

## **DISCLOSURE FORM**

Please Type or Print

DEPARTMENT USE ONLY				
Related Files				
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www.	.srcit	v.org

	Project Title: New Workshop   2021 Park Vista Court Santa Rosa Ca 95405				
	(Include site address)				
	Please provide the name of each individual, partnership, corporation, LLC, or trust who has an interest in the proposed action. Include the names of all applicants, developers, property owners, and each person or entity that holds an option property.				
DISC	Individuals:  Partnerships:  Corporations:  Identify all individuals  Identify all general and limited partners  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.				
L 0	LLCs: Identify all members, managers, partners, officers and directors.				
S	Trusts: Identify all trustees and beneficiaries.  Option Holders: Identify all holders of options on the real property.				
U R	Option Holders: Identify all holders of op	tions on the real property.			
E	Full Name:	Address:			
F	Mike Estournes	2021 Park Vista Ct, Santa Rosa Ca 95405			
O R					
M					
	_				
	In addition, please identify the name of each civil engineer, architect, and consultant for the project.				
	Full Name:	Address:			
	Steve Martin Associates, Inc. (arch/civil)	130 South Main Street, Sebastopol Ca 95472			
	RGH Consultants, Inc. (geotech)	1305 North Dutton Ave, Santa Rosa Ca 95401			
	Jackson & Associates, Inc. (topo survey)	PO Box 737, Cloverdale Ca 95425			
	Additional names and addresses attached:				
	The above information shall be promptly u	pdated by the applicant to reflect any change that occurs prior to final action.			
	I certify that the above information is true and correct:  Applicant    2 - 20 - 2 (				