Mono County Community Development Department

PO Box 347 Mammoth Lakes, CA 93546 (760) 924-1800, fax 924-1801 commdev@mono.ca.gov

Planning Division

PO Box 8 Bridgeport, CA 93517 (760) 932-5420, fax 932-5431 www.monocounty.ca.gov

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DIRECTOR REVIEW APPLICATION	APPLICATION # FEE \$
(9-34-5)	P MARGARET L. BARELMANN CITY/STATE/ZIP CARLEBAD, CA 920/8
TELEPHONE (760) 497-7777 OWNER, if other than applicant	E-MAIL ECP9@ ROADRUNNER. COM
ADDRESS	CITY/STATE/ZIP
DESCRIPTION OF PROPERTY: Assessor's Parcel # <u>062-040-019</u> General	ral Plan Land Use Designation
sheets if necessary. Note: An incomplete processing. 18 TRAVEL TRAILER PER	or inadequate project description may delay project mit Puring construction For 19 FOR TEMPORARY USE ONLY. 2 DRILLING WELL.
(all individual owners must sign as their officer(s) empowered to sign for the corp	Y THAT I am: legal owner(s) of the subject property names appear on the deed to the land), corporate coration, or owner's legal agent having Power of Power of Attorney" document must accompany the OING IS TRUE AND CORRECT.

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PLOT PLAN CHECKLIST

Lack of a plot plan or any of the required information will delay the review of your plans by the Planning Division.

PLOT PLANS MUST INCLUDE:

- Name/address/phone number of owner, applicant, plan preparer
- North arrow, scale (1"=20', etc.)
- Assessor's Parcel Number (APN)
- Location/name of boundary streets, surface waters and recorded easements on property (include type and size of any easements)
- Dimensioned property lines/project boundary lines
- Location/outside dimensions/use of proposed structures, driveways, parking areas -- distance between structures and setbacks to all property lines and surface waters
- Contour lines if the property is in a flood zone

PLOT PLANS MUST ALSO INCLUDE THE FOLLOWING, if applicable:

- Location/outside dimensions/use of existing structures: distance between structures and setbacks to all property lines and surface waters
- Location and name of surface waters within 50 feet of property
- Location of utility lines 115 kV or greater within 35 feet of property
- Unusual site features (e.g., hilly terrain, drainages) on property

NOTE:	New development in the Swall Meadows area are required to submit a Wheel	ler
	Crest Design Review application.	

The items checked above have been included on the s	submitted plot plan
Pate-11 Ban Irran	05/08/24
Signature of Applicant	Date

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PROJECT INFORMATION

(To be completed by applicant or representative)

NOTE: Please answer all questions as accurately and completely as possible to avoid potential delays in processing. Attach additional sheets if necessary.

I.	TYPE OF PROJECT (check any permit(s) requested):
	Director Review Use Permit Lot Line Adjustment Land Division (4 or fewer) Subdivision Specific Plan Variance General Plan Amendment Other
	APPLICANT ROBERT HAMMARGARETL. BARELMANN
	PROJECT TITLE PERMIT FOR 18 TRAUEL TRAILER
	LOT SIZE (sq. ft./acre) 37 Ac ASSESSOR'S PARCEL # 062 -040 -019 -0
	PROJECT LOCATION 7077 CROWLEY LAKE DR ASPEN SPRINGS
	Has your project been described in detail in the project application? Yes ☒ No ☐
	Please Specify: V/A Number of Units Building Height/# of floors Number of Buildings Density (units/acre)
	Total lot coverage/impervious surface (sq. ft. & %) a. Buildings (first-floor lot coverage /sq. ft. & %) b. Paved parking & access (sq. ft. & %)
	Landscaping/screening and fencing:
	a. Landscaping (sq. ft. & %) b. Undisturbed (sq. ft. & %)
	Total parking spaces provided:
	a. Uncovered b. Covered
	c. Guest/Handicapped
II.	SITE PLAN Are all existing and proposed improvements shown on the Plot Plan (see attached Plot Plan Requirements)? Yes No
III.	ENVIRONMENTAL SETTING Use one copy of the Tentative Map or Plot Plan as needed to show any necessary information. Attach photographs of the site, if available.
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1.	VICINITY MAP: Attach a copy of assessor's parcel pages or a vicinity map showing the subject property in relation to nearby streets and lots or other significant features.
2.	EXISTING DEVELOPMENT: Vacant X If the site is developed, describe all existing uses/improvements such as structures, roads, etc. Does the Plot Plan show these uses? Yes No \(\square\$ No \(\square\$
3.	ACCESS/CIRCULATION: Name of Street Frontage(s) Paved Dirt No existing access Are there any private roads, drives or road easements on/through the property? Yes No
	Has an encroachment permit been submitted to Public Works or Caltrans? Yes No Does the property have any existing driveways or access points? Yes No Does the Plot Plan show the driveways or access points? Yes No Does the Plot Plan show the driveways or access points? Yes No Does the number and type of vehicles associated with the project
4.	ADJACENT LAND USES: A. Describe the existing land use(s) on adjacent properties. Also note any major man-made or natural features (i.e., highways, stream channels, number and type of structures, etc.). LAND USE LAND USE
	North DEPT OF WATER PROWER South OLD FORES 40 MOTEL
	East BLM West DEPT OF WATER + POWER
	B. Will the proposed project result in substantial changes in pattern, scale or character of use in the general area? Yes No if YES, how does the project propose to lessen potential adverse impacts to surrounding uses?
5.	SITE TOPOGRAPHY: Is the site on filled land? Yes \(\sumsymbol{\sumsymbol{N}}\) No \(\sumsymbol{\sumsymbol{\sumsymbol{N}}}\) Describe the site's topography (i.e., landforms, slopes, etc.)
6.	DRAINAGES: A. Describe existing drainage ways or wetlands on or near the project site (i.e., rivers, creeks and drainage ditches 12" or deeper and/or within 30' of the property)
	B. Are there any drainage easements on the parcel? Yes \(\sigma\) No \(\sigma\)
	C. Will the project require altering any streams or drainage channels? Yes No X If YES, contact the Department of Fish and Game for a stream alteration permit. IF YES TO ANY OF THE ABOVE, show location on plot plan and note any alteration or work to be done within 30 feet of the stream or drainage.
7.	VEGETATION: A. Describe the site's vegetation and the percentage of the site it covers (map major areas of vegetation on the Plot Plan)

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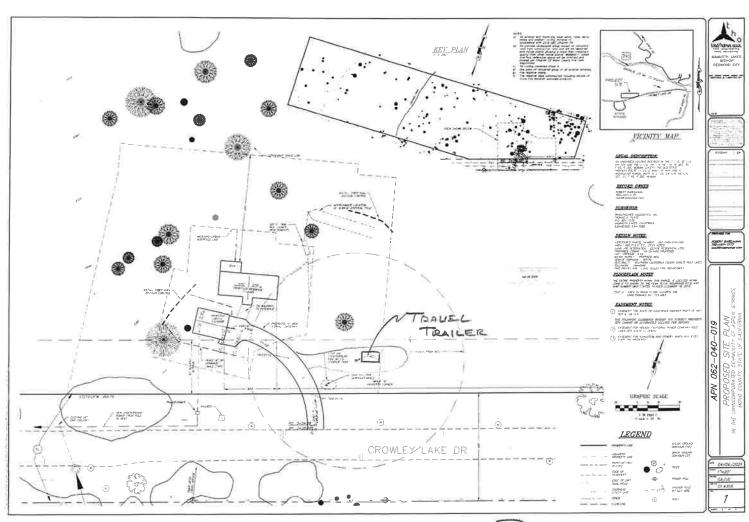
	B.	How many trees will need to be removed?
	D.	Are there any unique, rare or endangered plant species on site? Yes \(\subseteq \) No \(\subseteq \) Has the site been used for the production of agricultural crops/trees or grazing/pasture land in the past or at the present time? Yes \(\subseteq \) No \(\subseteq \) Is landscaping/planting of new vegetation proposed? Yes \(\subseteq \) No \(\subseteq \)
8.		LDLIFE: Will the project impact existing fish and wildlife? Yes No Describe existing fish and wildlife on site and note any proposed measures (if any) to avoid or mitigate impacts to fish and wildlife
	B.	Are there any unique, rare or endangered animal species on site? Yes \(\square\) No \(\square\)
9.		Are there any cemeteries, structures or other items of historical or archaeological interest on the property? Yes No X Specify
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10.	A.	TE GRADING: Will more than 10,000 square feet of site area be cleared and/or graded? Yes No X If YES, how much?
	B. C.	Will the project require any cuts greater than 4' or fills greater than 3'? Yes No Will the project require more than 200 cubic yards of cut or fill? Yes No Will If YES, how much? If YES to A, B or C, contact the Department of Public Works for a grading permit.
	D. E.	Will site grading of 10% or more occur on slopes? Yes \(\subsection\) No \(\times\) Note any measures to be taken to reduce dust, prevent soil erosion, or the discharge of earthen material off site or into surface waters
11	Δ11	R QUALITY:
11,	A.	Will the project have wood-burning devices? Yes No X If YES, how many?
	В.	What fuel sources will the proposed project use? Wood \(\begin{align*} \text{Electric } \begin{align*} \text{Propane/Gas } \(\begin{align*} \text{Will the proposal cause dust, ash, smoke, fumes or odors in the vicinity? Yes \(\begin{align*} \text{No } \end{align*} \)
12.	VIS A.	How does the proposed project blend with the existing surrounding land uses?
	В.	How does the proposed project affect views from existing residential/commercial developments, public lands or roads?
	C.	If outdoor lighting is proposed, describe the number, type and location _ NA
13.	A.	TURAL HAZARDS: Is the site known to be subject to geologic hazards such as earthquakes, landslides, mudslides, ground failure, flooding, avalanche or similar hazards? Yes No (Circle applicable hazard[s]).
		Will any hazardous waste materials such as toxic substances, flammables or explosives be used or generated? Yes No No Does the project require the disposal or release of hazardous substances? Yes No No

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	D.	Will the project generate significant amounts of solid waste or litter? Yes \(\sigma\) No \(\sigma\)
		Will there be a substantial change in existing noise or vibration levels? Yes \(\bigcup \) No \(\bigcup '\) If YES to any of the above, please describe
14.		OTHER PERMITS REQUIRED: List any other related permits and other public approvals required for this project, including those required by county, regional, state and federal agencies: Encroachment Permits from Public Works or Caltrans. Stream Alteration Permit from Department of Fish and Game 404 Wetland Permit from Army Corps of Engineers Grading Permit from Public Works Building Permit from County Building Division Well/Septic from County Health Department Timber Land Conversion from California Department of Forestry Waste Discharge Permit from Lahontan Regional Water Quality Control Board Other TRAVEL TRAVE
IV.		
	1.	Indicate how the following services will be provided for your project and the availability of service. Electricity Overhead Overhead (Show location of existing utility lines on Plot Plan)
		Road/Access Public
		Water Supply WELL INSTALLED W/FERMIT
		Sewage Disposal SEPT CINSTALLED W/REMIT
		Fire Protection N/A
		School District Manwath
	2.	If an extension of any of the above is necessary, indicate which service(s), the length of extension(s), and the infrastructure proposed
info pre info Mo	sen orma orma	FICATION: I hereby certify that I have furnished in the attached exhibits the data and ation required for this initial evaluation to the best of my ability, and that the information ted is true and correct to the best of my knowledge and belief. I understand that this ation, together with additional information that I may need to provide, will be used by County to prepare a Specific Plan in compliance with state law. Date
For		

NOTE: Failure to provide any of the requested information will result in an incomplete application and thereby delay processing.

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