

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@qrvnc.org. This form will assist the LUPC in evaluating your 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.

1. PROJECT INFORMATION

Today's Date _____ Meeting Date _____
Project Location 732 INDIANA AVE. Cross Streets INDIANA BETWEEN LINCOLN AND 7TH
Applicant Name VICTOR MARTINEZ
Presenter Name DAVID REDDY, AIA

2. PROJECT DESCRIPTION (General Description)

ADJACENT LOT DEVELOPED SIMULTANEOUSLY BY THE SAME OWNER
SMALL LOT SUBDIVISION CONSISTING OF 2-2 STORY TOWNHOMES, 6 PARKING SPACES ON GRADE
TYPE V, NEW CONSTRUCTION, SPRINKLERED

3. PROJECT BACKGROUND

Is Project located in the Venice Coastal Zone? Yes No
If Yes, in which Venice Specific Plan Sub-area MILWOOD, OAKWOOD, SOUTHEAST VENICE
In which of the following Venice Coastal Zone areas is your Project located? (please check)
Venice Coastal Zone Specific Plan Area Dual Jurisdiction Zone _____
Status of Project (Select A or B)
 A. Project is at a Preliminary/ Exploratory development state
 B. Project Submitted to the City: Application Date 11/07/07

Application Number _____

If you have a City Planning Hearing Date -- please enter the date and location:

Date: _____

Location: _____

Is your Project in full compliance with Los Angeles City Zoning and Planning Codes and/or the Venice Specific Plan? No Yes
If No, what Conditional Use, Variance, Venice Specific Plan

Exceptions or Other Discretionary Actions are you requesting?

0' LOT LINE @ UNIT B AND ADJACENT LOT

PASSAGEWAY REDUCTION

SMALL LOT SUBDIVISION REQUEST

4. ZONING

What is the Current zoning? RD1.5-1 Proposed zoning? SAME (NO CHANGE)

Is the Project compliant with the Community Plan Map? Yes No

Is the location on a Venice Specific Plan Walk Street? Yes No

5. TYPE OF BUILDING

Business Single Family Mixed Use (Business/Residential)

Apartments: Units Permitted Units Proposed

Condos: Units Permitted Units Proposed

Other -- please explain: SMALL LOT SUBDIVISION

Will the property be Owner Occupied? Yes No

6. SIZE

Lot dimensions 40'x132' Square footage of the lot 5,280 SF +/-

Improvements: Square footage permitted? 10,350 Square footage proposed? 6,500

Floor Area Ratio (FAR/Commercial): FAR permitted FAR proposed

7. HEIGHT

Maximum Height Permitted ^{30' W/VARIED ROOFLINE} Height Proposed ^{30' W/VARIED ROOFLINE} Number of Stories 2 ^(SEE NOTES BELOW) Basements or underground parking? Yes No

UNIT A IS 2 STORY, UNIT B IS 3 STORY (1ST IS PARKING GARAGE, 2ND IS FULL STORY, AND 3RD IS LESS THAN 500 SF)

8. SETBACKS

	Required	Proposed
Front	5	10
Side	5	5
Rear	5	5

PER SMALL LOT SUBDIVISION ORDINANCE

9. PARKING

Number of parking spaces Required 6 Proposed 6
Is the parking? On Site X Off Site On & Off Site

Is Valet parking provided? Yes No X

Number of Spaces: Standard 4 Compact 2

Configuration: Side by Side Single X Tandem X

Is Beach Impact Zone Parking required? Yes No X

If Yes, what are the number of parking spaces required

Will your Project result in a loss of on-street parking? Yes No X

10. TRAFFIC

Have you prepared a traffic study? Yes No N/A If Yes, please attach a copy.

Has the traffic study been reviewed by the Dept. of Transportation? Yes No N/A
If yes, please attach their findings.

11. AFFORDABLE / LOW COST HOUSING COMPONENT

Are you providing Affordable Housing / Low Cost Housing? Yes No

Is it required by the Venice Specific Plan and/or Mello Act? Yes No

Described how the units are being provided: No. of Units: For Sale Rental?
Are the units provided: On Site: Off Site: On/Off Site

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: N/A
Hours of operation: N/A
Hours of delivery? N/A
Will liquor be sold? Yes No

14. CONTACT INFORMATION

Company Name
Contact Name VICTOR MARTINEZ
Mailing Address 732 INDIANA AVE.
City, State, Zip VENICE, CA 90291
Phone/FAX (310) 930-4922 / (310) 396-7941
E-Mail/Web Site

I certify that the information contained in this Project Information Form is complete and true.

Name (please print) Victor Martinez

Signature 