

# VENICE NEIGHBORHOOD COUNCIL

## Land Use and Planning Committee

### A. PROJECT INFORMATION FORM -----To Be Used for Projects Equal to or Greater 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](mailto: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.

#### 1. PROJECT INFORMATION

Today's Date 1-29-07

Meeting Date 2-7-07

Project Location 812 MAIN STREET

Cross Streets ABBOT KINNEY

Applicant Name PALISADES DEVELOPMENT GROUP

Presenter Name MATT FISHER

Presenters' relationship to applicant: EMPLOYEE

Is this your initial appearance before the Committee? Yes  No  If No, on what other day(s)

have you appeared? 5-24-06

#### 2. PROJECT DESCRIPTION (General Description)

MIXED USE PROJECT COMPRISED OF A 43-ROOM EXTENDED STAY HOTEL,  
5 RESIDENTIAL CONDOMINIUM UNITS, 2925 SF OF GROUND FLOOR RETAIL  
COMMERCIAL SPACE BARRMARKED FOR A NEIGHBORHOOD MARKET, AND  
A 2-LEVEL SUBTERRANEAN PARKING GARAGE WITH A TOTAL OF 100 SPACES.

**3. PROJECT BACKGROUND**

Is the Project located in the Venice Coastal Zone? Yes  No

If Yes, in which Venice Specific Plan Sub-area NORTH 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 11-9-05  
Application Number 2A 2005-8134-CUP-ZU-2A1-SFP-MEL TT 63010

Have you posted your Application Notice? Yes  No  If Yes, when & where?

ALL REQUIRED POSTINGS HANDLED BY CITY OF LOS ANGELES.

If you have a City Planning Hearing Date – please enter the date and location: Date: 11-15-06; 1-3-07; 3-7-07

Location: 11214 W. EXPOSITION BLVD, 2<sup>ND</sup> FLOOR

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

ALL VENICE SPECIFIC PLAN GUIDELINES ARE BEING MET - NO EXCEPTIONS REQUESTED.

CUP REQUEST FOR A HOTEL WITHIN 500 FEET OF AN R ZONE.

VARIANCE REQUEST TO ALLOW TANDEN PARKING WITH A PARKING ATTENDANT TO SERVE A HOTEL.

Please explain your justification for a Conditional Use, Variance, Venice Specific Plan Exception,

or Other Discretionary Action: CUP: HOTEL IS A PERMITTED USE WHICH BECAUSE OF ITS

PROXIMITY TO RESIDENTIAL USE IS SUBJECT TO THE CUP PROCEDURE; VARIANCE: REQUEST

IF NOT FOR ANY REDUCTION IN REQUIRED PARKING, JUST FOR PARKING ATTENDANT 24 HOURS/DAY AND 7 DAYS/WEEK.

Was your Project presented to the immediate neighborhood? Yes  No

If Yes, when VARIOUS TIMES (date) and to whom NORTH BEACH NEIGHBORHOOD ASSOCIATION 200 CHURCH OF CHRIST, SILVERDENT OF LOS ANGELES

If not presented, please explain: \_\_\_\_\_

**4. ZONING**

What is the Current zoning? C2-1 Proposed zoning? C2-1

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: 43-Room EXTENDED STAY HOTEL, 5 RESIDENTIAL  
CONDOMINIUM UNITS, 2925 SF OF GROUND FLOOR RETAIL/COMMERCIAL SPACE.

Will the property be Owner Occupied? Yes  No   
5 RESIDENTIAL CONDOMINIUM UNITS TO BE SOLD.

**6. SIZE**

Lot dimensions IRREGULAR Square footage of the lot 29,594  
 Improvements: Square footage permitted? 44,391 Square footage proposed? 44,000  
 Floor Area Ratio (FAR/Commercial): FAR permitted 1.5:1 FAR proposed 1.5:1

**7. HEIGHT**

Maximum Height Permitted 35' Height Proposed 35'  
 Actual Physical Number of Stories, including basements, garages, and/or underground parking 3  
STORIES OVER 2-LEVEL SUBTERRANEAN PARKING GARAGE.

**8. SETBACKS**

	Required	Proposed
Front	<u>0</u>	<u>0</u>
Side	<u>6'</u>	<u>6'</u>
Rear	<u>15'</u>	<u>15'</u>

Is there an easement(s)? Yes  No  If Yes, list the easement(s) PUBLIC  
STORM DRAIN EASEMENT INTERJECTS SOUTHEASTERLY CORNER.

**9. PARKING**

Number of parking spaces      Required 68      Proposed 100

Is the parking?      On Site       Off Site \_\_\_\_\_      On & Off Site \_\_\_\_\_

Is Valet parking provided?      Yes       No \_\_\_\_\_

Number of Spaces:      Standard 57      Compact 43

Configuration:      Side by Side \_\_\_\_\_      Single 56      Tandem 44

Is Beach Impact Zone Parking required?      Yes       No \_\_\_\_\_

    If Yes, what are the number of parking spaces required 5

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

**10. TRAFFIC**

Have you prepared a traffic study?      Yes \_\_\_\_\_      No       If Yes, please attach a copy.

Has the traffic study been reviewed by the Dept. of Transportation?      Yes \_\_\_\_\_      No \_\_\_\_\_

    If yes, please attach their findings.

What mitigation measure are you required to provide? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you providing any mitigations above and beyond what is required?      Yes \_\_\_\_\_      No \_\_\_\_\_

    If Yes, please explain: \_\_\_\_\_

\_\_\_\_\_

**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 \_\_\_\_\_ or Rental?

Are the units provided: On Site: \_\_\_\_\_ Off Site: \_\_\_\_\_ On/Off Site \_\_\_\_\_

If units are Off Site, what is the distance from the Coastal Zone?

**12. ENVIRONMENTAL**

Is an Environmental Impact Report (EIR) required? Yes \_\_\_\_\_ No  If Yes, please attach a copy.

How are you complying with the City requirement for landscaping in your project?

ALL OPEN AREAS NOT USED FOR BUILDING, DRIVEWAY, OR WALKS  
SHALL BE LANDSCAPED IN ACCORDANCE WITH THE CITY REQUIREMENT.

What measures have you considered for energy conservation (solar panels, passive solar, etc.)?

RECYCLING PROGRAM INSTITUTED IN COMPLETED BUILDING. OTHER  
MEASURES TO BE DETERMINED.

Have you considered using "green" building materials? Yes  No \_\_\_\_\_

Please explain any "Other" area(s) of energy conservation that you are incorporating in your project:

Will your project requiring grading? Yes  No \_\_\_\_\_ If Yes, and you are hauling 1,000 or more cubic yards of dirt off site, what is your haul route?

ABBOT KINNEY BLVD, WASHINGTON BLVD, LINCOLN BLVD, 90 FREEWAY

**13. BUSINESS INFORMATION**

Name of business: \_\_\_\_\_

Type of business: MARKET AND HOTEL

Hours of operation: MARKET - TBD ; HOTEL - 24/7

Hours of delivery? AM HOURS - TBD

Will liquor be sold? Yes \_\_\_\_\_ No

If Yes, does the business have an active liquor license? Yes \_\_\_\_\_ No \_\_\_\_\_

How is liquor sold? On site consumption \_\_\_\_\_ Off site consumption \_\_\_\_\_

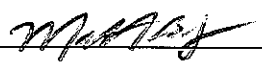
Type of liquor sold: Wine/beer only \_\_\_\_\_ Full liquor \_\_\_\_\_

**14. CONTACT INFORMATION**

Company Name PALISADES DEVELOPMENT GROUP  
Contact Name MATT FISHER  
Mailing Address 212 MARINE STREET, SUITE 100  
City, State, Zip SANTA MONICA, CA 90405  
Phone 310-456-2200 x 103  
Fax 310-456-2244  
E-Mail M.FISHER@PALISADESDEVGROUP.COM  
Web Site WWW.PALISADESDEVGROUP.COM

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

Name (please print) MATT FISHER

Signature 

-- For Committee Use Only --

Committee Action: