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CITY	INING APPLIC OF SANTA CLARA, PLANNING 1500 Warburton Avenue, Santa Clara, Caliform (408) 615-2450 Fax: (408) 247-9857 E-mail <u>Planning@santaclaraca.gov</u> Website: <u>www.santaclaraca.gov</u> See page 2 for application requirement	S DIVISION ia 95050
APPLICATION FOR: (Please check all applicable boxes) VARIANCE USE PERMIT ZONING CHANGE TENTATIVE MAP TENTATIVE PARCEL MAP LOT LINE ADJUSTMENT MODIFICATION SPECIAL PERMIT HISTORICAL & LANDMARKS COMMISSION GENERAL PLAN AMENDMENT OFF-SITE PARKING PERMIT (OTHER):	ARCHITECTURAL REVIEW FOR: RESIDENTIAL NON-RESIDENTIAL MIXED-USE LANDSCAPE SIGNS TEMPORARY SIGNS	FOR PLANNING STAFF USE ONLY Checked in by: on 5/16/14 Pe: 246.10 Receipt number: PCC-SC meeting date:
Project Address: 1375 Lapayette	st Bu	Fax to: Fax #:
County Assessor's Parcel Number (APN): 269	- <u>66</u> - <u>05/</u> Gr	oss lot area: acres / square feet
Development Project Description: SINGLE DATES, JULY 1St 2018,	AN STAZUS, AU	26th 2018, OCT 82 2018,
Jore 16th 2019 3 July 7 All even	bild on ses Curp	9. property parking lot - pure 7,
Hazardous Wastes and Substances Statement (Cal This site is not included on the Hazardous Waste This site is on the Hazardous Wastes and Substa (Copies of the applicable Lists are available onli <u>https://www.envirostor.dtsc.ca.gov/public/</u> and <u>b</u>	es and Substances Sites List ances Sites List. ne at these addresses: <u>https://geotracker.waterboards.ca.gov/</u>)	Date of list: Regulatory ID #:
Urban Runoff Pollution Prevention Program (UR Please print all information legibly, including cor	rect zip code.	
COCK	Mailing address: 1375 La Fayet	
Signature:	City: Santa Clara Zip code: 95050	Fax#: <u>Cell</u> E-Mail (Optional):
Property Owner: <u>SES</u> Corp Company: <u>SES</u> Corp	Mailing address: 1375 CAPAY	<u>стн</u> -Дау phone: Бах#: СП
Signature:	Zip code: 95630	E-Mail (Optional):
NOTE: Please attach the names and full addresses	, including zip codes, of all other involved pa	arties to which you would like agendas and minutes sent.

Statement of justification for the above **APPLICATION** (this statement will be included in the staff report to the Planning Commission; a separate statement may be attached, if necessary): Contact staff for assistance on preparing a statement.

Tentative Map / Tentative Parcel Map / Lot-Line Adjustment application only:

Engineering firm:	Engineer's name:
Address:	Phone #:
	Fax #:
Internet E-Mail (Optional)	Engineer's signature
STAFF COMMENTS:	

TO BE COMPLETE, IN ADDITION TO FILING THE APPROPRIATE APPLICATION FEES AND ANY REQUIRED ENVIRONMENTAL INFORMATION, THE FOLLOWING PLANS AND DATA MUST ACCOMPANY THE PLANNING APPLICATION, BASED UPON THE TYPE REQUEST BEING MADE: