PO Box 347 Mammoth Lakes CA, 93546 760.924.1800, fax 924.1801 commdev@mono.ca.gov

#### **Planning Division**

PO Box 8 Bridgeport, CA 93517 (760) 932-5420, fax 932-5431 www.monocounty.ca.gov

# PLOT PLAN CHECKLIST

Lack of a plot plan or any of the required information will delay the review of your plans by the Planning Division.

#### PLOT PLANS MUST INCLUDE:

- Name/address/phone number of owner, applicant, plan preparer
- North arrow, scale (1"=20', etc.)
- Assessor's Parcel Number (APN)
- Location/name of boundary streets, surface waters and recorded easements on property (include type and size of any easements)
- Dimensioned property lines/project boundary lines
- Location/outside dimensions/use of proposed structures, driveways, parking areas -distance between structures and setbacks to all property lines and surface waters
- Contour lines if the property is in a flood zone

#### PLOT PLANS MUST ALSO INCLUDE THE FOLLOWING, if applicable:

- Location/outside dimensions/use of existing structures: distance between structures and setbacks to all property lines and surface waters
- · Location and name of surface waters within 50 feet of property
- Location of utility lines 115 kV or greater within 35 feet of property
- Unusual site features (e.g., hilly terrain, drainages) on property

NOTE:	New development in the Swall Meadows area are required to submit a Wheeler
	Crest Design Review application.

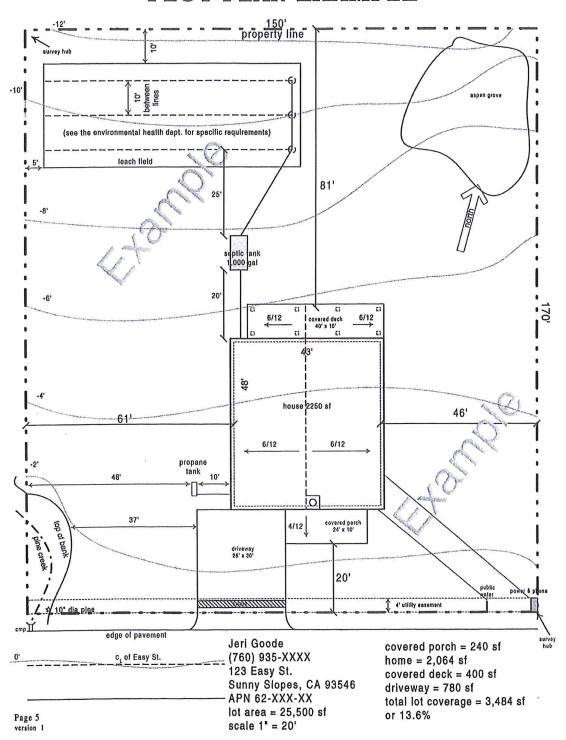
The items checked above have been included on the submitted pl	ot plan.
	7.28.22
Signature of Applicant	Date

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### PLOT PLAN EXAMPLE



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# **DIRECTOR REVIEW**

APPLICATION #	FEE \$
DATE RECEIVED	RECEIVED BY
RECEIPT # CHECK	# (NO CASH)

APPLICATION	DATE RECEIVED RECEIVED	
	RECEIPT # CHECK # (N	O CASH)
I		
APPLICANT/AGENT Devin Valletta		
ADDRESS 574 cypress hills di	CITY/STATE/ZIP encinitas CA	١. 92024
TELEPHONE ( <u>760</u> ) <u>8153375/ 908821</u>	8_ <sub>E-MAIL</sub> Devin.Valletta3@gn	nail.com
<b>OWNER</b> , if other than applicant $N/A$		
ADDRESS	CITY/STATE/ZIP	
TELEPHONE ( )	E-MAIL	
DESCRIPTION OF PROPERTY:		
Assessor's Parcel # <u>015-111-032-000</u> Gene	eral Plan Land Use Designation mix	ed use
<b>PROPOSED USE</b> : Applicant(s) should des sheets if necessary. Note: An incomplete processing.		
We will be utilizing half of our property the other half long term rental keepin e to be concious of the local communities availability which helps tourism and supexisting structure and making no change exterior. The only improvements would repairs/ paint roof repairs, interior appli	xisting local tennants in place. Our seeds while also enabling short to pports the local economy. We are ges to exisiting structure interior as lees tandard up keep/ maintenance.	intentions are erm rental utilizing the well as
I CERTIFY UNDER PENALTY OF PERJUR (all individual owners must sign as their officer(s) empowered to sign for the corp Attorney for this action (a notarized "Fapplication form), AND THAT THE FOREGO	names appear on the deed to the lar poration, or owner's legal agent? Power of Attorney" document must	nd), 🖊 corporate having Power of
Had		2.28.22
Signature	Signature	Date

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More on back...

### PROJECT INFORMATION

(To be completed by applicant or representative)

NOTE: Please answer all questions as accurately and completely as possible to avoid potential delays in processing. Attach additional sheets if necessary.

I.	TYPE OF PROJECT (check any permit(s) requested):
	☐ Director Review ☐ Use Permit ☐ Lot Line Adjustment ☐ Land Division (4 or fewer) ☐ Subdivision ☐ Specific Plan ☐ Variance ☐ General Plan Amendment ☐ Other
	APPLICANT Devin Valletta
	PROJECT TITLE short term rental for two units and maintaining the remaining units as long term rentals
	LOT SIZE (sq. ft./acre) 10,000 ASSESSOR'S PARCEL # 015-111-032-000
	PROJECT LOCATION 34 foster ave june lake
	Has your project been described in detail in the project application? Yes \( \square \) No \( \square \)
	Please Specify:  Number of Units 2 of 4  Number of Buildings 2  Building Height/# of floors 1 level  Density (units/acre) .21 acres
	Total lot coverage/impervious surface (sq. ft. & %) a. Buildings (first-floor lot coverage / sq. ft. & %) 3528 sqft b. Paved parking & access (sq. ft. & %) 1965 sqft
	Landscaping/screening and fencing:  a. Landscaping (sq. ft. & %) 2250 sqft  b. Undisturbed (sq. ft. & %) 2250 sqft
	Total parking spaces provided:  a. Uncovered 9  b. Covered 0  c. Guest/Handicapped 1
II.	SITE PLAN Are all existing and proposed improvements shown on the Plot Plan (see attached Plot Plan Requirements)? Yes ✓ No ☐
III.	<b>ENVIRONMENTAL SETTING</b> Use one copy of the Tentative Map or Plot Plan as needed to show any necessary information. Attach photographs of the site, if available.

1.	VICINITY MAP: Attach a copy of assessor's parcel pages or a vicinity map showing the subject property in relation to nearby streets and lots or other significant features.
2.	EXISTING DEVELOPMENT:  Vacant  If the site is developed, describe all existing uses/improvements such as structures, roads, etc. Does the Plot Plan show these uses? Yes  No  Structure is currently used as a rental property.
3.	ACCESS/CIRCULATION: Name of Street Frontage(s)
	Paved Dirt No existing access  Are there any private roads, drives or road easements on/through the property?  Yes No D
	Has an encroachment permit been submitted to Public Works or Caltrans? Yes No Does the property have any existing driveways or access points? Yes No No Does the Plot Plan show the driveways or access points? Yes No No
	Describe the number and type of vehicles associated with the project
4.	ADJACENT LAND USES:  A. Describe the existing land use(s) on adjacent properties. Also note any major man-made or natural features (i.e., highways, stream channels, number and type of structures, etc.). <u>LAND USE</u> <u>LAND USE</u>
	North residential South residential
	East residential West residential
	B. Will the proposed project result in substantial changes in pattern, scale or character of use in the general area? Yes \( \subseteq \) No \( \overline{\varphi} \) If YES, how does the project propose to lessen potential adverse impacts to surrounding uses?
5.	SITE TOPOGRAPHY:  Is the site on filled land? Yes \(\sum \) No \(\begin{align*}
6.	DRAINAGES:  A. Describe existing drainage ways or wetlands on or near the project site (i.e., rivers, creeks and drainage ditches 12" or deeper and/or within 30' of the property)  N/A
	B. Are there any drainage easements on the parcel? Yes \(\sigma\) No \(\vec{\vec{\vec{v}}}\)
	C. Will the project require altering any streams or drainage channels? Yes \(\sigma\) No \(\vec{\vec{\vec{V}}}\) If YES, contact the Department of Fish and Game for a stream alteration permit. IF YES TO ANY OF THE ABOVE, show location on plot plan and note any alteration or work to be done within 30 feet of the stream or drainage.
7.	VEGETATION:  A. Describe the site's vegetation and the percentage of the site it covers (map major areas of vegetation on the Plot Plan) vegetation is composed of short bermuda grass and light shrubs. 0

	В.	How many trees will need to be removed? 0
	D.	Are there any unique, rare or endangered plant species on site? Yes \(\bigcap\) No \(\bigcap\) Has the site been used for the production of agricultural crops/trees or grazing/pasture land in the past or at the present time? Yes \(\bigcap\) No \(\bigcap\) Is landscaping/planting of new vegetation proposed? Yes \(\bigcap\) No \(\bigcap\)
8.		LDLIFE:  Will the project impact existing fish and wildlife? Yes No   Describe existing fish and wildlife on site and note any proposed measures (if any) to avoid or mitigate impacts to fish and wildlife
	В.	Are there any unique, rare or endangered animal species on site? Yes \(\sigma\) No \(\begin{align*}\omega\)
9.		ILTURAL RESOURCES:  Are there any cemeteries, structures or other items of historical or archaeological interest on the property? Yes No Specify Unknown
10.	SIT A.	TE GRADING: Will more than 10,000 square feet of site area be cleared and/or graded? Yes No If YES, how much?
	В. С.	Will the project require any cuts greater than 4' or fills greater than 3'? Yes No W Will the project require more than 200 cubic yards of cut or fill? Yes No W If YES, how much? If YES to A, B or C, contact the Department of Public Works for a grading permit.
		Will site grading of 10% or more occur on slopes? Yes \(\sigma\) No \(\vec{\vec{\vec{\vec{\vec{\vec{\vec{
11.	AII	R QUALITY:
	В.	Will the project have wood-burning devices? Yes No I If YES, how many? 4 now What fuel sources will the proposed project use? Wood Electric Propane/Gas Will the proposal cause dust, ash, smoke, fumes or odors in the vicinity? Yes No V
12.		SUAL/AESTHETICS:  How does the proposed project blend with the existing surrounding land uses?  utilizing the existing structure no exterior or interior structual changes
	В.	How does the proposed project affect views from existing residential/commercial developments, public lands or roads? <u>not affected</u>
	C. <u>N/</u>	If outdoor lighting is proposed, describe the number, type and locationA
13.		ATURAL HAZARDS:  Is the site known to be subject to geologic hazards such as earthquakes, landslides, mudslides, ground failure, flooding, avalanche or similar hazards? Yes \(\sime\) No \(\begin{aligned} \text{(Circle applicable hazard[s]).}
	В.	Will any hazardous waste materials such as toxic substances, flammables or explosives be used or generated? Yes No
	C.	

	D.	Will the project generate significant amounts of solid waste or litter? Yes \(\sime\) No \(\vec{\varphi}\)
	E.	Will there be a substantial change in existing noise or vibration levels? Yes \( \bar{\substantial} \) No \( \bar{\bar{\substantial}} \) If YES to any of the above, please describe \( \bar{\substantial} \)
14.		OTHER PERMITS REQUIRED: List any other related permits and other public approvals required for this project, including those required by county, regional, state and federal agencies:  Encroachment Permits from Public Works or Caltrans.  Stream Alteration Permit from Department of Fish and Game  404 Wetland Permit from Army Corps of Engineers  Grading Permit from Public Works  Building Permit from County Building Division  Well/Septic from County Health Department  Timber Land Conversion from California Department of Forestry  Waste Discharge Permit from Lahontan Regional Water Quality Control Board  Other
IV.		SERVICES
	1.	Indicate how the following services will be provided for your project and the availability of service.  Electricity
		Road/Access snow removal on site
		Water Supply Municiple
		Sewage Disposal standard
		Fire Protection existing
		School District N/A
	2.	If an extension of any of the above is necessary, indicate which service(s), the length of extension(s), and the infrastructure proposed N/A
O.E.	D/M	TOTO ACTION. I be used to sent the date and
info pre info	orm sen	<b>IFICATION</b> : I hereby certify that I have furnished in the attached exhibits the data and ation required for this initial evaluation to the best of my ability, and that the information ited is true and correct to the best of my knowledge and belief. I understand that this ation, together with additional information that I may need to provide, will be used by County to prepare a Specific Plan in compliance with state law.
Sig	nat	ure
For		

NOTE: Failure to provide any of the requested information will result in an incomplete application and thereby delay processing.