



DISCLOSURE FORM

Please Type or Print

Attachment 1

File No.	Quad.
Related Files	
DEPARTMENT USE ONLY	

Project Title: VELO VILLAGE 759 MENDOCINO AVE, SANTA ROSA 95401
(Include site address)

Please provide the name of each individual, partnership, corporation, LLC, or trust who has an interest in the proposed land use action. Include the names of all applicants, developers, property owners, and each person or entity that holds an option on the property.

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Individuals: Identify all individuals.
Partnerships: Identify all general and limited partners.
Corporations: Identify all shareholders owning 10% or more of the stock and all officers and directors (unless the corporation is listed on any major stock exchange, in which case only the identity of the exchange must be listed).
LLCs: Identify all members, managers, partners, officers and directors.
Trusts: Identify all trustees and beneficiaries.
Option Holders: Identify all holders of options on the real property.

Full Name:	Address:
CAROLYN WILLIAMS	516 DECANTER CIRCLE WINDSOR 95492
JOHN WILLIAMS	" " " "
MICHAEL FOLK	P.O. BOX 554, CORTE MADERA 94925

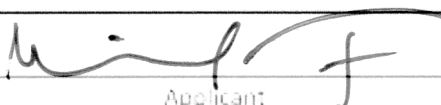
In addition, please identify the name of each civil engineer, architect, and consultant for the project.

Full Name:	Address:
POLSKY PERLSTEIN ARCHITECTS	469 MAGNOLIA AVE, #B LARKSPUR 94939
MARK PARRY, IDEA STUDIOS	419 BENTON ST., SANTA ROSA CA 95401
DALENE WHITLOCK, W-TRANS	490 MENDOCINO AVE #201, SANTA ROSA 95401
DON MCNAIR, MCNAIR LANDSCAPE	P.O. BOX 251 KENWOOD, CA 95452

Additional names and addresses attached: ☐ Yes ☒ No

The above information shall be promptly updated by the applicant to reflect any change that occurs prior to final action.

I certify that the above information is true and correct:


Applicant

1/10/16
Date