Existing	Proposed
Warehouse Area		
Office Area		
Storage Area		
Restaurant/Bar Area		
Sales Area		
Medical Office Area		
Assembly Area		
Theater Area		
Structured Parking		
Other Area*		
*Describe use type of "Other" areas.		

Building Height

Existing Building Height and # of Floors: _____
Proposed Building Height and # of Floors: _____

Lot Coverage

Total Existing and Proposed Building Coverage Area* (sq. ft.): _____
Project Site Lot Area (sq. ft.): _____
Total Lot Coverage Percentage: _____

(Example: building area (2,000') / lot area (5,000') = 40% total lot coverage)

* Include all covered structures (patios, porches, sheds, detached garages, etc.)

Environmental Evaluation Application Submittal Checklist

Application Materials	Provided	Not Applicable
Two (2) originals of this application signed by owner or agent, with all blanks filled in.		
Two (2) hard copy sets of project drawings in 11" x 17" format showing existing and proposed site plans with structures on the subject property and on immediately adjoining properties, and existing and proposed floor plans, elevations, and sections of the proposed project.		
One (1) CD containing the application and project drawings and any other submittal materials that are available electronically.		
Photos of the project site and its immediate vicinity, with viewpoints labeled.		
Check payable to Coalinga Community Development Department.		
Letter of authorization for agent, if applicable.		
Available technical studies.		

For Department Use Only

Application Received by Community Development Department:

By: _____

Date: _____