

CITY OF LOS ANGELES
DEPARTMENT OF CITY PLANNING

ENVIRONMENTAL ASSESSMENT FORM

EAF Case No.: _____ ZA Case No.: _____ CPC Case No.: _____

Council District No.: _____ Community Plan Area: _____

PROJECT ADDRESS: _____

Major Cross Streets: _____

Name of Applicant: _____

Address: _____

Telephone No.: _____ Fax No.: _____ E-mail: _____

OWNER

APPLICANT'S REPRESENTATIVE

(Other than Owner)

Name: _____

Name: _____

(Contact Person)

Address: _____

Address: _____

Telephone No: _____

Telephone No: _____

Signature: _____

Signature: _____

(Applicant's Representative)

The following Exhibits are required (3 copies of each exhibit and 3 Environmental Assessment Forms for projects in Coastal & S.M. Mtn. Zones): All Exhibits should reflect the entire project, not just the area in need of zone change, variance, or other entitlement.

NOTE: The exhibits are IN ADDITION TO those required for any case for which the Environmental Assessment Form is being filed.

- A. **2 Vicinity Maps:** (8½" x 11") showing nearby street system, public facilities and other significant physical features (similar to road maps, Thomas Brothers Maps, etc.) with project area highlighted.
- B. **2 Radius/Land Use Maps:** (1" = 100') showing land use and zoning to 500 feet (100 feet of additional land use beyond the radius for alcoholic beverage cases); 100' radius line (excluding streets) okay for Coastal building permits 300' for site plan review applications.
- C. **2 Plot Plans:** showing the location and layout of proposed development including dimensions; include topographic lines where grade is over 10%; tentative tract or parcel maps where division of land is involved to satisfy this requirement, and the location and diameter of all trees existing on the project site.
- D. **Application:** a duplicate copy of application for zone change, (including Exhibit "C" justification) batch screening form, periodic comprehensive general plan review and zone change map, variance, conditional use, subdivider's statement, etc.
- E. **Pictures:** two or more pictures of the project site showing walls, trees and existing structures.
- F. **Notice of Intent Fee:** a UNDATED check in the amount of \$25 made out to the **County of Los Angeles** for the purpose of filing a Notice of Intent to Adopt a Negative Declaration as required by § 15072 of the State CEQA Guidelines.

ENVIRONMENTAL ASSESSMENT

APPROVED BY: _____ DATE: _____

APPLICATION ACCEPTED

BY: _____ DATE: _____

RECEIPT NO.: _____

I. Project Description:

Briefly describe the project and permits necessary (i.e., Tentative Tract, Conditional Use, Zone Change, etc.) including an identification of phases and plans for future expansion:

Will the project require certification, authorization, clearance or issuance of a permit by any federal, state, county, or environmental control agency, such as Environmental Protection Agency, Air Quality Management District, Water Resources Board, Environmental Affairs, etc.? If so, please specify:

II. Existing Conditions:

- A. Project Site Area _____
Net and _____ Gross Acres _____
- B. Existing Zoning _____
- C. Existing Use of Land _____
Existing General Plan Designation _____
- D. Requested General Plan Designation _____
- E. Number _____ type _____ and age \pm _____ of structures to be removed as a result of the project. If residential dwellings (apts., single-family, condos) are being removed indicate the number of units: _____ and average rent: _____
Is there any similar housing at this price range available in the area? If yes, where?

- F. Number _____ Trunk Diameter _____ and type _____
of existing trees.
- G. Number _____ Trunk Diameter _____ and type _____
of trees being removed (identify on plot plan.)
- H. Slope: State percent of property which is:
_____ Less than 10% slope _____ 10–15% slope _____ over 15% slope
If slopes over 10% exist, a topographic map will be required. Over 50 acres, 1" = 200' scale is okay.
- I. Check the applicable boxes and indicate the condition on the Plot Plan. There are natural or man-made drainage channels, rights of way and/or hazardous pipelines crossing or immediately adjacent to the property, or none of the above.
- J. Grading: (specify the total amount of dirt being moved)
_____ 0-500 cubic yards.
_____ if over 500 cubic yards. indicate amount of cubic yards.
- K. Import/Export: Indicate the amount of dirt being imported or exported _____.

Projects involving import/export of 1000 cubic yards or more are required to complete a Haul Route Form and Haul Route Map.

If the project involves more than one phase or substantial expansion or changes of existing uses, please document each portion separately, with the total or project details written below. Describe entire project, not just area in need of zone change, variance, or other entitlement.

III. Residential project (if not residential, do not answer)

- A. Number of Dwelling Units-
Single Family _____ Apartment _____ or Condominium _____
- B. Number of Dwelling Units with:
One bedroom _____ Two bedrooms _____
Three bedrooms _____ Four or more bedrooms _____
- C. Total number of parking spaces provided _____
- D. List recreational facilities of project _____
- E. Approximate price range of units \$ _____ to \$ _____
- F. Number of stories _____, height _____ feet.
- G. Type of appliances and heating (gas, electric, gas/electric, solar) _____
Gas heated swimming pool? _____
- H. Describe night lighting of the project _____
(include plan for shielding light from adjacent uses, if available)
- I. Percent of total project proposed for: Building _____
Paving _____
Landscaping _____
- J. Total Number of square feet of floor area _____

IV. Commercial, Industrial or Other Project (if project is only residential do not answer this section). Describe entire project, not just area in need of zone change, variance, or other entitlement.

- A. Type of use _____
- B. Total number of square feet of floor area _____
- C. Number of units if hotel/motel _____
- D. Number of stories _____ height _____ feet.
- E. Total number of parking spaces provided: _____ Venice Coastal Zone Specific Plan Sec.13.E
- F. Hours of operation _____ Days of operation _____
- G. If fixed seats or beds involved, number _____
- H. Describe night lighting of the project _____
(Include plan for shielding light from adjacent uses, if available)
- I. Number of employees per shift _____
- J. Number of students/patients/patrons _____
- K. Describe security provisions for project _____
- L. Percent of total project proposed for: Building _____
Paving _____
Landscaping _____

Historic/Architecturally Significant Project

Does the project involve any structures, buildings, street lighting systems, spaces, sites or components thereof which may be designated or eligible for designation in any of the following: (please check)

- “ National Register of Historic Places _____
- “ California Register of Historic Resources _____
- “ City of Los Angeles Cultural Historic Monument. _____
- “ Within a City of Los Angeles Historic Preservation Overlay Zone (HPOZ) _____

V. Hazardous Materials and Substance Discharge

Does the project involve the use of any hazardous materials or have hazardous substance discharge?
If so, please specify. _____

- A. Regulatory Identification Number (if known) _____
- B. Licensing Agency _____
- C. Quantity of daily discharge _____

VI. Stationary Noise Clearance: A clearance may be necessary certifying the project's equipment (e.g., air conditioning) complies with City Noise Regulations.

Some projects may require a Noise Study. The EIR staff will inform those affected by this requirement.

VII. Selected Information:

- A. Circulation: Identify by name all major and secondary highways and freeways within 1,000 feet of the proposed project; give the approximate distance(s):

- B. Air: All projects that are required to obtain AQMD permits (see AQMD Rules and Regulations) are required to submit written clearance from the AQMD indicating no significant impact will be created by the proposed project.*
- C. Noise: Projects located within 600 feet of railroad tracks indicate the number of trains per day:**
Day 7 AM–10 PM _____
Night 10 PM–7 AM _____

VIII. Mitigating Measures:

Feasible alternatives or mitigation measures which would substantially lessen any significant adverse impact which the development may have on the environment. _____

* Contact the South Coast Air Quality Management District at 572-6418 for further information.

** For information, contact:

Southern Pacific Train Dispatcher	629-6569
Union Pacific Engineering	725-2313
Santa Fe Train Master	267-5546

APPLICANT/CONSULTANT'S AFFIDAVIT

OWNER MUST SIGN AND BE NOTARIZED;

IF THERE IS AN AGENT, THE AGENT MUST ALSO SIGN AND BE NOTARIZED

I, _____
Owner (Owner in escrow)*
(Please Print)

I, _____
Consultant*
(Please Print)

Signed: _____
Owner

Signed: _____
Agent

being duly sworn, state that the statements and information contained in this Environmental Assessment Form are in all respects true and correct to the best of my knowledge and belief.

State of California, County and City of Los Angeles

<p>Signed: _____ Notary</p> <p>Subscribed and sworn to before me this _____ day of _____, 20 ____ (NOTARY or CORPORATE SEAL)</p>	<p>Signed: _____ Notary</p> <p>Subscribed and sworn to before me this _____ day of _____, 20 ____ (NOTARY)</p>
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* If acting for a corporation, include capacity and company name.