



DISCLOSURE FORM

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Project Title: Aloha Aina, Inc. Dispensary - 1954 Piner Road, Suite B

(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.

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:
Marvin Otsuji Aloha Aina, Inc.	2827 Poipu Rd, Koloa HI 96756 1954 Piner Road, Santa Rosa, CA 95403

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

Full Name:	Address:
Warren J. Hedgpeth, Architect	2321 Bethards Dr # B, Santa Rosa, CA 95405
Andy Souza, TEP Engineering	880 Second Street, Santa Rosa, CA 95404
Dalene J. Whitlock, W-Trans	490 Mendocino Avenue, Ste 201, Santa Rosa, CA 95401

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

Date