



Grass Roots Venice Neighborhood Council

Land Use and Planning Committee

PROJECT INFORMATION FORM



INSTRUCTIONS TO APPLICANT:

1. Please E-mail this form with an electronic copy of your plans, preferably in PDF format, TEN days prior to your meeting date to lupc@grvnc.org. This form will assist the LUPC in evaluating your project.
2. Bring to the meeting TEN copies of your plans and renderings for The Committee. You may wish to bring additional copies for the audience.

1. PROJECT INFORMATION

Today's Date _____

Meeting Date _____

Project Location _____

Cross Streets _____

Applicant Name _____

Presenter Name _____

Presenters' relationship to applicant: _____

Is this your initial appearance before the Committee? Yes _____ No _____ If No, on what other day(s)

have you appeared? _____

2. PROJECT DESCRIPTION (General Description)

3. PROJECT BACKGROUND

Is the Project located in the Venice Coastal Zone? Yes _____ No _____

If Yes, in which Venice Specific Plan Sub-area _____

In which of the following Venice Coastal Zone areas is your Project located? (please check)

Venice Coastal Zone Specific Plan Area _____

Dual Jurisdiction Zone _____

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Status of Project (Select A or B)

_____ A. Project is at a Preliminary/ Exploratory development state

_____ B. Project Submitted to the City: Application Date _____

Application Number _____

Have you posted your Application Notice? Yes _____ No _____ If Yes, when & where?

_____ If you have a City Planning Hearing Date – please enter the date and location: Date: _____

Location: _____

Is your Project in full compliance with Los Angeles City Zoning and Planning Codes and/or the Venice Specific Plan? Yes _____ No _____ If No, what Conditional Use, Variance, Venice Specific Plan Exception, or Other Discretionary Actions are you requesting?

Please explain your justification for a Conditional Use, Variance, Venice Specific Plan Exception, or Other Discretionary Action: _____

Was your Project presented to the immediate neighborhood? Yes _____ No _____

If Yes, when _____ (date) and to whom _____

If not presented, please explain: _____

4. ZONING

What is the Current zoning? _____ Proposed zoning? _____

Is the Project compliant with the Community Plan Map? Yes _____ No _____

Is the location on a Venice Specific Plan Walk Street? Yes _____ No _____

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5. TYPE OF BUILDING

_____ Business _____ Single Family _____ Mixed Use (Business/Residential)

_____ Apartments: _____ Units Permitted _____ Units Proposed

_____ Condos: _____ Units Permitted _____ Units Proposed

_____ Other – please explain: _____

Will the property be Owner Occupied? Yes _____ No _____

6. SIZE

Lot dimensions _____ Square footage of the lot _____

Improvements: Square footage permitted? _____ Square footage proposed? _____

Floor Area Ratio (FAR/Commercial): FAR permitted _____ FAR proposed _____

7. HEIGHT

Maximum Height Permitted _____ Height Proposed _____

Actual Physical Number of Stories, including basements, garages, and/or underground parking _____

8. SETBACKS

	Required	Proposed
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Front	_____	_____
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Side	_____	_____
------	-------	-------

Rear	_____	_____
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Is there an easement(s)? Yes _____ No _____ If Yes, list the easement(s) _____

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9. PARKING

Number of parking spaces Required _____ Proposed _____

Is the parking? On Site _____ Off Site _____ On & Off Site _____

Is Valet parking provided? Yes _____ No _____

Number of Spaces: Standard _____ Compact _____

Configuration: Side by Side _____ Single _____ Tandem _____

Is Beach Impact Zone Parking required? Yes _____ No _____

 If Yes, what are the number of parking spaces required _____

Will your Project result in a loss of on-street parking? Yes _____ No _____

10. TRAFFIC

Have you prepared a traffic study? Yes _____ No _____ If Yes, please attach a copy.

Has the traffic study been reviewed by the Dept. of Transportation? Yes _____ No _____
 If yes, please attach their findings.

What mitigation measure are you required to provide? _____

Are you providing any mitigations above and beyond what is required? Yes _____ No _____

 If Yes, please explain: _____

11. AFFORDABLE / LOW COST HOUSING COMPONENT

Are you providing Affordable Housing / Low Cost Housing? Yes _____ No _____

 Is it required by the Venice Specific Plan and/or Mello Act? Yes _____ No _____

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Described how the units are being provided: No. of Units: _____ For Sale _____ or Rental?

Are the units provided: On Site: _____ Off Site: _____ On/Off Site _____

If units are Off Site, what is the distance from the Coastal Zone?

12. ENVIRONMENTAL

Is an Environmental Impact Report (EIR) required? Yes ___ No ___ If Yes, please attach a copy.

How are you complying with the City requirement for landscaping in your project?

What measures have you considered for energy conservation (solar panels, passive solar, etc.)?

Have you considered using "green" building materials? Yes _____ No _____

Please explain any "Other" area(s) of energy conservation that you are incorporating in your project:

Will your project requiring grading? Yes _____ No _____ If Yes, and you are hauling 1,000 or more cubic yards of dirt off site, what is your haul route?

13. BUSINESS INFORMATION

Name of business: _____

Type of business: _____

Hours of operation: _____

Hours of delivery? _____

Will liquor be sold? Yes _____ No _____

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If Yes, does the business have an active liquor license? Yes _____ No _____

How is liquor sold? On site consumption _____ Off site consumption _____

Type of liquor sold: Wine/beer only _____ Full liquor _____

14. CONTACT INFORMATION

Company Name _____

Contact Name _____

Mailing Address _____

City, State, Zip _____

Phone _____

Fax _____

E-Mail _____

Web Site _____

I certify that the information contained in this Project Information Form is complete and true.

Name (please print) _____

Signature _____

-- For Committee Use Only --

Committee Action: