

MASTER LAND USE PERMIT APPLICATION
LOS ANGELES CITY PLANNING DEPARTMENT

Planning Staff Use Only

ENV No.	Existing Zone	District Map
APC	Community Plan	Council District
Census Tract	APN	Staff Approval*
		Date

CASE NO. **ZA 2010-913** * Approval for Filing by Community Planning or Division of Land Staff, When Applicable

APPLICATION TYPE Conditional Use Permit, Specific Plan, Variance, CDP
(zone change, variance, conditional use, tract/parcel map, specific plan exception, etc.)

1. PROJECT LOCATION AND SIZE

Street Address of Project 1607 Pacific Ave, Venice, California Zip Code 90291
 Legal Description: Lot 15 Block 2 Tract Venice of America
 Lot Dimensions 81'-7 X 42'-6" Lot Area (sq. ft.) 3195.8 sq. ft. Total Project Size (sq. ft.) 1913 sq. ft.

2. PROJECT DESCRIPTION

Describe what is to be done: Non-structural T.I. on existing restaurant occupancy (1378 sq ft). Change of use from office to restaurant on annexed space (535 sq ft, 364 sq ft service area)
Parking has been obtained through lease.

Present Use: Restaurant and office (annexed space) Proposed Use: Restaurant

Plan Check No. (if available) _____ Date Filed: _____

Check all that apply:

<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Change of Use	<input checked="" type="checkbox"/> Alterations	<input type="checkbox"/> Demolition
<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Residential	<input type="checkbox"/> LEED Silver

Additions to the building:

<input type="checkbox"/> Rear	<input type="checkbox"/> Front	<input type="checkbox"/> Height	<input type="checkbox"/> Side Yard
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No. of residential units: Existing 0 To be demolished 0 Adding 0 Total 0

3. ACTION(S) REQUESTED

Describe the requested entitlement which either authorizes actions OR grants a variance:

Code Section from which relief is requested: _____ Code Section which authorizes relief: 12.24.W1
Conditional Use Permit Type 41 - Restaurant Beer & Wine for on-site consumption. Hours Noon to 2am seven days a week.

Code Section from which relief is requested: _____ Code Section which authorizes relief: 12.26-E,5
Request grant lease in lieu of covenant parking. Nine spaces leased.

Code Section from which relief is requested: _____ Code Section which authorizes relief: Project Permit Review
Change of Occupancy from office to restaurant for expansion of existing restaurant by 535 sq ft (364 sq ft service area)

List related or pending case numbers relating to this site:

COASTAL DEVELOPMENT PERMIT: _____ Code Section which authorizes relief: 12.20.2
Change of Occupancy from office to restaurant for expansion of existing restaurant by 535 sq ft (364 sq ft service area)

4. OWNER/APPLICANT INFORMATION

Applicant's name Arron Turnbull Company DRY TOUR LLC
 Address: 1119 Rexford Drive #1 Telephone: (310) 770.2494 Fax: (818) 9547862
Los Angeles, CA Zip: 90035 E-mail: arron@drytour.com

Property owner's name (if different from applicant) Jose M. Bunge
 Address: 2118 Wilshire Blvd #874 Telephone: (310) 418.9241 Fax: (310) 581.1698
Santa Monica, CA Zip: 90403 E-mail: _____

Contact person for project information Contact Applicant Company _____
 Address: _____ Telephone: () _____ Fax: () _____
 Zip: _____ E-mail: _____

5. APPLICANT'S AFFIDAVIT

Under penalty of perjury the following declarations are made:

- a. The undersigned is the owner or lessee if entire site is leased, or authorized agent of the owner with power of attorney or officers of a corporation (submit proof). (NOTE: for zone changes lessee may not sign).
- b. The information presented is true and correct to the best of my knowledge.

Signature: Arron Turnbull Print: Arron Turnbull

ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of Los Angeles

On 4/8/2010 before me, Sean Skaggs, Notary Public
SS (Insert Name of Notary Public and Title)

personally appeared Arron Turnbull, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf on which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Sean Skaggs (Seal)
 Signature



6. ADDITIONAL INFORMATION/FINDINGS

In order for the City to render a determination on your application, additional information may be required. Consult the appropriate Special Instructions handout. Provide on attached sheet(s) this additional information using the handout as a guide.

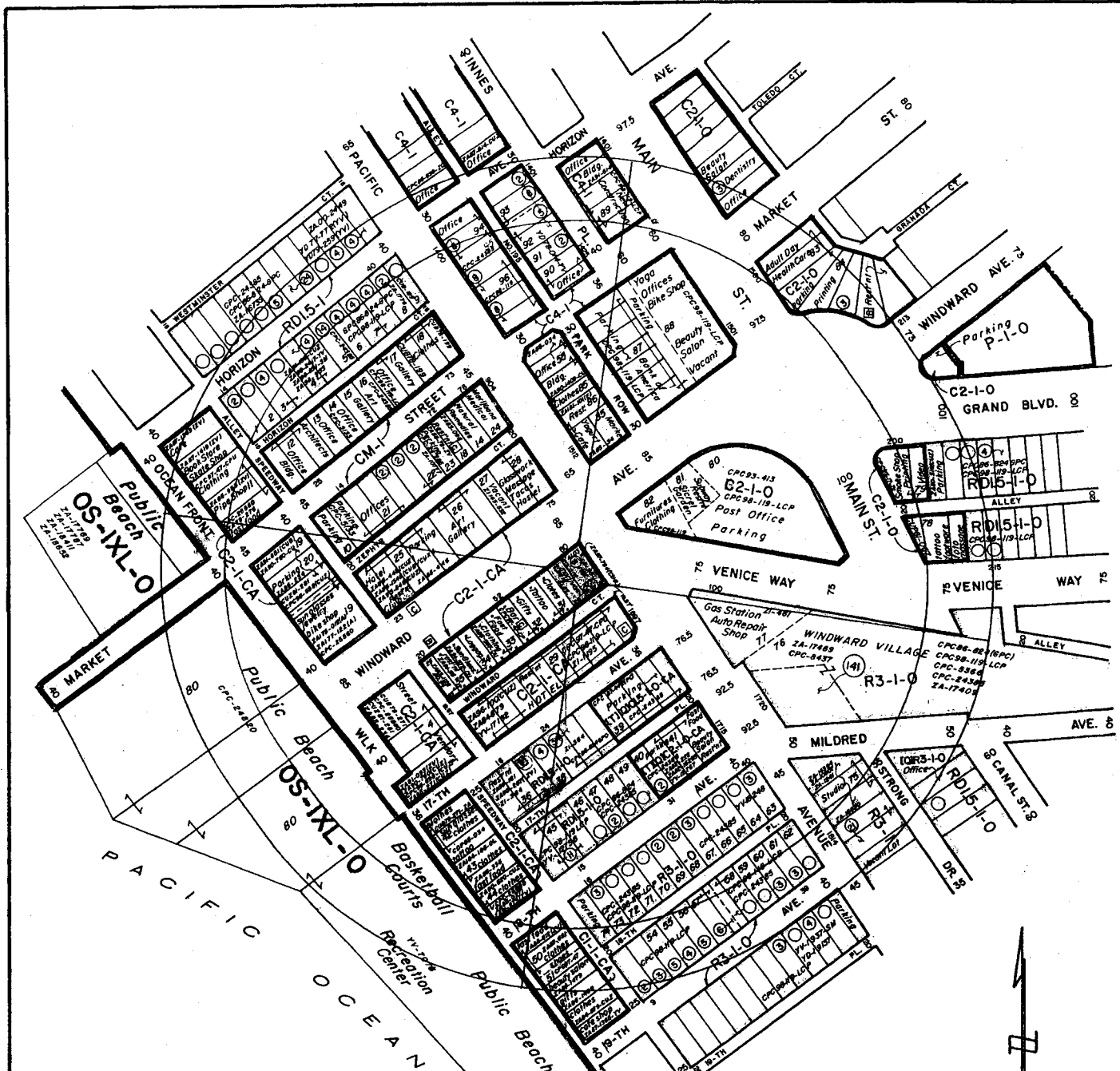
NOTE: All applicants are eligible to request a one time, one-year only freeze on fees charged by various City departments in connection with your project. It is advisable only when this application is deemed complete or upon payment of Building and Safety plan check fees. Please ask staff for details or an application.

Planning Staff Use Only		
Base Fee	Reviewed and Accepted by	Date
Receipt No.	Deemed Complete by	Date



SEE 701 MAP

VICINITY MAP
PROJECT AREA



LEGAL DESCRIPTION

All of Lots 15 And 16, Block 2,
 Venice of America Tract,
 Per Map Book 6, Page 126.

C.D.-II
 C.T.-2735
 P.A.- Venice

Net - 0.1203 Ac.

ZONING ATLAS BOOK 2, PAGE 561 GRID 37-AM T.B. PAGE 671, GRID H-6	CONDITIONAL USE-ON SITE ALCOHOLIC BEVERAGES PREPARED BY: HOLLYWOOD MAPPING SERVICE 1840 DELOZ AVENUE HOLLYWOOD, CALIFORNIA 90027 Phone: (323) 467-8631	CASE NO. DATE: 06-04-2009- 03-04-2010 SCALE: 1" = 100' USES: FIELD D.M. 106.5 A143, 106.5 A146 106 A143, 106 A145
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