VENICE NEIGHBORHOOD COUNCIL

Land Use and Planning Committee

B. PROJECT INFORMATION FORM -- To Be Used for Projects less than 7,500 square feet

INSTRUCTIONS TO APPLICANT:

1. Please E-mail this form with an electronic copy of your plans, preferably in PDF format, TEN days prior to your meeting date to lupc@grvnc.org. This form will assist the LUPC in evaluating you project.

If LUPC does not receive these documents on or prior to 10 days before your meeting date, your project/issue will be postponed until the next available LUPC meeting.

- 2. Bring to the meeting TEN copies of your plans and renderings for The Committee. You may wish to bring additional copies for the audience.
- 3. The applicant is expected to outreach to residents and commercial enterprises within 500 feet of the project announcing the date of the LUPC hearing of the project and inviting public comment.

Today's Date				
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	7/13/07		Meeting Date	7/25/07
Project Location	543 S. Grand Blvd.		Cross Streets	Navarre Court & Andalusia Ave.
Applicant Name	Sean Gorman			
Presenter Name	John Parker			
2. PROJECT DES	CRIPTION (General Description	1)		
and functionally owner seeks appropriate to be property	upstairs & in the garage). Appression of the upstairs into proval for the remaining gar rovided. No physical change	o a single unit age unit. Two es are propos	t & has since existing park ed to any por	occupied it. The ing spaces will
3. PROJECT BAC	KGROUND			
	KGROUND the Venice Coastal Zone?	Yes X North Venice	No	
Is Project located in			No	
Is Project located in	the Venice Coastal Zone?	North Venice		check)

Status of Project (Select A or B)		
A. Project is at a Preliminary/ Explorator	y development state	5/24/07
B. Project Submitted to the City: X	Application Date	3/24/07
	Application Number	APCW 2007-2489 (SPE)(SPP)
If you have a City Planning Hearing Date – please of the date and location:	D - (-	heduled
Location:		
Is your Project in full compliance with Los Angeles (Specific Plan? No X If No, Yes		Codes and/or the Venice riance, Venice Specific Plan
Exceptions or Other Discretionary Actions are you r	equesting?	
Exceptions to permit 3 dwelling units in lieu of 2 dwellin		
4. ZONING		
RD 1.5-1-O What is the Current zoning?	_ Proposed zoning	Same ?
Is the Project compliant with the Community Plan M	X lap? Yes	No
Is the location on a Venice Specific Plan Walk Stree	et? Yes	X No
5. TYPE OF BUILDING		
Business Single Family	Mixed Use (E	Business/Residential)
Apartments: Units Permitted	Units Propos	sed 3
Condos: Units Permitted	Units Propos	sed
Other – please explain:		
Will the property be Owner Occupied?	One Yes <u>unit</u> No _	
6. SIZE		
30 X 90 Lot dimensions		2700 ot
Improvements: Square footage permitted?	4860 Square foo	2305

7. HEIGHT						
Maximum H	35 ft. 21 ft. 8 in. Maximum Height Permitted Height Proposed					
Number of S	umber of Stories2 Basements or underground parking? Yes NoX					
8. SETBAC	KS					
Front Side Rear	Required 15 ft. 3 ft. 15 ft.*	Proposed 15 ft. 3 in. 4 ft. 16* *Inc	cluding ½ alley			
9. PARKING	G					
	parking spaces	Required	Proposed2			
Is the parkir	ng?			On & Off Site		
ls Valet par	king provided?	Yes	No			
Number of S	•	Standard1 e by Side				
Is Beach Impact Zone Parking required? Yes If Yes, what are the number of parking spaces required						
11 100,	what are the hamber	or parking spaces re	<u> </u>	X		
Will your Pr	oject result in a loss o	of on-street parking?	Yes	_ No		
10. TRAFFI	IC					
	repared a traffic stud	y? Yes	No If Yes	s, please attach a cop	by.	
Has the traffic study been reviewed by the Dept. of Transportation? Yes No						

11. AFFORDABLE / LOW COST HOUSING COMPONENT						
Are you providing Affordable Housing / Low Cost Housing? Is it required by the Venice Specific Plan and/or Mello Act? Yes No						
Described how the units are being provided: No. of Units: Are the units provided: On Site: The state of the units provided: On Site: On/Off Site: On/Of						
12. ENVIRONMENTAL						
Is an Environmental Impact Report (EIR) required? Yes No If Yes, please attach a copy.						
13. BUSINESS INFORMATION						
Name of business: N/A						
Type of business:						
Hours of operation:						
Hours of delivery?						
Will liquor be sold? Yes No						
14. CONTACT INFORMATION						
Company Name Pacific Crest Consultants						
Contact Name John Parker						
Mailing Address 1605 Astor Avenue						
City, State, Zip Cambria, CA 93428						
Phone/FAX 805-927-7550 / FAX 805-927-7564						
E-Mail/Web Site ParkerGroup@charter.net						
I certify that the information contained in this Project Information Form is complete and true.						
Name (please print)John J. Parker, Jr						
Signature						