

MASTER LAND USE PERMIT APPLICATION
LOS ANGELES CITY PLANNING DEPARTMENT

Planning Staff Use Only

Table with columns: ENV No., Existing Zone, District Map, APC, Community Plan, Council District, Census Tract, APN, Staff Approval, Date

* Approval for Filing by Community Planning or Division of Land Staff, When Applicable

CASE NO.

APPLICATION TYPE Conditional use permit for Beer/Wine Restaurant
(zone change, variance, conditional use, tract/apn map, specific plan exception, etc.)

1. PROJECT LOCATION AND SIZE

Street Address of Project 2805 ABBOTT KINNEY BLVD, #D #E Zip Code 90291

Legal Description: Lot 2-7 Block - Tract 587

Lot Dimensions Irregular Lot Area (sq. ft.) Total Project Size (sq. ft.) 2,112 sq ft

2. PROJECT DESCRIPTION

Describe what is to be done: CUP request to permit on-site beer & wine sales in conjunction with proposed 2,112 sq. ft. restaurant; 72 seats; with hours from 11am to 11pm daily.

Present Use: Restaurant Proposed Use: Restaurant

Plan Check No. (if available) Date Filed:

Check all that apply: [] New Construction [] Change of Use [] Alterations [] Demolition

[X] Commercial [] Industrial [] Residential

Additions to the building: [] Rear [] Front [] Height [] Side Yard

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.

request for CUP approval to permit on-site sales and consumption of beer and wine in conjunction with restaurant

Code Section from which relief is requested: Code Section which authorizes relief:

Code Section from which relief is requested: Code Section which authorizes relief:

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List related or pending case numbers relating to this site:

SIGNATURES of adjoining or neighboring property owners in support of the request; not required but helpful, especially for projects in single-family residential areas. (Attach sheet, if necessary)

NAME (Print)	SIGNATURE	ADDRESS	KEY # ON MAP

4. OWNER/APPLICANT INFORMATION

Applicant's Name Mr. Ii Company Takee International
 Address: 2805 Abbot Kinney Blvd Telephone: (310) 755-1430 Fax: ()
Venice, CA Zip: 90291 E-mail: _____

Property Owner's Name (if different than applicant) VENICE ONE, LLC % Kayvan Naimi
 Address: 325 S. GREINA GREENWAY Telephone: (310) 471-0210 Fax: 310-471-0520
LOS ANGELES, CA Zip: 90049 E-mail: FARINAZSN@AOL.COM

Contact Person for project information Kevin Franklin
 Address: 30408 Olympic St. Telephone: (213) 706-6997 Fax: ()
Castaic, CA Zip: 91384 E-mail: _____

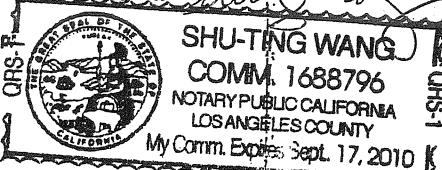
5. APPLICANT'S AFFIDAVIT

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: Kayvan Naimi
 Print: KAYVAN NAIMI
 Date: 9 Feb 2008

Subscribed and sworn before me this (date): 2, Feb 2008
 In the County of LA State of California

Notary Public Shu-Ting Wang
 Stamp: 

7. ADDITIONAL INFORMATION/FINDINGS See Attached

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 hand-out 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 on an application.

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Base Fee	Reviewed and Accepted by	Date
Receipt No.	Deemed Complete by	Date