

APPLICATION

CONDITIONAL USE PERMIT

Please Type or Print

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wwv	w.srcity.org		☐ MAJOR	MINO!		TEMPORARY		
	LOCATION OF PROJECT (A	DDRESS)	Oregon Dr	ASSESS	OR'S PARCEL N	UMBER(S) 4-011-000	EXISTING ZONING	1 - 1-
G	NAME OF PROPOSED PRO	UECT C	Oregon or		7 2 2	1 01,	GENERAL PLAN DE	SIGNATION
E N		new +	-ence					
E	APPLICANT NAME	dam M	neller			BUSINESS FAX 79-2269	650 = 1	■ BUSINESS □ FAX 339-3449
R	APPLICANT ADDRESS	2709 0	COO	STATE	50 6	ZIP	EMAIL	771-0111
A	APPLICANT REPRESENTAT	IVE AL (A	regen or Ja	11111	L HOME	BUSINESS FAX	□CELL □ HOME	☐ BUSINESS ☐ FAX
		N/A	O.D.					
1	APPLICANT REPRESENTAT	IVE ADDRESS	СІТУ	STATE		ZIP	EMAIL	
N	PROPERTY OWNER NAME (SIGNATURE REQUIRED BELOW)				L HOME	BUSINESS FAX	□CELL □ HOME	☐ BUSINESS ☐ FAX
F	PROPERTY OWNER ADDRESS 2 CITY STATE STATE CITY STATE CI							
	,	3 +01	oregon Dr Si		0 Sa (A 1540)	adam	
	PROJECT/BUSIN	NESS DESCRIPTIO	N – (Aftach separate sh	eet if nece	essary.)	· į		yahoo.com
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	1100 500	la callé		C 1 0 1	1	t. See p	1.1.5	1 1
	SIZE OF PARCEL	ae coche (GROSS SQ FT OF PROPOSED	USE	PRIOR US		hotos	3 drawing
	SQ F	T or ACRES				_		,
	RESIDENTIAL		OFFICE 0	COMME	RCIAL	☐ INDUSTRIAL	ООТН	ER (Please describe)
P	☐ EXISTING BUILDING/REOCCUPANCY ☐ NEW CONSTRUCTION		☐ EXISTING BUILDING/REOCCUPANCY ☐		☐ NEW	/ CONSTRUCTION	LIST EX	ISTING TENANTS
R	# UNITS TOTAL:		# BUILDINGS: MA		MAX EMP	LOYEES/SHIFT:	USE	SQ. FT.
0	# BEDROOMS PER UNIT:		TOTAL SQ. FT: #		# SEATS/C	CAPACITY:		
E	# PARKING SPACES:		SQ. FT. OCCUPIED:		# PARKING			
С	TYPE OF UNIT:				% LOT CO			
Т	SINGLE FAMILY D				DAYS/HO	URS OF OPERATION:		
	SINGLE FAMILY A							
N	SECOND UNIT	MULTI-FAMILY MOBILE		***************************************	*****			
F	☐ DUPLEX	НОМЕ			****			
0	% LOT COVERAGE							
			MS MUST BE SUBMITTED FOR	A COMPLE	TE APPLICAT	TION UNLESS INITIALED	BY A CITY PLAI	NNER
			or folded to 8 ½ X 14	T =				
		AN showing all dime	nsions.		SURE FORM			
	10 Copies of FLOOR		A A A D			H NORTH ARROW		
	10 Copies of NEIGHBORHOOD CONTEXT MAP INDEMNIFICATION FORM (Back of sheet) ADDITIONAL SUBMITTAL INFORMATION – THESE ITEMS MAY BE REQUIRED FOR A COMPLETE APPLICATION							
	10 Copies of DIMENSIONED ELEVATIONS (New construction only) 10 Copies of SITE ANALYSIS MAP (New construction only)			ENVIRONMENTAL ASSESSMENT (New construction only) Completed STORMWATER DETERMINATION WORKSHEET				
	10 Copies of LANDSCAPE PLANS (New construction only)			Comple	ted 310Kivi	VVAIEN DETERIVITIVATIO	IN WORKSHEET	
	Completed ABC APPLICATION WORKSHEET 23958.4 B & P (For sales of alcoholic beverages)							
	PROPERTY OWNER'S CONSENT – I declare under penalty of perjury that I am the owner of said property or have written authority from property owner							
	to file this application	on. I certify that all of	the submitted information is	true and cor	rect to the l	best of my knowledge a	nd belief. I unde	erstand that any
	misrepresentation of	of submitted data ma	y invalidate any approval of th	is application IY OWNER		IIDE		
	APPLICATION RECEIVED BY					DATE		FEE RECEIVED
D	CUP21-	Dot	me			4.20,21		\$ 375.
E	PUBLIC HEARING					DATE		FEE RECEIVED \$
P	ENVIRONMENTAL R	EVIEW 🗖 REQU	JIRED			DATE		FEE RECEIVED
								\$



APPLICATION CONDITIONAL USE PERMIT

Please Type or Print

File #:	CUP21-037
Related I	Files:
Set:	
FGP-15-275/35-04-5	Department Use Only

WWV	w.srcity.org	☐ MAJOR	MINO	-	☐ TEMPORARY		
	LOCATION OF PROJECT (ADDRESS)	9 Oregon Dr	ASSESS	OR'S PARCE	24 - 011-000	EXISTING ZONING	1 - 6
G	NAME OF PROPOSED PROJECT	- Creden Di	-101) 2	21011	GENERAL PLAN DE	1 0
E	new tence						
N E	APPLICANT NAME A day MAROLLEC				□ BUSINESS □ FAX 179-2269	650 - 1	339-3449
R	APPLICANT ADDRESS CITY			-F/	7IP	EMAIL	2) 1-0911
Α	5 +09 Oregen Dr San			sa	CA 95405		
L	APPLICANT REPRESENTATIVE MALE			. LJ HOME	□ BUSINESS □ FAX	☐CELL ☐ HOME	☐ BUSINESS ☐ FAX
	APPLICANT REPRESENTATIVE ADDRESS	Z CITY	STATE		ZIP	EMAIL	
N	ROBERTY OWNER NAME (SIGNATURE REQUIRE	A LA	I Rigerii	Пиоме	Clausiuss Clav	Пети Пиом	
F	Acam Moeller A	da leller	EICELL	17-1	BUSINESS FAX 79- Z269	☐CELT ☐ HOME	□ BUSINESS □ FAX
0	PROPERTY OWNER ADDRESS 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2						
	3709 Oregon De Sonton Rosa (A 9540) adammoeller						
	PROJECT/BUSINESS DESCRIP	IION – (Attach separate she	et if nece	ssary.)	C, ,		yahoo.com
	Seeking V	ariance to	or c	λ	tence to	Her.	than
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	the sidewalk		rner		t, See p	hotos	3 drawing
	SIZE OF PARCEL	GROSS SQ FT OF PROPOSED I	JSE	PRIOR L	JSE I		'
	SQ FT or ACR		COMMER	CIAI	☐ INDUSTRIAL	Поти	ER (Please describe)
	☐ EXISTING BUILDING/REOCCUPANG	(2) 人名英格兰 (1988年) [2] [2] [2] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4		(3)7.	LJ III JUJIII AL		ch (Please describe)
Р	☐ NEW CONSTRUCTION	EXISTING BUILDING/REOC	CUPANCY		EW CONSTRUCTION	LIST EXI	STING TENANTS
R	# UNITS TOTAL:	# BUILDINGS:	# BUILDINGS: MAX EMPLOYEE:		//PLOYEES/SHIFT:	USE	SQ. FT.
0	# BEDROOMS PER UNIT:	TOTAL SQ. FT:	TOTAL SQ. FT:		/CAPACITY:		
J E	# PARKING SPACES:	SQ. FT. OCCUPIED:		# PARKI	NG SPACES:		
C	TYPE OF UNIT:	SQ FT EACH BUILDING (Please list):		% LOT C	COVERAGE:		
T	SINGLE FAMILY DETACHED	DA		DAYS/H	OURS OF OPERATION:		
	☐ SINGLE FAMILY ATTACHED						
1	☐ SECOND UNIT ☐ MULTI-FAMI	_Y					
N F	DUPLEX MOBILE						
O	% LOT COVERAGE					 	
		TEMS MUST BE SUBMITTED FOR A	A COMPLET	E APPLIC	ATION UNLESS INITIALED	BY A CITY PLAN	INER
	SUBMITTAL INFORMATION — THESE ITEMS MUST BE SUBMITTED FOR A COMPLETE APPLICATION UNLESS INITIALED BY A CITY PLANNER Plan MUST either be reduced to 11 X 17 or folded to 8 ½ X 14						
	10 Copies of SITE PLAN showing all dimensions.			DISCLOSURE FORM			
	10 Copies of FLOOR PLANS		VICINITY MAP				
	10 Copies of NEIGHBORHOOD CONTEXT MAP			INDEMNIFICATION FORM (Back of sheet)			
	ADDITIONAL SUBMITTAL INFORMATION – THESE ITEMS MAY BE REQUIRED FOR A COMPLETE APPLICATION						
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	to file this application. I certify that all of the submitted information is true and correct to the best of my knowledge and belief. I understand that any						
	misrepresentation of submitted data	may invalidate any approval of this	application	١.	Ada		
	APPLICATION RECE	PROPERTY IVED BY	OWNER'	S SIGNA			TEC DECEMBE
D	CUP21007 RECE	me			4.20, 21		FEE RECEIVED 375.
E	PUBLIC HEARING	and a succession of the succes			DATE		FEE RECEIVED
P	ENVIRONMENTAL BEVIEW (** **	COURSED CI CYCNADT			DATE		55 05050 450
T	ENVIRONMENTAL REVIEW	EQUIRED			DATE		EE RECEIVED
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administrator@srcity.org_20210422_073733

Final Audit Report

2021-04-22

Created:

2021-04-22

By:

Lynne Charlton (Icharlton@srcity.org)

Status:

Signed

Transaction ID:

CBJCHBCAABAAk6c2185qXEhnWiLOGgmqK02IUs86-3-4

"administrator@srcity.org_20210422_073733" History

- Document created by Lynne Charlton (Icharlton@srcity.org) 2021-04-22 2:46:29 PM GMT- IP address: 12.249.238.210
- Document emailed to Adam Moeller (adammoeller@yahoo.com) for signature 2021-04-22 2:47:05 PM GMT
- Email viewed by Adam Moeller (adammoeller@yahoo.com) 2021-04-22 2:57:52 PM GMT- IP address: 67.195.51.156
- Document e-signed by Adam Moeller (adammoeller@yahoo.com)

 Signature Date: 2021-04-22 2:59:35 PM GMT Time Source: server- IP address: 107.77.214.51
- Agreement completed.
 2021-04-22 2:59:35 PM GMT



INDEMNIFICATION AGREEMENT

File No:
Project Name and Address: 3709 Oregon Dr.
As part of this application, the applicant agrees to defend, indemnify, and hold harmless the City of Santa Rosa, its agents, officers, councilmembers, employees, boards, commissions and Council from any claim, action or proceeding brought against any of the foregoing individuals or entities, the purpose of which is to attack, set aside, void, or annul any approval of the application or related decision, or the adoption of any environmental documents or negative declaration which relates to the approval. This indemnification shall include, but is not limited to, all damages, costs, expenses, attorney fees or expert witness fees that may be awarded to the prevailing party arising out of or in connection with the approval of the application or related decision, whether or not there is concurrent, passive or active negligence on the part of the City, its agents, officers, councilmembers, employees, boards, commissions and Council. If for any reason, any portion of this indemnification agreement is held to be void or unenforceable by a court of competent jurisdiction, the remainder of the agreement shall remain in full force and effect.
The City of Santa Rosa shall have the right to appear and defend its interests in any action through its City Attorney or outside counsel. The applicant shall not be required to reimburse the City for attorney's fees incurred by the City Attorney or the City's outside counsel if the City chooses to appear and defend itself in the litigation.
Applicant (please print name) A dom Moeller Applicant (please sign name)
ACKNOWLEDGMENT THAT COPYRIGHTED REPORTS SUBMITTED TO THE CITY SHALL BE CONSIDERED PUBLIC RECORDS

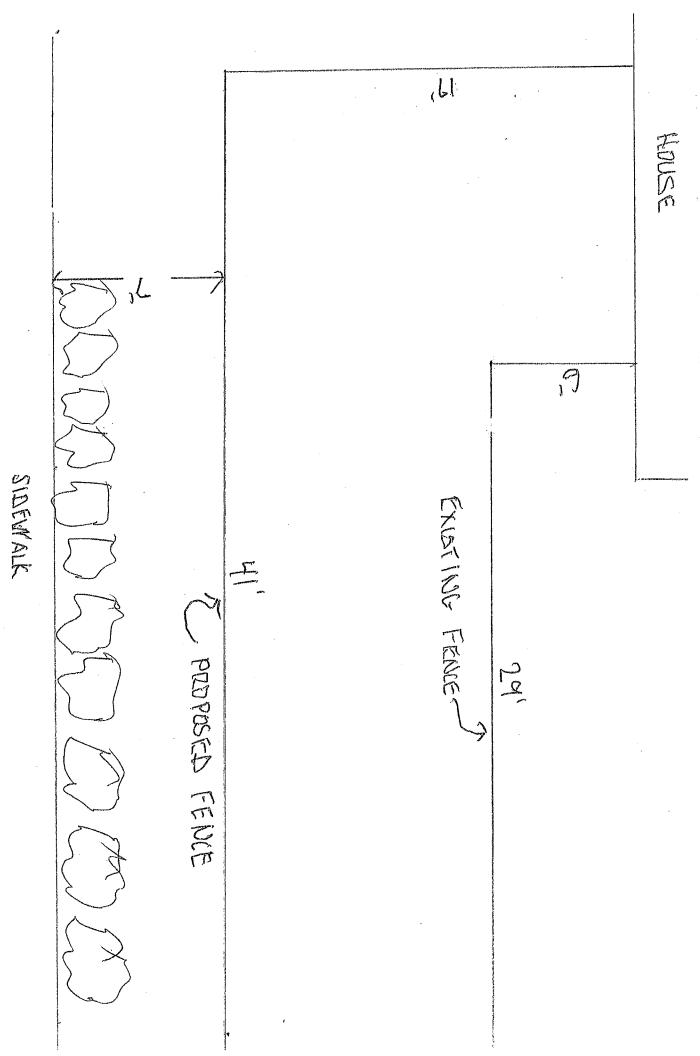
The applicant acknowledges, understands, and agrees that any soils, seismic hazard, landslide, geologic, natural hazard, or geotechnical report, study, or information submitted to the City by, or on behalf of, the applicant in furtherance of this application submitted by the applicant will be treated by the City as public records pursuant to the CA Public Records Act which may be reviewed by any person and if requested, that a

copy will be provided by the City to any person upon the payment of its direct costs of duplication.

I have read and agree to all of the above.

Applicant (please print name)

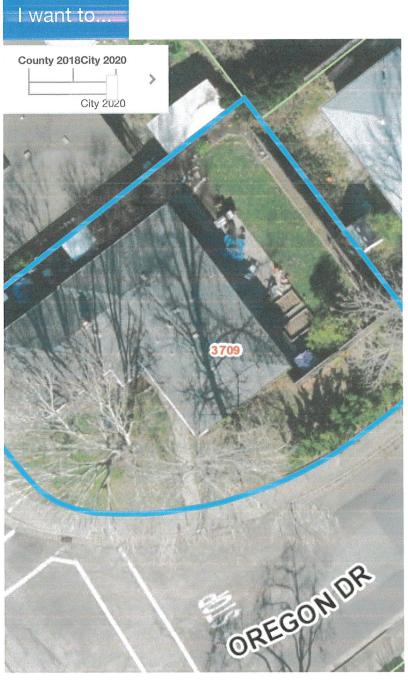
Applicant (please sign name)



DRECON DR

















3709 Oregon Dr fence location





Not exact distances-enough to show his proposal



4/9/2021

Scale 1: 150

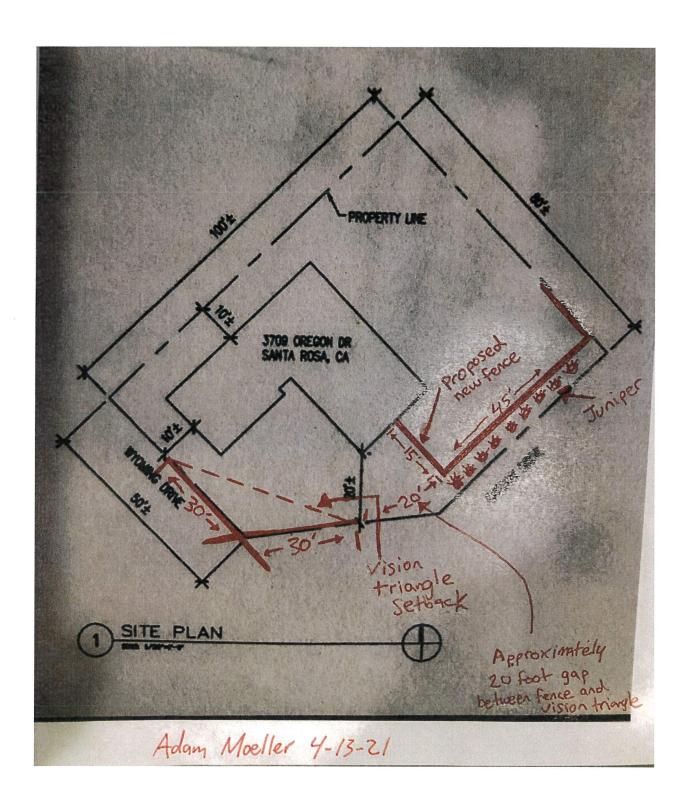
Miles

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PROPOSED FENCE 29, EXISTING FENCE 6 HOUSE 17)

SIDEWALK

OREGON DR



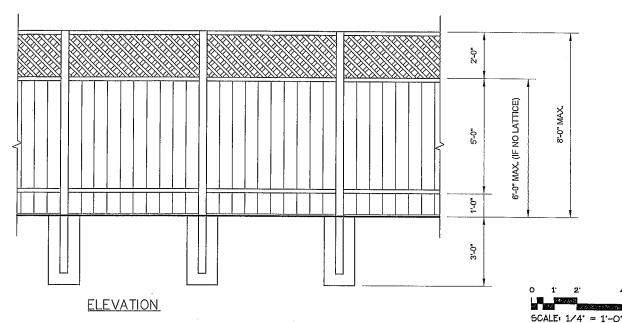


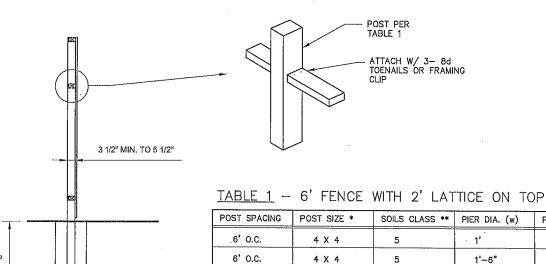


RESIDENTIAL FENCE WITH LATTICE DETAIL

THIS DRAWING DEPICTS MINIMUM CODE REQUIREMENTS PER CBC 2007. INFORMATION IS FOR REFERENCE ONLY AND IS NOT A SUBSTITUTE FOR ACCURATE DRAWINGS PREPARED FOR EACH PROPOSED CONSTRUCTION PROJECT,







POST SPACING	POST SIZE *	SOILS CLASS **	PIER DIA. (w)	PIER DEPTH (d)
.6' O.C.	4 X 4	5	1'	2'-6"
6' O.C.	4 X 4	5	1'-6"	2'
6' O.C.	4 X 4	4	1'	2'
8' O.C.	4 X 6	5	1'	2'-9"
8' O.C.	4 X 6	5	1'-6"	2'-4"
8' O.C.	4 X 6	4	1'	2'-6"
8' O.C.	4 X 6	4	1'-6"	2'

- * RDWD CONSTR OR BETTER, OR PTDF
- ** SOIL CLASS BASED ON 2007 CBC TABLE 1804.2

Provide consistent Title Block on all sheets. Leave margin on all sides.

SECTION

This scale is for example only. Use 1/2" or 3/4" =1'-0". Typical min. sheet size is 11" x 17"

NAME, ADDRESS AND PHONE NO. OF DESIGNER

XXX XXX XXX XXX

XXX XXX XXX

WET SIGNATURE OF DESIGNER ON EACH SHEET (AND PROFESSIONAL STAMP IF APPLICABLE)

E:\Bldg\DLV\ACAD\Details 2\010-FENCE-1.DWG, 01/30/2009 4:53:01 PM

EXAMPLE RESIDENCE

1234 MAIN ST. SANTA ROSA, CA 9540_ APN # 000-000-000

RESIDENTIAL FENCE

SAMPLE DRAWING

SCALE: 1/4" = 1'-0" DATE: DEC. 15, 2008

SHEET NO.

FN-2