

## **COUNTY OF YOLO**

## **VARIANCE**

Department of Community Services 292 West Beamer Street Woodland, California 95695-2598

(530) 666-8775

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

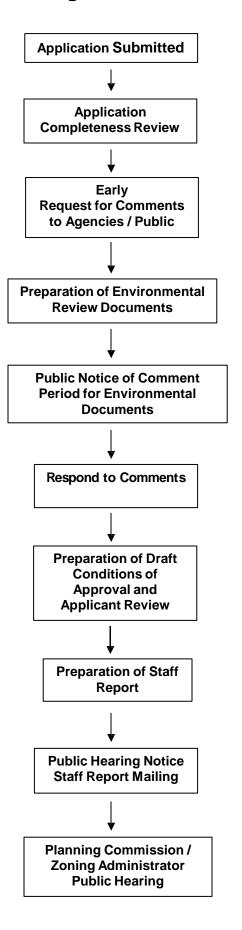
Environmental Health 292 West Beamer Street Woodland, CA 95695 (530) 666-8646 Integrated Waste Management 44090 CR 28 H Woodland, CA 95776 (530) 666-8852

## VARIANCE APPLICATION REQUIRED MATERIALS

The following list specifies the information needed to submit the proposed application.

|   | •                 |
|---|-------------------|
| ITEM  | Received          |
| <b>Application Fee</b> (s): Verify applicable fees with a Planner; an initial deposit must be included to review application for completeness               | Planning deposit: |
| Application Form (both sides, signed)   |                   |
| Environmental / Project Site Questionnaire  |                   |
| <b>Letter</b> describing the extraordinary circumstances of the property and justification for the Variance (See attached Findings required for a Variance) |                   |
| Location Map (may be combined with the Site Plan, below)  |                   |
| Site Plan (see attached site plan sample and Site Plan Requirements)  |                   |
| One 8½ x 11 reduction of all maps, plans, etc.  |                   |
| Assessor's Parcel Map (project site outlined)   |                   |
| Surrounding Property Owners List (one original & three gummed mailing labels) (See attached instructions)   |                   |
| Preliminary Title Report or Copy of Deed  |                   |
| Digital files of all the application plans and materials, as available  |                   |
| Additional Information: Depending upon the exact nature of the application, ac information may be required after submittal of the projection.               |                   |

## **Planning Permit Process**



**Applicant Billing and Property Owner Information** 

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 Company (if applicable)  |                                  |   |                                   |  |
|--|----------------------------------|---|-----------------------------------|--|
| Mailing Address  |                                  |   |                                   |  |
| City   | State                            | Zip                                       | Daytime Ph                        | one  |
| Property Owner   |                                  |   |                                   |  |
| Address  |                                  |   |                                   |  |
| City   | State                            | Zip                                       | Daytime Ph                        | one  |
|  |                                  |   |                                   |  |
| Project Information  |                                  |   |                                   |  |
| Assessor's Parcel No.  |                                  |   |                                   | Parcel size                                  |
| Property Address/Location  |                                  |   |                                   |  |
| Existing use of property   |                                  |   |                                   |  |
| Tax Rate Area(s) (taken from   | property ta                      | x bill):                                  |                                   |  |
| Application Request:   |                                  |   |                                   |  |
|  |                                  |   |                                   |  |
| Required Signatures  |                                  |   |                                   |  |
| I hereby make application for the abo<br>documents, and exhibits submitted a<br>information or representation sub<br>untrue, I understand that Yolo Cou<br>appropriate action. | are true and o<br>mitted in co   | correct to the best nnection with thi     | of my knowledg<br>s application f | e and belief. Should any orm be incorrect or |
| I hereby acknowledge that I have be notice of any proposal by the County other ordinance affecting building or   | to adopt or                      | amend a general o                         | or specific plan,                 |  |
| I also certify that I am the owner of the application. If more than one, please unable to sign, provide copy of lease property ownership or interests in the                   | attach a cor<br>, title report o | nsent letter for eac<br>or other document | h property owneration. I understa | er. If owner refuses or is                   |
| Applicant's/Owner's Signature  | !                                |   | Date                              |  |

#### 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 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 on a "time and materials" basis and that I will receive statements of amounts billed with the account balance. I understand that I will be asked to replenish the deposit as it is drawn down so the account maintains a positive balance and an adequate deposit is maintained to cover all anticipated costs 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 late fees, accrued interest, and collection costs, 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 WILDLIFE 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 \$2,480.25 for Negative Declarations or \$3,445.25 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.

<u>MITIGATION FEES OR REQUIREMENTS:</u> 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 <u>not</u> located on the <u>State list of identified hazardous waste/or hazardous substance sites.</u>

| D | EQ         | ПП | D | 3 | g           | CI | JΛ  | •   | В   | П | 3 |
|---|------------|----|---|---|-------------|----|-----|-----|-----|---|---|
|   | <b>—</b> • | W. |   |   | <b>Æ</b> ●1 | 11 | · - | 16. | 167 | _ | • |

| 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  |   |
|   |   |
| SIGNATURE:  | DATE  |
| OIONATORE.  | DAIL _                                      |

## **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:  |   |
|---|---|
| Signature:  |   |
| Mailing Address:                                  | _ |
| REAL PARTY INTEREST:(If different from Applicant) | _ |
| Signature:  | _ |
| Mailing Address:                                  | _ |



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## **Project Cost Reimbursement Agreement**

| ,                                  | , the undersigned, hereby authorize the County of Yolo to                      |
|------------------------------------|--|
| process permit request <b>ZF</b> _ | in accordance with the Yolo County Code. I am depositing                       |
| \$                                 | as an <i>initial</i> deposit to pay for County staff review, coordination, and |
| processing costs related to        | my application request based on actual staff time expended and other costs,    |
| ncluding, but not limited to       | o, costs for outside consultants' services, legal review, and materials and    |
| equipment.                         |  |

In making this initial deposit, I acknowledge and understand that the initial deposit may only cover a portion of the total processing costs and additional deposits may be required to cover the total processing costs. Actual costs for staff time are based on hourly rates adopted by the Board of Supervisors in the most current Yolo County master fee schedule and include allowable direct and indirect costs. Actual Costs may also include other costs, such as consultant costs. I also understand and agree that I am responsible for paying these costs even if the application is withdrawn, not approved, or appealed. I understand and agree to the following terms and conditions of this Reimbursement Agreement:

1. Time spent by Yolo County staff in processing my application and any outside costs will be billed against the available deposit. "Staff time" includes, but is not limited to, time spent reviewing application materials, site visits, responding by phone or correspondence to inquiries from the applicant, the applicant's representatives, neighbors and/or interested parties, attendance and participation at meetings and public hearings, preparation of staff reports and other correspondence, processing of any appeals, responding to public records act requests or responding to any legal challenges related to the application. "Staff" includes any employee of the Department of Community Services and/or the Office of the County Counsel. Other costs may include outside services used, such as consultant charges. This agreement does not include other agency review fees or the County Clerk Environmental Document filing fees,
Agricultural/Habitat Mitigation fees, or fees collected by other divisions that may charge

separately for their review (such as Building permit fees and Environmental Health fees) or other required flat rate fees and charges.

- **2.** I agree to pay all costs related to permit condition compliance as specified in any conditions of approval for my permit/entitlement.
- **3.** I understand that approval of my application may result in additional fees including, but not limited to, Yolo Habitat Conservancy mitigation fees, Yolo Agricultural Conservation and Mitigation Program fees, filing fees, and other County permit application fees.
- **4.** Staff will review the application for completeness and provide me with a good faith estimate of the full cost of processing the permit. The good faith estimate is not a guarantee of maximum costs.
- **5.** I will receive monthly statements showing the costs applied, and the available balance. I will be asked to replenish the deposit as needed to maintain a positive balance.
- 6. I understand that the County desires to avoid incurring permit processing costs without having sufficient funds on deposit. If staff determines that inadequate funds are on deposit for continued processing (usually less than 20% of the initial deposit), staff will notify me in writing and request an additional deposit amount estimated necessary to complete processing of my application, no less than 50% of the original deposit. I agree to submit sufficient funds as requested by staff to process the project through the hearing process within 30 days of the request.
- **7.** If the final cost is less than any additional deposits requested by the County and funds remain on deposit, the unused portion of the additional deposit will be refunded to me within approximately 90 days of final project action.
- **8.** If the final cost is more than the available deposit, I agree to pay the difference within 30 days of final project action or prior to ground disturbance and/or building permit issuance.
- **9.** I understand, if I fail to pay any invoices or requests for additional deposits within 30 days, the County may either stop processing my permit application, consider my application withdrawn, or after conducting a hearing, deny my permit application. If I fail to pay any invoices after my application is approved, I understand that my permit may not vest and may expire, or may be subject to revocation.
- **10.** I agree to pay for any County consultant costs related to my application. If the County determines that any study submitted by the applicant requires a County-contracted consultant peer review, I will pay the actual cost of the consultant review. These costs may vary depending on the

complexity of the analysis. Selection of any consultant shall be at the sole discretion of the Yolo County Department of Community Services. The estimated cost shall be paid prior to the County initiating any work by the consultant.

- **11.** I agree to pay the actual cost of any public notices or filing fees for the project as required by State law and local ordinance.
- **12.** I understand that if I fail to pay costs that I will be charged late fees, interest and collection costs. I furthermore agree to pay any late charges, interest and collection costs accrued as a result.

| Name of Property Own                              | ner or Corporate Principal Resp       | oonsible or Appointed Designee for Payment of all   |
|---|---------------------------------------|---|
| County Processing Fee                             | es (Please Print):                    |   |
| Name of Company or                                | Corporation ( <i>if applicable</i> ): |   |
| Billing Address of the I                          | Property Owner or Corporation         | n/Company responsible for paying processing fees:   |
| If a Corporation, pleas<br>behalf of the Corporat | -                                     | d titles of Corporate officers authorized to act on |
| Signature   |                                       | Date  |
|   | operty owner will be held resp        | Phone Number onsible for all charges.               |
| To be completed by P                              | lanner                                |   |
| Zone File:  | ; Project Request                     |   |
| Receipt Number:                                   |                                       | Date  |

# ENVIRONMENTAL / PROJECT SITE QUESTIONNAIRE

| A. | PROPOSED PROJECT SITE |
|----|-----------------------|
|    |                       |

| 1.  | Assessor Parcel Number(s):   |
|-----|--|
| 2.  | Location (nearest public road, cross street, community, etc):                |
| 3.  | Size of Assessor Parcel Areas(s):sq. ft./acres                               |
| 4.  | Existing Land Use(s):  |
| 5.  | Existing Building(s) and Structure(s):                                       |
| 6.  | Distinctive Physical Features (i.e. landslides, streams, faults):            |
| 7.  | Existing Vegetation:   |
| 8.  | Existing Access Routes (if any):   |
| 9.  | Existing Drainage Facilities/Direction:                                      |
| 10. | Existing Water Supply (if any):  |
| 11. | Existing Sanitation Facilities (if any):                                     |
| 12. | List and Describe all Existing Easements:                                    |
| 13. | Owner(s) of Mineral Rights:  |
| 14. | Existing Land Conservation Contract and/or other deed restrictions (if any): |

## B. SURROUNDING PROPERTIES AND LAND USES

| 1.     | Land Uses (including type of c       | rops if agricultural).           |
|--------|--------------------------------------|----------------------------------|
| North: | : Sc                                 | outh:                            |
| East:_ | w                                    | est:                             |
| •      |                                      |                                  |
| 2.     | Buildings and Structures (indicated) | ate distance from project site). |
| North: | : Sc                                 | outh:                            |
| East:_ | w                                    | est:                             |
| 3.     | Distinctive Physical Features a      | nd Vegetation.                   |
| North: | Sc                                   | outh:                            |
| Fast:  | w                                    | est·                             |

## VARIANCE REQUIRED FINDINGS

According to Section 8-2.218 of the County Code, the purpose of a variance is to allow variation from the strict application of the provisions of this chapter (Chapter 2) where special circumstances pertaining to the physical characteristics and location of the site are such that the literal enforcement of the requirements of this chapter would involve practical difficulties or would cause hardship and would not carry out the spirit and purposes of this chapter and the provisions of the General Plan.

According to Section 8-2.218(e) of the County Code, a variance may be granted only when, in accordance with the provisions of Section 65906 of Article 3 Chapter 4 of Title 7 of the Government Code of the State, all of the following circumstances are found to apply:

- (a) That any Variance granted shall be subject to such conditions as will assure that the adjustment thereby authorized shall not constitute a grant of special privilege inconsistent with the limitations upon other properties in the vicinity and zone in which the subject property is situated;
- (b) That, because of special circumstances applicable to the subject property, including size, shape, topography, location, or surroundings, the strict application of the provisions of this chapter is found to deprive the subject property of privileges enjoyed by other properties in the vicinity and under the identical zone classification; and,
- (c) That the Variance shall not be granted for a parcel of property which authorizes a use or activity which is not otherwise expressly authorized by the zone regulation governing the parcel of property, excluding uses allowed by conditional Use Permit; and
- (d) That the granting of such variance will be in harmony with the general purpose and intent of this chapter and will be in conformity with the Master Plan.

#### **Minor Variances**

Section 8-2.216(b) of the County Code states:

- (b) The Zoning Administrator may approve Minor Variances to the otherwise applicable standards and design criteria set forth in this subsection, and to the extent set forth, after making the Findings set forth in Section 8-2.218. Variances that exceed the modifications in the applicable standards and design criteria are Major Variances that must be considered by the Planning Commission. Minor Variances include:
  - (1) In any zone, modifications of the front, side, or rear yard setback requirements; provided, however, the total modification shall not reduce the applicable setbacks to less than seventy-five (75%) percent of those otherwise required in the zone;
  - (2) In any zone, modifications of building heights; provided, however, such building heights shall not exceed 125 percent of the otherwise applicable maximum height in the zone;
  - (3) In any zone, modifications of the minimum lot area, width, and depth; provided, however, such modifications shall not reduce the total lot area to less than seventy-five (75%) percent of that otherwise required in the zone; and
  - (4) In any zone, modifications of the maximum area or height of signs otherwise applicable in the zone; provided, however, such modifications shall not result in a sign exceeding 125 percent of either the maximum height or maximum size otherwise applicable in the zone.

## SITE PLAN REQUIREMENTS

The site plan shall be on a sheet NO LARGER than 24" x 36", except as otherwise specified by the pre-submittal planner. A clearly readable and reproducible reduction is also required if your site plan is larger than  $8\frac{1}{2}$ " x 11". The north side of the lot should be at the top of the plan. **Please see an attached sample site plan**. The following outline contains those items to be included on your site plan, **if applicable**:

## A. PHYSICAL CHARACTERISTICS

The physical characteristics of the project need be accurately portrayed on the site plan include (where applicable):

- 1. North arrow and scale (preferably not less than 1'' = 20').
- 2. Exterior dimensions of the property.
- 3. Setback dimensions (from property lines to structures) and distances between structures.
- 4. Existing and proposed structures labeled "existing" and "proposed". Locations of existing and proposed wells, septic tanks, leach lines and replacement areas.
- 5. Physical features of the site, including mature trees, topographical contours, and landmarks.
- 6. Use(s) of structures, noting those existing structures to be removed, including abandoned wells.
- 7. Gross floor area of each structure (may be shown on the structure or in the legend).
- 8. Existing and proposed paved areas, including type of surfacing and widths of all driveways, access easements, walks and rights-of-way.
- 9. Adjacent streets with names.
- 10. Location of existing and proposed easements (including utility easements).
- 11. Existing and proposed drainage facilities, including surface drainage patterns.
- 12. Location of fire hydrants, freestanding lighting fixtures, walls and fences.
- 13. Location of existing and proposed signs.
- 14. Location and dimensions of paved off-street parking (garage or carport will meet the off-street parking requirement).
- 15. Identify adjacent land uses (residential, commercial, industrial, agricultural)

- 16. Multi-family Residential and Commercial/Industrial only:
  - a. Treatment of open areas, including recreational facilities, landscaping, storage and operations yards, etc.
  - b. Location of trash enclosures.
- c. Square footage of proposed and existing construction. If WAREHOUSE or OFFICE, specify what percentage of office to warehouse space.
  - d. On-site parking, circulation and lighting.
    - Layout and dimensions of parking area and spaces, including those for the handicapped; number the parking spaces and circle the highest number.
    - Direction of traffic flows (shown with arrows).
    - 3. Off-street loading spaces and facilities (commercial/industrial only).
    - 4. Bicycle and motorcycle parking.
    - 5. Concrete curbing and retaining wall details.

#### B. TITLE BLOCK

A TITLE BLOCK shall be provided in one corner of each page of the plot plan, and contain the following information:

- 1. Proposed use(s).
- 2. Name, address and phone number of property owner and engineer or architect.
- 3. Assessor's Parcel Number and Project address (if applicable).

## C. LOCATION MAP

A LOCATION MAP shall be provided on a separate map or page and include the following:

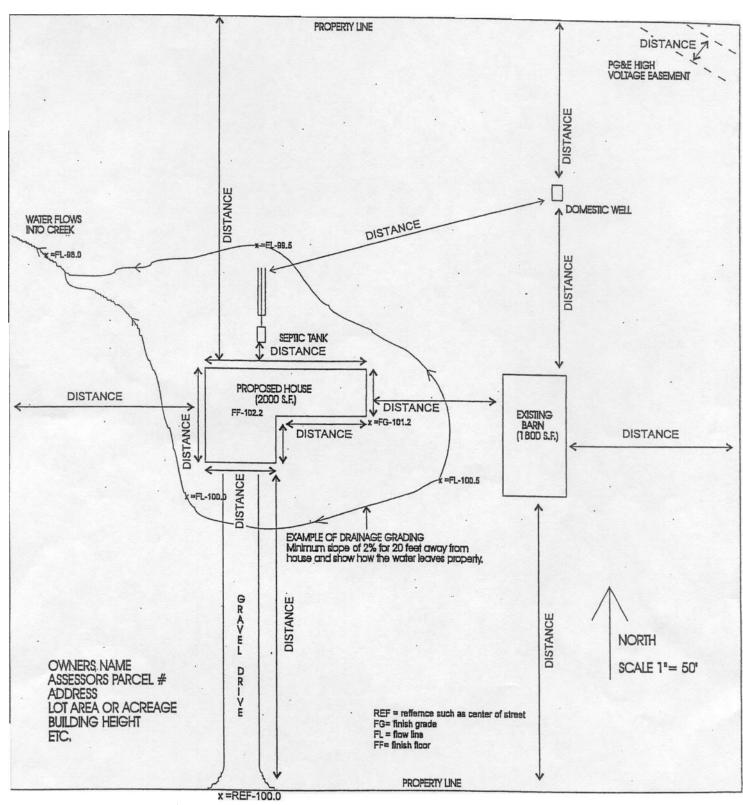
- 1. North arrow and scale.
- 2. Existing street pattern with names (from the property to the first public road). If the property is ¼ mile or more from the nearest public road, an approximate distance shall be shown.
- 3. Subject property identified with cross-hatching.

#### D. LEGEND

A LEGEND shall be provided, and shall include the following information:

- 1. Gross acreage of subject property and net area of property (excluding streets and access easements).
- 2. Number of required and proposed parking and loading spaces and parking area size in square feet.
- 3. Building coverage (square footage of structures divided by square footage of property).
- 4. Percentage of landscaping provided based on the gross area of site, parking and drive areas.

## SAMPLE SITE PLAN



(without a true survey a point is picked as the reference elevation as the center of the street)

C)DIM ROAD such

## INSTRUCTIONS FOR OBTAINING PROPERTY OWNERS' NAMES & ADDRESSES

For the purpose of legal noticing, the Planning Division requires each applicant to submit a typewritten list of the property owners and their addresses for all parcels within 300 feet of the exterior boundaries of the parcel(s) on which the project is to be located.

The property owners' names and addresses should be obtained in the following manner:

- 1. From the County Assessor's Office obtain the Assessor's Map(s) covering the subject property and all parcels within 300 feet of the exterior boundaries of the parcel(s) on which your project is to be located.
- 2. Indicate the area of your project by outlining the entire subject parcel in red on the Assessor's Map, even if your request includes only a portion of a parcel.
- 3. Draw a line that is at a distance of 300 feet around the outer red outline of the boundaries of the parcel you outlined in step 2. This 300 foot line may fall on adjoining maps. Only one copy of each map on which the 300 foot radius line falls is required.
- 4. Using address label sheets write down the book, page and parcel number of the subject parcel and of all parcels touched by or included within the 300-foot area.
- 5. Now, using the Assessor's Books, look up the Assessor's Parcel Numbers recorded on the Address Label Sheet and copy down the names and addresses of the owners of each parcel identified. The roll would read as follows:

05003 012-345-67 Drake, John-Linda 7813 El Dorado Street Woodland, CA 95695

Type on a gummed label sheet the names and addresses copied down, so they appear like the following example:

JOHN AND LINDA DRAKE name first) 7813 EL DORADO STREET WOODLAND CA 95695 APN 012-345-67 (Remember that the name in the Roll books will appear last

- 6. Additionally, add to the ADDRESS LABEL SHEET the names and addresses of ALL PROPERTY OWNERS whose land fronts on or is traversed by any private road used to gain access to the proposed site from a public road.
- 7. Also add to the ADDRESS LABEL SHEET the property owner's and the project applicant's name and address as well as all parties that you believe should receive notice of the proposed project. These might include mineral rights holders, the home office of the permittee, citizen groups, etc. Be sure to include the applicant's engineer or representative.
- 8. Include with your application the original <u>typed</u> copy of the property owner sheet, three additional sets on gummed mailing labels, and the signed Affidavit of Certified Property Owners' List.
- 9. The person completing the 300-foot list must sign the Certified Property Owner's List certifying that the attached property owners' list contains the names and addresses of all property owners as they appear on the latest assessment roll of the county within the area described on the attached application and for a distance of three hundred (300) feet from the exterior boundaries of the property described on the application. <a href="NOTE">NOTE</a>: Failure to submit a complete and correct property owners' list may result in the nullification of your permit or a delay in permit processing.



## April Meneghetti, REHS Director of Environmental Health

## County of Yolo

## DEPARTMENT OF PLANNING, PUBLIC WORKS AND ENVIRONMENTAL SERVICES

#### **Environmental Health Division**

292 W. Beamer Street, Woodland, CA 95695 PHONE - (530) 666-8646 FAX - (530) 669-1448

## **ENVIRONMENTAL HEALTH LAND USE REVIEW SURVEY**

A Building Permit Application may require a review from Yolo County Environmental Health (YCEH) to ensure the compliance with County, State and Federal laws and regulations. Please complete this survey and answer questions pertaining to each YCEH unit to the best of your knowledge, and submit it as part of your complete application. This survey should be completed by the property owner or the business operator.

|   |         | ·  |                        |               |           |             |                    |
|---|---------|--|------------------------|---------------|-----------|-------------|--------------------|
| Site address:                                 |         |  | City: Zip code:        |               |           |             |                    |
| Existing business? $\square$ Yes $\square$ No |         |  | If yes, name of busine | ess:          | •         |             |                    |
| Property and/or                               | owner   | of business name:  | -                      |               |           |             |                    |
| Phone number:                                 |         |  | Email:                 |               |           |             |                    |
| Mailing address:                              |         |  | City: Zip code:        |               |           |             |                    |
| Building Permit                               | : #:    | Project Description: (Please describe "Remodeling a house for use as an Office": |                        | pecifically a | as possib | le; such as | "New house" or     |
|   |         |  |                        |               |           |             |                    |
| EH Program                                    | Envir   | onmental Health Questions  | :                      | YES           | NO        | N/A         | Why is this asked? |
| ALL   | Is this | project for a commercial use?  |                        |               |           |             | Some EH programs   |

| EH Program   | Environmental Health Questions:  | YES | NO | N/A | Why is this asked?   |
|--|--|-----|----|-----|--|
| ALL  | Is this project for a commercial use?  |     |    |     | Some EH programs regulate only commercial facilities.                                  |
| SEPTIC<br>SYSTEM:<br>If on City<br>Sewer                         | Is a building/structure getting bigger; is the footprint of a building/structure is expanding out of the original footprint?   |     |    |     | Septic setbacks are<br>required with<br>adequate<br>replacement area                   |
| System, check here:  *   | Will this project include adding a structure/building/foundation to the land that will be an additional footprint?   |     |    |     | Septic setbacks are<br>required with<br>adequate<br>replacement area                   |
| * Go to next<br>EH Program.<br>ONLY answer                       | Will this project have a wastewater flow or will it alter the existing wastewater flow?  |     |    |     | Needs to meet<br>septic installation<br>requirements                                   |
| questions if a<br>septic system<br>exists on<br>parcel<br>- OR – | Will this project change the wastewater flow in any way (decrease or increase)?  For example, adding bedrooms or potential sleeping rooms, or changing the use of the structure, such as residential to commercial |     |    |     | This will affect the existing septic system, and the system will need to be evaluated. |
| the parcel will<br>be serviced by<br>a future septic             | Grading permits only: will the project have an impact on the existing soils on the parcel?   |     |    |     | This could affect future septic system developments.                                   |
| system:  | Is there an unused septic system on this parcel?   |     |    |     | Abandonment under permit is required.  |

| EH Program                 | Environmental Health Questions:  | YES | NO | N/A | Why is this asked?                   |  |
|----------------------------|--|-----|----|-----|--------------------------------------|--|
| WELL /                     | Will this project replace one structure for another that already   |     |    |     | If it is on city water,              |  |
| <b>WATER USE:</b>          | has a well service connection?   |     |    |     | not an EH issue.                     |  |
|                            | For example, replacing a modular home with a new modular home.   |     |    |     |                                      |  |
| If on City                 | Will this project use an existing well service connection to the   |     |    |     | No need for EH                       |  |
| <u>Water</u>               | structure?   |     |    |     | review if there is an                |  |
| System or                  | For example, remodeling a house or other structure that is already   |     |    |     | existing service connection          |  |
| <u>another</u>             | connected to the well.   |     |    |     |                                      |  |
| approved                   | Will this project require new piping to connect from a well or well  |     |    |     | The well should                      |  |
| Public Water               | water line to the project (i.e., a new connection)?  |     |    |     | have an approved permit; if not, the |  |
| System,                    | Will there be 15 or more buildings or physical structures  |     |    |     | well requires                        |  |
| check                      | supplied by this well?   |     |    |     | evaluation.                          |  |
| here: □ *                  | <ul> <li>Will there be 5-14 buildings or physical structures<br/>supplied by this well?</li> </ul>   |     |    |     | There could be                       |  |
| * Go to next               | Does this well serve 25 or more people daily, at least 60  |     |    |     | public water system                  |  |
| EH Program.                | days per year (can be non-consecutive days)?   |     |    |     | or state small water                 |  |
| ONLY Answer questions if a | Does the water system serve 25 or more year-long   |     |    |     | system requirements.                 |  |
| water well                 | residents (year-long residents is at least 183 days/year)?   |     |    |     | requirements.                        |  |
| exists on this             | Is there an unused water well on this parcel?  |     |    |     | Abandonment under                    |  |
| parcel:                    |  |     |    |     | permit is required                   |  |
|                            |  |     |    |     | after 1 year of non-                 |  |
| SOLID                      | Will this project, or does activity on this parcel, result in  |     |    |     | use. Permit required                 |  |
| WASTE:                     |  |     |    |     | remmi required                       |  |
| WASIL.                     | handling yard trimmings, untreated wood wastes, natural  |     |    |     |                                      |  |
|                            | fiber waste, or construction and demolition wood waste?  |     |    |     |                                      |  |
|                            | <ul> <li>If yes, will these materials be managed in a way which<br/>would allow them to reach 122 degrees Fahrenheit (i.e.,<br/>composting, excessive storage times, etc.)?</li> </ul> |     |    |     |                                      |  |
| FOOD:                      | Will this project, or does activity on this parcel, result in retail   | _   |    | _   | Permit required,                     |  |
| FOOD.                      | food facility activities?  |     |    |     | including a plan                     |  |
|                            | "Retail" means handling food for dispensing or sale directly to the  |     |    |     | check prior to                       |  |
|                            | consumer or indirectly through a delivery service. For example:  |     |    |     | building permit                      |  |
|                            | storing, preparing, packaging, serving, vending or otherwise   |     |    |     | issuance.                            |  |
|                            | providing food (any edible substance incl. beverage and ice) for   |     |    |     |                                      |  |
|                            | human consumption at the retail level.   |     |    |     |                                      |  |
| POOL/SPA:                  | Will this project result in a public pool/spa?   |     |    |     | Permit required,                     |  |
|                            | A public pool/spa includes but is not limited to pools/spas located at   |     |    |     | including a plan                     |  |
|                            | hotels, motel, parks, apartments, schools, health clubs, etc.  |     |    |     | check prior to building permit       |  |
|                            |  |     |    |     | issuance.                            |  |
| BODY ART:                  | Will this project, or does activity on this parcel, result in tattooing,   |     |    |     | Permit required,                     |  |
|                            | body piercing, or permanent cosmetics activities?  |     |    |     | including a plan                     |  |
|                            | ,  |     |    |     | check prior to                       |  |
|                            |  |     |    |     | building permit                      |  |
|                            |  |     |    |     | issuance.                            |  |
| WASTE TIRE:                | Will this project, or does activity on this parcel, result in  |     |    |     | Permit required                      |  |
|                            | generating waste tires onsite?   |     |    |     |                                      |  |
|                            | Will this project, or does activity on this parcel, result in hauling  |     |    |     |                                      |  |
|                            | 10 or more waste tires at a time?  |     |    |     |                                      |  |
|                            |  |     |    |     |                                      |  |

| EH Program        | <b>Environmental Health Questions:</b>  |  | NO | N/A | Why is this asked?                |
|-------------------|---|--|----|-----|-----------------------------------|
| HAZARDOUS         | 1. Will this project, or does any activity on this parcel, result in              |  |    |     | May be required by                |
| <b>MATERIALS:</b> | the handling or storing of any hazardous materials in a                           |  |    |     | State law to submit               |
|                   | commercial capacity? *  |  |    |     | a Hazardous                       |
|                   | Please note: a hazardous material is a chemical that is flammable,                |  |    |     | Materials Business                |
|                   | corrosive, reactive or toxic. This could include organic pesticides.              |  |    |     | Plan to YCEH. Failure to comply   |
|                   | 2. Will this project or does activity on this parcel generate                     |  |    |     | with this                         |
|                   | hazardous materials waste in a commercial capacity? *                             |  |    |     | requirement could                 |
|                   | For example, used oil.  |  |    |     | result in fines of up             |
|                   | *Supplemental Hazardous Materials questions:                                      |  |    |     | to \$2000.00/day.                 |
|                   | If you answered "yes" to #1 or #2 of the above HM questions,                      |  |    |     | Business plans                    |
|                   | answer a) through i) questions below.   |  |    |     | must be filed by                  |
|                   | If you answered "no" to #1 or #2 of the above HM questions,                       |  |    |     | going to the                      |
|                   | mark N/A.   |  |    |     | California<br>Environmental       |
|                   | a) Million ha handling handling materials in growthing                            |  |    |     | Reporting System                  |
|                   | a) Will you be handling hazardous materials in quantities                         |  |    |     | (CERS) website                    |
|                   | greater than 500 pounds, 55 gallons or 200 cubic feet of compressed gas?          |  |    |     | cers.calepa.ca.gov,               |
|                   |   |  |    |     | creating an                       |
|                   | b) Will you be repairing or maintaining motor vehicles or<br>motorized equipment? |  |    |     | account, entering                 |
|                   |   |  |    |     | required hazardous                |
|                   | <ul><li>If yes, will your facility handle any of the following:</li></ul>         |  |    |     | materials                         |
|                   | motor oil, gasoline, grease, antifreeze, hydraulic oil,                           |  |    |     | information, and submitting the   |
|                   | and/or diesel?  |  |    |     | information for                   |
|                   | c) Will you have an above ground storage tank?                                    |  |    |     | approval by YCEH.                 |
|                   | d) Will you be selling motor vehicle fuel?  |  |    |     | For assistance with               |
|                   | <ul> <li>If yes, will you have an underground storage tank? +</li> </ul>          |  |    |     | CERS, or any other                |
|                   | e) Will you be engaging in welding operations?                                    |  |    |     | hazmat questions,                 |
|                   | <ul> <li>If yes, will you be handling more than one cylinder of</li> </ul>        |  |    |     | call our office at                |
|                   | acetylene, oxygen, shielding or other welding gasses?                             |  |    |     | 530.666.8646 and ask for a hazmat |
|                   | f) Will you be operating forklifts?   |  |    |     | specialist.                       |
|                   | <ul> <li>If yes, will you be storing more than one extra cylinder</li> </ul>      |  |    |     |                                   |
|                   | of propane?   |  |    |     |                                   |
|                   | g) Will you be storing batteries with 55 gallons or more of                       |  |    |     | + Tank installations              |
|                   | acid?   |  |    |     | require a plan                    |
|                   | h) Will you be engaging in photography?   |  |    |     | review.                           |
|                   | <ul> <li>If yes, will you be generating photographic waste fluid?</li> </ul>      |  |    |     |                                   |
|                   | i) Will you be engaging in x-ray processing?                                      |  |    |     |                                   |
|                   | <ul> <li>If yes, will you be generating x-ray processing waste</li> </ul>         |  |    |     |                                   |
|                   | fluid?  |  |    |     |                                   |
|                   | 3. Are there unused/abandoned hazardous materials storage                         |  |    |     | Permit required for               |
|                   | containers on this site? For example, above-ground tanks or                       |  |    |     | abandonments.                     |
|                   | underground tanks or barrels.   |  |    |     |                                   |
|                   |   |  |    |     |                                   |

I hereby certify that the information given in this Yolo County Environmental Health Land Use Survey document is true and correct to the best of my knowledge:

| Signature:  | Date:      |  |  |  |  |
|-------------|------------|--|--|--|--|
| Print Name: | <br>Title: |  |  |  |  |



#### **PURPOSE OF THIS FORM**

BOX A: Is the project a covered activity?

1 Does your project/activity require a discretionary

approval/permit? (e.g., a general plan amendment,

Complete this form to help determine if a private project is eligible for Yolo Habitat Conservation Plan/Natural Community Conservation Plan (Yolo HCP/NCCP) coverage, required to comply



No, the approval/permit required for my

with the Yolo HCP/NCCP, and/or is exempt from fees or avoidance and minimization measures (AMMs). See Permitting Guide, Chapter 5 for more information and instructions to complete the form. If this form confirms a project qualifies for or requires permit coverage, complete the Application to determine land cover fees and AMMs that may apply to the project and to formally apply for permit coverage. This Screening Form is for informational purposes and is not an application for permit coverage.

Yes, my project/activity

requires a

| rezoning, use permit, variance, or land division)  |  |  | project/activity is ministerial (e.g., a building permit, certain site/design reviews, certain license approvals) If this box is checked, there is no need to complete or submit this form.   |  |  |
|--|--|--|---|--|--|
| Does the project fall within the scope of project/activities covered by the Plan?     Note: this determination will require approval signoff by the local agency with approval authority (or |  |  | No. The project is <b>not</b> a covered activity. Seek an Incidental Take Permit directly from the state  |  |  |
| ng Entities).<br>vithin the scope  |  |  | and/or federal agencies. Go to Box D, Item 2.   |  |  |
|  |  |  |   |  |  |
|  |  |  |   |  |  |
|  |  |  |   |  |  |
|  |  |  |   |  |  |
| 3 Check applicable local agency ☐ Yolo County ☐ City of Davis ☐ City of West Sacramen  |  |  |   |  |  |
| ֓֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜  | e of n? approval signal authority (or ng Entities). vithin the scope plan. | approval/perm are not sure, a local agency wapproval authority or approval signal authority (or ag Entities). within the scope plan.  approval Signal authority (or approval signal authority (or signature if approval sign | approval/permit (if you are not sure, ask the local agency with approval authority, e.g., City or County planning office). Go to Box A, Item 2.  e of approval signal authority (or ng Entities). within the scope plan.  Yes. The project is a covered activity. Go to Box B.  Member Agency Signature if approved  Signature if approved  City or |  |  |

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| BOX C: Is the project exempt from fees or AMMs? |   |   |  |  |  |  |  |
|---|---|---|--|--|--|--|--|
| av<br>(A<br>As                                  | Use information from a Planning-Level Survey to complete the following items. If a planning level survey is not available, please submit the project information from Box B of this form along with the Assessor Parcel Number (APN), or a shapefile or kml file of the project site, to the Yolo Habitat Conservancy, and request an Initial Assessment based on the GeoMapper). The Initial Assessment will provide information needed to complete the rest of this form. |   |  |  |  |  |  |
| 1   | Does the project consist of an addition to an existing structure or new structure(s) within 50 feet of an existing structure (e.g., a new garage) that results in less than 5,000 square feet of impervious surface?  | ☐ Yes. Go to Item 2 ☐ No. Skip to Item 3.  (Attach Initial Assessment, documentation of ground truthing, or planning level survey, when submitting form)  |  |  |  |  |  |
| 2   | Will the project overlap with fresh emergent wetland, valley foothill riparian, and lacustrine or riverine land cover types, as defined in Table 2-1 of the Permitting Guide?   | ☐ Yes. Go to Item 3 ☐ No. The project is exempt from fees, but AMMs may apply. Skip to to Item 6.  (Attach Initial Assessment, documentation of ground truthing, or planning level survey, when submitting form)  |  |  |  |  |  |
| 3   | Is your project on a parcel less than 2.0 acres in size?  | <ul> <li>Yes. The project is exempt from all fees, but AMMs may apply. Go to Item 4.</li> <li>No. Skip to Item 5.</li> <li>(Attach Initial Assessment, documentation of ground truthing, or planning level survey, when submitting form)</li> </ul>   |  |  |  |  |  |
| 4   | Does the project overlap with covered species habitat? (If a planning level survey has yet to be conducted, contact the Conservancy to request an Initial Assessment)   | <ul> <li>Yes. The project requires permit coverage. Skip to Box D, Item 1.</li> <li>No. The project is exempt from fees, but AMMs may apply. Skip to to Item 6.</li> <li>(Attach Initial Assessment, documentation of ground truthing, or planning level survey, when submitting form)</li> </ul>   |  |  |  |  |  |
| 5   | Does the project affect any fee-paying land cover types identified in Table 2-1 of the permitting guide? (If a planning level survey has yet to be conducted, contact the Conservancy to request an Initial Assessment)   | ☐ Yes. The project requires permit coverage. Go to Box D, Item 1.  (Attach Initial Assessment, documentation of ground truthing, or planning level survey when submitting form)  ☐ No. The project is exempt from fees, but AMMs may apply. Skip to to Item 6.  (Attach Initial Assessment, documentation of ground truthing, or planning level survey, when submitting form) |  |  |  |  |  |
| 6   | Does the project overlap with any resource protection buffers for sensitive natural communities or covered species habitat, as described in Table 2-3 of the Permitting Guide? (If a planning level survey has yet to be conducted, contact the Conservancy to request an Initial Assessment)   | <ul> <li>Yes. AMMs may apply to your project. Go to Item 7.</li> <li>No. AMMs do not apply and the project does not qualify for/require permit coverage. Skip to Box D, Item 2.</li> <li>(Attach Initial Assessment, documentation of ground truthing, or planning level survey, when submitting form)</li> </ul>   |  |  |  |  |  |

YOLO HCP/NCCP SCREENING FORM FOR PRIVATE PROJECTS

| 7 Can your project be designed so that activities do not occur near sensitive natural communities or covered species habitat as listed in Table 2-3 of the Permitting Guide, or can a qualified biologist demonstrate that the the project avoids effects on these resources?  | <ul> <li>Yes. Redesign the project to avoid sensitive natural communities and covered species habitats or provide an evaluation by a qualified biologist to the local agency planning office that demonstrates the project will avoid adverse effects on sensitive natural communities or covered species and their habitat. The project does not qualify for or require permit coverage if redesigned accordingly. Go to Box D, Item 2.</li> <li>No. The project does qualify for or require permit coverage. Go to Box D, Item 1.</li> </ul> |  |  |  |  |  |
|--|--|--|--|--|--|--|
| DOVD December 116 for the 150 constitution   |  |  |  |  |  |  |
| BOX D: Does project qualify for/require permit cover   |  |  |  |  |  |  |
| 1  Your project/activity does qualify for/require peri   | nit coverage under the Yolo HCP/NCCP.  |  |  |  |  |  |
| <ul> <li>Complete Items in Box E.</li> </ul>   |  |  |  |  |  |  |
| <ul> <li>Submit this form with Application Fee, if app<br/>agency with approval authority (see contact</li> </ul>  | licable, as soon as possible to the planning office of the local tinformation below).  |  |  |  |  |  |
| _ · · · · <del> · · · · · · · · · · · · ·</del>  | permit coverage under the Yolo HCP/NCCP and no   |  |  |  |  |  |
| Application Fee is required.   |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| covered projects must comply with Federal and State Enda<br>the potential to take a federally or state-listed species, the a   | m this conclusion following submittal of project information. Non-<br>ingered Species Act requirements if applicable. If a project has<br>applicant must contact the U.S. Fish and Wildlife Service,<br>partment of Fish and Wildlife to determine whether a permit is   |  |  |  |  |  |
| ■ Complete Items in Box E.   |  |  |  |  |  |  |
| <ul> <li>Complete Items in Box E.</li> <li>Submit this form to the contact below with the required Application Fee (see Permitting Guide, Chapter 5 instructions for Box D). A planning level survey prepared by a qualified biologist may be required to verify the absence of sensitive natural communities and covered species habitats or other information in this form, including photos and aerials of the site</li> <li>If you are seeking permit coverage for your project as a Special Participating Entity (SPE), submit this form to the Conservancy office prior to completing the Application. SPE permit coverage is not guaranteed and will be authorized on a case-by-case basis by the Conservancy. SPEs must pay the required Application Fee, cover all costs associated with processing the request, and pay an additional SPE-only fee (see Permitting Guide, Chapter 5 instructions for Box D).</li> <li>Are you requesting participation as an SPE?: Yes No</li> </ul> |  |  |  |  |  |  |

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| BC  | X E: SIGNATURES  |                            |               |                                     |                 |          |                   |          |           |  |
|---|--|----------------------------|---------------|-------------------------------------|-----------------|----------|-------------------|----------|-----------|--|
|   | ☐ By checking the<br>best of my knowl  |                            | ng below I ce | ertify all information i            | n the applicat  | ion is t | rue and           | correc   | ct to the |  |
| 1   | Property owner name  | e and contact              | Name          | Name                                |                 |          |                   |          |           |  |
|   | information  |                            | Phone         |                                     | Email           |          |                   |          |           |  |
| 2   | Property owner signa   | ature                      |               | Date                                |                 |          |                   |          |           |  |
| 3   | Project Agent/ Applic  | ant name and               | Name          |                                     |                 |          |                   |          |           |  |
|   | contact information  |                            | Phone         | Phone Email                         |                 |          |                   |          |           |  |
| 4   | Project Agent/ Applica   | ant signature              |               |                                     | Date            |          |                   |          |           |  |
| Pe  | rmissions  |                            |               |                                     |                 |          |                   |          |           |  |
| 5   | Local agency and/or the  | ne Conservancy             | may contac    | t the property owner di             | rectly          |          | Yes               |          | No        |  |
| 6   | Local agency and/or the  | ne Conservancy             | may contac    | t the project agent/app             | licant directly |          | Yes               |          | No        |  |
|   |  |                            |               |                                     |                 |          |                   |          |           |  |
| _   | RM SUBMITTAL INS   |                            |               |                                     |                 |          |                   |          |           |  |
|   | bmit this form as early  |                            | •             | • .                                 |                 |          |                   |          |           |  |
|   | velopment application  |                            |               |                                     |                 |          |                   |          |           |  |
|   | verage as an SPE, su   |                            |               |                                     |                 |          |                   |          |           |  |
|   | nservancy for Special<br>omittal of land develor   |                            | ,             |                                     | •               | •        |                   |          |           |  |
|   | •  |                            |               |                                     | assions the m   | CITIDOI  | agency            | Jiaiiiii | ng onice. |  |
| _   | LOCAL AGENCY PLANNING OFFICE CONTACT INFORMATION         Yolo County       City of West       City of Davis       City of Woodland       City of Winters |                            |               |                                     |                 |          |                   |          |           |  |
|   | tephanie Cormier Sacramento Sherri Metzker Cindy Norris Dagoberto Fierros  |                            |               |                                     |                 |          |                   |          |           |  |
|   | arlie Tschudin   | David Tilley               |               | Community                           | Planning Divi   |          | Commu             | •        |           |  |
|   | Planning Division Community  |                            |               |                                     |                 |          |                   | opment   |           |  |
|   | 2 West Beamer  | Development                |               | Sustainability                      | Woodland        | 44       | Departr           |          | -1        |  |
|   | treet, Woodland Department 530) 666-8041 1110 West Ca  |                            | nital Ava     | 23 Russell Blvd.,<br>Suite 2, Davis | (530) 661-59    | 11       | 318 First Winters |          | et,       |  |
|   | 30) 666-8850   | 2 <sup>nd</sup> Floor, Wes |               | (530) 757-5610                      |                 |          | (530) 79          |          | 30        |  |
| (00   | ,0,000 0000  |                            | ext. 7239     |                                     |                 | (000) 7  | 31070             |          |           |  |
|   | Sacramento ext. 7239 (916) 617-4645  |                            |               |                                     |                 |          |                   |          |           |  |
| YO  | LO HABITAT CONSE   | RVANCY CON                 | TACT INFOR    | RMATION                             |                 |          |                   |          |           |  |
| Yolo County (for Initial Assessment requests and SPE applications)                                      |  |                            |               |                                     |                 |          |                   |          |           |  |
| Address: 611 North Street Woodland, CA 95695 Phone: 530-723-5504 Email: info@yolohabitatconservancy.org |  |                            |               |                                     |                 |          |                   |          |           |  |
|   |  |                            |               |                                     |                 |          |                   |          |           |  |
| FOR STAFF USE ONLY  |  |                            |               |                                     |                 |          |                   |          |           |  |
|   | Covered  |                            | ect Planner   |                                     |                 |          |                   |          |           |  |
|   | Not covered Phone Number   |                            |               |                                     |                 |          |                   |          |           |  |
| Covered but exempt from Email Date  |  |                            |               |                                     |                 |          |                   |          |           |  |