



# County of Yolo

DEPARTMENT OF COMMUNITY SERVICES

Taro Echiburú  
DIRECTOR

**Planning, Building and Public Works**  
292 West Beamer Street  
Woodland, CA 95695-2598  
(530) 666-8775 FAX (530) 666-8156  
www.yolocounty.org

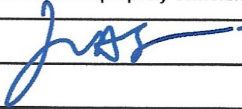
**Environmental Health**  
292 West Beamer Street  
Woodland, CA 95695  
(530) 666-8646

**Integrated Waste Management**  
44090 CR 28 H  
Woodland, CA 95776  
(530) 666-8852

## APPLICATION

Applicant Billing and Property Owner Information			
Applicant Teichert Materials		Company (if applicable) 3500 American River Dr.	
Billing Address 3500 American River Dr.			
City Sacramento	State CA	Zip 95864	Daytime Phone (916) 484-3317
Property Owner Triangle Properties			
Address 3500 American River Dr.			
City Sacramento	State CA	Zip 95864	Daytime Phone (916) 484-3317

Project Information	
Assessor's Parcel No. 025-350-010	Parcel size 132.3
Property Address/Location 16550 County Road 96	
Existing use of property Sand and Gravel Mining	
Tax Rate Area(s) (taken from property tax bill):	
Request	
Reclamation Plan Minor Modification to enhance final reclamation by adding additional riparian habitat. No change to Use Permit.	

Required Signatures	
<p>I hereby make application for the above-referenced land use entitlement and certify that this application, other documents, and exhibits submitted are true and correct to the best of my knowledge and belief. <b>Should any information or representation submitted in connection with this application form be incorrect or untrue, I understand that Yolo County may rescind any approval or determination, or take other appropriate action.</b></p> <p>I hereby acknowledge that I have been informed of my right to make written request to the County to receive notice of any proposal by the County to adopt or amend a general or specific plan, or a zoning ordinance or other ordinance affecting building or grading permits, prior to action on said item.</p> <p>I also certify that I am the owner of the above property or have attached the owner's written consent to file this application. If more than one, please attach a consent letter for each property owner. If owner refuses or is unable to sign, provide copy of lease, title report or other documentation. I understand that verification of property ownership or interests in the property or application may be required.</p>	
Applicant's/Owner's Signature 	Date 01/14/2021

For Office Use Only		
Received by:	Gen Plan:	Fee Received:
Date Received:	Gen Plan Designation:	Receipt #
Assigned Planner:	Zoning:	File # ZF

**PERMIT PROCESSING FEE AGREEMENT**

I, the undersigned, hereby authorize the County of Yolo to process the permit request on the previous side of this application in accordance with the Yolo County Code. I (the land owner and/or the applicant) am depositing a minimum initial deposit to cover staff review, coordination, and processing costs related to my application request based on actual staff time expended and other direct costs, including, but not limited to, outside consultant services, county counsel charges, and materials costs in accordance with the adopted Yolo County Fee Resolution and the Project Cost Reimbursement Agreement attached to this application. This initial deposit will be held by the County in a deposit account to pay for staff time and other charges spent processing the application. I understand that such costs will be drawn from the deposit account and that I will be billed on a "time and materials" basis in order to maintain a positive account balance at all times during the review process. I further understand that no work will be performed on the project with a negative fund balance. By signing below, I agree to pay all permitting costs, including requests to supplement the deposit account, plus any accrued interest, if the applicant does not pay costs.

I agree not to alter the physical condition of the property during the processing of this application by removing trees, demolishing structures, altering streams, and grading or filling. I agree not to start construction of any new structures prior to permit approval. I understand that such alteration or new construction may result in the imposition of criminal, civil or administrative fines or penalties, or may result in the delay or denial of the project application.

**FISH AND GAME REVIEW FEES:** I understand that my application and/or any applicable environmental document for my project may be referred to the California Department of Fish and Wildlife (CDFW) for review and comment in accordance with the provisions of the California Environmental Quality Act. Should this review be required, I understand that I must pay all fees for the cost of CDFW review as required by Section 711.4 of the Fish and Game Code (currently \$2,406.75 for Negative Declarations or \$3,343.25 for Environmental Impact Reports, plus \$50.00 County Clerk fee). Should these fees be required, I agree to remit a cashier's check or money order in the required amount, payable to the Yolo County Clerk, to the Planning Division prior to the posting of any Notice of Determination following project approval.

**MITIGATION FEES OR REQUIREMENTS:** I further understand that my project, if approved, may be subject to one or more mitigation fees including the following fees current as of 2020:

- Yolo HCP/NCCP land cover fee\*:** \$14,950 per acre of impact to all applicable land cover types
  - Yolo HCP/NCCP fresh emergent wetland fee\*:** \$76, 042 per acre of impact to fresh emergent wetland areas
  - Yolo HCP/NCCP valley foothill riparian fee\*:** \$84, 217 per acre of impact to valley foothill riparian areas
  - Yolo HCP/NCCP lacustrine and riverine fee\*:** \$60.986 per acre of impact to lacustrine or riverine areas
  - Agricultural mitigation in lieu fee:** \$10,100 per acre of farmland converted (for projects less than 20 acres)
  - Inclusionary Housing in lieu fee:** sliding scale for projects under 8/10 units (\$1,292 for single family house)
- \*Fee amounts subject to change in March of each year per the conditions outlined in the Yolo HCP/NCCP*

**AFFIDAVIT OF CERTIFIED PROPERTY OWNERS**

I further certify that the attached list of property owners contains the names and addresses of all persons to whom all property is assessed as they appear on the latest available assessment roll of the County within the area described on the attached application and for a distance of three hundred feet (300) from the exterior boundaries of the property described on the attached application.

I certify under penalty of perjury that the foregoing is true and correct.

**CERTIFICATION STATEMENT OF HAZARDOUS WASTE OR SUBSTANCE SITE**

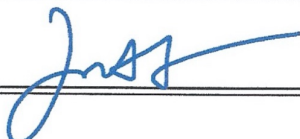
Pursuant to the requirements of Section 65962.5 of the California Government Code, I certify that the project site for the above entitlement is not located on the State list of identified hazardous waste/or hazardous substance sites.

**Required Signatures**

I hereby certify that I have read all the above information on this page. All this information is correct and I agree to abide by the requirements therein.

PROPERTY OWNER OR AUTHORIZED REPRESENTATIVE:

NAME Jason Smith

SIGNATURE:  DATE 01/14/2021

**INDEMNIFICATION AGREEMENT**

As part of this application, applicant and real party in interest if different, agree to defend, indemnify, hold harmless, and release Yolo County, its agents, officers, attorneys, and employees from any claim, action, or proceeding brought against any of them, the purpose of which is to attack, set aside, void, or annul the approval of this application or adoption of the environmental document, which accompanies it. This indemnification obligation shall include but not be limited to: damages, costs, expenses, attorney fees, or expert witness fees that may be asserted by any person or entity, including the applicant, arising out of or in connection with the approval of this application, whether or not there is concurrent passive negligence on the part of Yolo County, its agents, officers, attorneys, or employees.

APPLICANT: Jason Smith

Signature: 

Mailing Address: 3500 American River Dr. Sacramento, CA 95864

REAL PARTY INTEREST: \_\_\_\_\_  
(If different from Applicant)

Signature: \_\_\_\_\_

Mailing Address: \_\_\_\_\_