



# Grass Roots Venice Neighborhood Council

## Land Use and Planning Committee

### PROJECT INFORMATION FORM



#### 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 your project.
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.

#### 1. PROJECT INFORMATION

Today's Date	<u>Jan. 18, 2006</u>	Meeting Date	<u>Feb. 1, 2006</u>
Project Location	<u>201 Bernard Avenue</u>	Cross Streets	<u>Rose</u>
Applicant Name	<u>James Shaw</u>		
Presenter Name	<u>James Shaw</u>		
Presenters' relationship to applicant:	<u>self</u>		

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

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

2-story, approx. 4,000 sq. ft. single family home, 25 ft. max. ht. varied Roofline with roof deck, and roof access to 33 ft.

#### 3. PROJECT BACKGROUND

Is the Project located in the Venice Coastal Zone? Yes  No   
 If Yes, in which Venice Specific Plan Sub-area Oakwood, not dual jurisdiction

In which of the following Venice Coastal Zone areas is your Project located? (please check)

Venice Coastal Zone Specific Plan Area \_\_\_\_\_ Dual Jurisdiction Zone \_\_\_\_\_

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Status of Project (Select A or B)

A. Project is at a Preliminary/ Exploratory development state

B. Project Submitted to the City:

Application Date

1-3-6 most recent

Application Number

DIR2005-6946-VSO

Have you posted your Application Notice?

Yes

No

If Yes, when & where?

Oct. 2005 at front door above address

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? Yes  No  If No, what Conditional Use, Variance, Venice Specific Plan Exception, or Other Discretionary Actions are you requesting?

This project has already been approved by V.S.P., no variances requested.

Please explain your justification for a Conditional Use, Variance, Venice Specific Plan Exception, or Other Discretionary Action: \_\_\_\_\_

No exceptions requested. Project was presented to immediate neighbors

and NoRo Assoc.. All of my immediate neighbors approved. NoRo Assoc. disapproved.

Was your Project presented to the immediate neighborhood? Yes  No

Yes

No

If Yes, when Oct. 2005

(date) and to whom

Neighbors and NoRo Assoc.

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

## 4. ZONING

What is the Current zoning? RD2-1

Proposed zoning? \_\_\_\_\_

Is the Project compliant with the Community Plan Map?

Yes

No

Is the location on a Venice Specific Plan Walk Street?

Yes

No

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## 5. TYPE OF BUILDING

Business       Single Family       Mixed Use (Business/Residential)

Apartments:      \_\_\_\_\_ Units Permitted      \_\_\_\_\_ Units Proposed

Condos:      \_\_\_\_\_ Units Permitted      \_\_\_\_\_ Units Proposed

Other – please explain: \_\_\_\_\_

### SINGLE FAMILY - OWNER OCCUPIED

Will the property be Owner Occupied?      Yes       No

## 6. SIZE

Lot dimensions      42 X 100      Square footage of the lot      4,220

Improvements: Square footage permitted?      \_\_\_\_\_      Square footage proposed?      \_\_\_\_\_

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

## 7. HEIGHT

Maximum Height Permitted      35      Height Proposed      25 + 33

Actual Physical Number of Stories, including basements, garages, and/or underground parking      2

## 8. SETBACKS

	Required	Proposed
Front	<u>15</u>	<u>varied</u>
Side	<u>4</u>	<u>varied</u>
Rear	<u>7.5</u>	<u>varied</u>

Is there an easement(s)?      Yes       No       If Yes, list the easement(s) \_\_\_\_\_

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## 9. PARKING

Number of parking spaces      Required   3        Proposed   3  

Is the parking?                      On Site   X        Off Site             On & Off Site       

Is Valet parking provided?              Yes                     No   X  

Number of Spaces:                      Standard   2        Compact   1  

Configuration:                      Side by Side   2        Single   1                Tandem       

Is Beach Impact Zone Parking required?      Yes       No

    If Yes, what are the number of parking spaces required   not required  

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? \_\_\_\_\_

### NO TRAFFIC STUDY REQUIRED

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

    If Yes, please explain:   No mitigations required or provided.  

Exempt from Mello Act.

## 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

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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?  
not applicable

## 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?  
No EIR required. No special landscaping required by V.S.P.

What measures have you considered for energy conservation (solar panels, passive solar, etc.)?  
Solar panels, passive solar, and grey water irrigation if I can still afford these things after  
this prolonged approval process.

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:  
Solar tubes

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?  
no grading required.

## 13. BUSINESS INFORMATION

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

Type of business: \_\_\_\_\_

Hours of operation: \_\_\_\_\_

Hours of delivery? \_\_\_\_\_

Will liquor be sold? Yes  No

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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 \_\_\_\_\_

Contact Name James Shaw

Mailing Address 201 Bernard Avenue

City, State, Zip Venice, CA 90291

Phone 310-709-1544

Fax \_\_\_\_\_

E-Mail jshaw1@lausd.k12.ca.us

Web Site \_\_\_\_\_

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

Name (please print) james shaw

Signature \_\_\_\_\_

-- For Committee Use Only --

Committee Action: