



# DEPARTMENT OF PLANNING AND BUILDING

## THIS IS A NEW PROJECT REFERRAL

**DATE:** 9/19/2014

**TO:** \_\_\_\_\_

**FROM:** Cody Scheel (805-781-5157 or [cscheel@co.slo.ca.us](mailto:cscheel@co.slo.ca.us))  
Coastal Team / Development Review

**PROJECT DESCRIPTION:** DRC2014-00028 PEREVOSKI – Proposed minor use permit to allow an existing single family residence to be used as a vacation rental. Site location is 672 Santa Lucia Ave., Los Osos. APN: 038-681-015

Return this letter with your comments attached no later than: 14 days from receipt of this referral. CACs please respond within 60 days. Thank you.

### PART 1 - IS THE ATTACHED INFORMATION ADEQUATE TO COMPLETE YOUR REVIEW?

- YES (Please go on to PART II.)  
 NO (Call me ASAP to discuss what else you need. We have only 10 days in which we must obtain comments from outside agencies.)

### PART II - ARE THERE SIGNIFICANT CONCERNS, PROBLEMS OR IMPACTS IN YOUR AREA OF REVIEW?

- YES (Please describe impacts, along with recommended mitigation measures to reduce the impacts to less-than-significant levels, and attach to this letter)  
 NO (Please go on to PART III)

### PART III - INDICATE YOUR RECOMMENDATION FOR FINAL ACTION.

Please attach any conditions of approval you recommend to be incorporated into the project's approval, or state reasons for recommending denial.

IF YOU HAVE "NO COMMENT," PLEASE SO INDICATE, OR CALL.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone

# GENERAL APPLICATION FORM

San Luis Obispo County Department of Planning and Building

### APPLICATION TYPE - CHECK ALL THAT APPLY

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> Emergency Permit                        | <input type="checkbox"/> Tree Permit                 | <input type="checkbox"/> Plot Plan                                | <input type="checkbox"/> Zoning Clearance |
| <input type="checkbox"/> Site Plan                               | <input checked="" type="checkbox"/> Minor Use Permit | <input type="checkbox"/> Variance                                 | <input type="checkbox"/> Other            |
| <input type="checkbox"/> Conditional Use Permit/Development Plan |  | <input type="checkbox"/> Surface Mining/Reclamation Plan          |   |
| <input type="checkbox"/> Curb, Gutter & Sidewalk Waiver          |  | <input type="checkbox"/> Modification to approved land use permit |   |

### APPLICANT INFORMATION Check box for contact person assigned to this project

Landowner Name Ernest J Perovoski & Terri L. Abbey Living Trust Daytime Phone 805 4700420  
 Mailing Address 3463 Zip Code 93105  
 Email Address: ta 441974@gmail.com

Applicant Name \_\_\_\_\_ Daytime Phone \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Email Address: \_\_\_\_\_

Agent Name \_\_\_\_\_ Daytime Phone \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Email Address: \_\_\_\_\_

### PROPERTY INFORMATION

Total Size of Site: 11050 Assessor Parcel Number(s): 038 681 015  
 Legal Description: \_\_\_\_\_  
 Address of the project (if known): 672 Santa Lucia Ave Los Osos CA 93402  
 Directions to the site (including gate codes) - describe first with name of road providing primary access to the site, then nearest roads, landmarks, etc.: \_\_\_\_\_

Describe current uses, existing structures, and other improvements and vegetation on the property:  
SFD. Garage

### PROPOSED PROJECT

Describe the proposed project (inc. sq. ft. of all buildings): Vacation Rental.

### LEGAL DECLARATION

I, the owner of record of this property, have completed this form accurately and declare that all statements here are true. I do hereby grant official representatives of the county authorization to inspect the subject property.

Property owner signature [Signature]

Date 9/15/2014

### FOR STAFF USE ONLY

Reason for Land Use Permit: \_\_\_\_\_

# LAND USE PERMIT APPLICATION

San Luis Obispo County Department of Planning and Building

File No \_\_\_\_\_

Type of project:  Commercial  Industrial  Residential  Recreational  Other

Describe any modifications/adjustments from ordinance needed and the reason for the request (if applicable): Use name as vacation rental

Describe existing and future access to the proposed project site: no change

Surrounding parcel ownership: Do you own adjacent property?  Yes  No

If yes, what is the acreage of all property you own that surrounds the project site? \_\_\_\_\_

Surrounding land use: What are the uses of the land surrounding your property (when applicable, please specify all agricultural uses):

North: Bay

South: residential

East: residential

West: residential

### For all projects, answer the following:

Square footage and percentage of the total site (approximately) that will be used for the following:

Buildings: \_\_\_\_\_ sq. feet \_\_\_\_\_%

Landscaping: \_\_\_\_\_ sq. feet \_\_\_\_\_%

Paving: \_\_\_\_\_ sq. feet \_\_\_\_\_%

Other (specify) \_\_\_\_\_

Total area of all paving and structures: \_\_\_\_\_  sq. feet  acres

Total area of grading or removal of ground cover: \_\_\_\_\_  sq. feet  acres

Number of parking spaces proposed: \_\_\_\_\_ Height of tallest structure: \_\_\_\_\_

Number of trees to be removed: \_\_\_\_\_ Type: \_\_\_\_\_

Setbacks: Front \_\_\_\_\_ Right \_\_\_\_\_ Left \_\_\_\_\_ Back \_\_\_\_\_

Proposed water source:  On-site well  Shared well  Other \_\_\_\_\_

Community System - List the agency or company responsible for provision: LOCSO - no change

Do you have a valid will-serve letter?  Yes  No (If yes, please submit copy)

Proposed sewage disposal:  Individual on-site system  Other \_\_\_\_\_

Community System - List the agency or company responsible for sewage disposal: no change

Do you have a valid will-serve letter?  Yes  No (If yes, please submit copy)

Fire Agency: List the agency responsible for fire protection: Los Osos Fire

### For commercial/industrial projects answer the following:

Total outdoor use area: \_\_\_\_\_  sq. feet  acres

Total floor area of all structures including upper stories: \_\_\_\_\_ sq. feet

### For residential projects, answer the following:

Number of residential units: \_\_\_\_\_ Number of bedrooms per unit: \_\_\_\_\_

Total floor area of all structures including upper stories, but not garages and carports: \_\_\_\_\_

Total of area of the lot(s) minus building footprint and parking spaces: \_\_\_\_\_

# ENVIRONMENTAL DESCRIPTION FORM

San Luis Obispo County Department of Planning and Building

File No \_\_\_\_\_

*No Change to Existing*

The California Environmental Quality Act (CEQA) requires all state and local agencies to consider and mitigate environmental impacts for their own actions and when permitting private projects. The Act also requires that an environmental impact report (EIR) be prepared for all actions that may significantly affect the quality of the environment. The information you provide on this form will help the Department of Planning and Building determine whether or not your project will significantly affect the quality of the environment.

**To ensure that your environmental review is completed as quickly as possible, please remember to:**

- Answer **ALL** of the questions as accurately and completely as possible.
- Include any additional information or explanations where you believe it would be helpful or where required. Include additional pages if needed.
- If you are requesting a land division or a re-zoning, be sure to include complete information about future development that may result from the proposed land division or rezoning.
- Include references to any reports or studies you are aware of that might be relevant to the questions asked or the answers you provide.

Should a determination be made that the information is inaccurate or insufficient, you will be required to submit additional information upon request.

## Physical Site Characteristic Information

**Your site plan will also need to show the information requested here:**

- Describe the topography of the site:  
Level to gently rolling, 0-10% slopes: \_\_\_\_\_ acres  
Moderate slopes of 10-30%: \_\_\_\_\_ acres  
Steep slopes over 30%: \_\_\_\_\_ acres
- Are there any springs, streams, lakes or marshes on or near the site?  Yes  No  
If yes, please describe: \_\_\_\_\_
- Are there any flooding problems on the site or in the surrounding area?  Yes  No  
If yes, please describe: \_\_\_\_\_
- Has a drainage plan been prepared?  Yes  No  
If yes, please include with application.
- Has there been any grading or earthwork on the project site?  Yes  No  
If yes, please explain: \_\_\_\_\_
- Has a grading plan been prepared?  Yes  No  
If yes, please include with application.
- Are there any sewer ponds/waste disposal sites on/adjacent to the project?  Yes  No
- Is a railroad or highway within 300 feet of your project site?  Yes  No
- Can the proposed project be seen from surrounding public roads?  Yes  No  
If yes, please list: \_\_\_\_\_

**Water Supply Information**

1. What type of water supply is proposed?  
 Individual well     Shared well     Community water system
2. What is the proposed use of the water?  
 Residential     Agricultural - Explain \_\_\_\_\_  
 Commercial/Office - Explain \_\_\_\_\_  
 Industrial – Explain \_\_\_\_\_
3. What is the expected daily water demand associated with the project? \_\_\_\_\_
4. How many service connections will be required? \_\_\_\_\_
5. Do operable water facilities exist on the site?  
 Yes     No    If yes, please describe: \_\_\_\_\_
6. Has there been a sustained yield test on proposed or existing wells?  
 Yes     No    If yes, please attach.
7. Does water meet the Health Agency's quality requirements?  
Bacteriological?     Yes     No  
Chemical?     Yes     No  
Physical     Yes     No  
Water analysis report submitted?     Yes     No
8. Please check if any of the following have been completed on the subject property and/or submitted to County Environmental Health.  
 Well Driller's Letter     Water Quality Analysis     OK or     Problems  
 Will Serve Letter     Pump Test \_\_\_\_\_ Hours \_\_\_\_\_ G.P.M.  
 Surrounding Well Logs     Hydrologic Study     Other \_\_\_\_\_

**Please attach any letters or documents to verify that water is available for the proposed project.**

**Sewage Disposal Information**

**If an on-site (individual) subsurface sewage disposal system will be used:**

1. Has an engineered percolation test been accomplished?  
 Yes     No    If yes, please attach a copy.
2. What is the distance from proposed leach field to any neighboring water wells? \_\_\_\_\_ feet
3. Will subsurface drainage result in the possibility of effluent reappearing in surface water or on adjacent lands, due to steep slopes, impervious soil layers or other existing conditions?  
 Yes     No
4. Has a piezometer test been completed?  
 Yes     No
5. Will a Waste Discharge Permit from the Regional Water Quality Control Board be required?  
 Yes     No (a waste discharge permit is typically needed when you exceed 2,500 gallons per day)

**If a community sewage disposal system is to be used:**

1. Is this project to be connected to an existing sewer line?     Yes     No  
Distance to nearest sewer line: \_\_\_\_\_    Location of connection: \_\_\_\_\_
2. What is the amount of proposed flow? \_\_\_\_\_ G.P.D.
3. Does the existing collection treatment and disposal system have adequate additional capacity to accept the proposed flow?     Yes     No

**Solid Waste Information**

- 1. What type of solid waste will be generated by the project?  
 Domestic     Industrial     Agricultural     Other, please explain? \_\_\_\_\_
- 2. Name of Solid Waste Disposal Company: \_\_\_\_\_
- 3. Where is the waste disposal storage in relation to buildings? \_\_\_\_\_
- 4. Does your project design include an area for collecting recyclable materials and/or composting materials?     Yes     No

**Community Service Information**

- 1. Name of School District: \_\_\_\_\_
- 2. Location of nearest police station: \_\_\_\_\_
- 3. Location of nearest fire station: \_\_\_\_\_
- 4. Location of nearest public transit stop: \_\_\_\_\_
- 5. Are services (grocery/other shopping) within walking distance of the project?     Yes     No  
 If yes, what is the distance? \_\_\_\_\_ feet/miles

**Historic and Archeological Information**

- 1. Please describe the historic use of the property:  
 \_\_\_\_\_
- 2. Are you aware of the presence of any historic, cultural or archaeological materials on the project site or in the vicinity?     Yes     No  
 If yes, please describe: \_\_\_\_\_
- 3. Has an archaeological surface survey been done for the project site?     Yes     No  
 If yes, please include two copies of the report with the application.

**Commercial/Industrial Project Information**

***Only complete this section if you are proposing a commercial or industrial project or zoning change.***

- 1. Days of Operation: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_
- 2. How many people will this project employ? \_\_\_\_\_
- 3. Will employees work in shifts?     Yes     No  
 If yes, please identify the shift times and number of employees for each shift \_\_\_\_\_
- 4. Will this project produce any emissions (i.e., gasses, smoke, dust, odors, fumes, vapors)?  
 Yes     No    If yes, please explain: \_\_\_\_\_
- 5. Will this project increase the noise level in the immediate vicinity?     Yes     No  
 If yes, please explain: \_\_\_\_\_  
 (If loud equipment is proposed, please submit manufacturers estimate on noise output.)
- 6. What type of industrial waste materials will result from the project? Explain in detail: \_\_\_\_\_
- 7. Will hazardous products be used or stored on-site?     Yes     No  
 If yes, please describe in detail: \_\_\_\_\_
- 8. Has a traffic study been prepared?     Yes     No    If yes, please attach a copy.

9. Please estimate the number of employees, customers and other project-related traffic trips to or from the project: Between 7:00 - 9:00 a.m. \_\_\_\_\_ Between 4:00 to 6:00 p.m. \_\_\_\_\_
10. Are you proposing any special measures (carpooling, public transit, telecommuting) to reduce automobile trips by employees  Yes  No  
If yes, please specify what you are proposing: \_\_\_\_\_
11. Are you aware of any potentially problematic roadway conditions that may exist or result from the proposed project, such as poor sight distance at access points, connecting with the public road?  
 Yes  No If yes, please describe: \_\_\_\_\_

**Agricultural Information**

Only complete this section if your site is: 1) Within the Agricultural land use category, or 2) currently in agricultural production.

1. Is the site currently in Agricultural Preserve (Williamson Act)?  Yes  No
2. If yes, is the site currently under land conservation contract?  Yes  No
3. If your land is currently vacant or in agricultural production, are there any restrictions on the crop productivity of the land? That is, are there any reasons (i.e., poor soil, steep slopes) the land cannot support a profitable agricultural crop? Please explain in detail: \_\_\_\_\_

**Special Project Information**

1. Describe any amenities included in the project, such as park areas, open spaces, common recreation facilities, etc.(these also need to be shown on your site plan): \_\_\_\_\_
2. Will the development occur in phases?  Yes  No  
If yes describe: \_\_\_\_\_
3. Do you have any plans for future additions, expansion or further activity related to or connected with this proposal?  Yes  No If yes, explain: \_\_\_\_\_
4. Are there any proposed or existing deed restrictions?  Yes  No  
If yes, please describe: \_\_\_\_\_

**Energy Conservation Information**

1. Describe any special energy conservation measures or building materials that will be incorporated into your project \*: \_\_\_\_\_

\*The county's Building Energy Efficient Structures (BEES) program can reduce your construction permit fees. Your building must exceed the California State Energy Standards (Title 24) in order to qualify for this program. If you are interested in more information, please contact the Building Services Division of the Department of Planning and Building at (805) 781-5600.

**Environmental Information**

1. List any mitigation measures that you propose to lessen the impacts associated with your project:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Are you aware of any unique, rare or endangered species (vegetation or wildlife) associated with the project site?  Yes  No

If yes, please list: \_\_\_\_\_

3. Are you aware of any previous environmental determinations for all or portions of this property?  Yes  No

If yes, please describe and provide "ED" number(s): \_\_\_\_\_

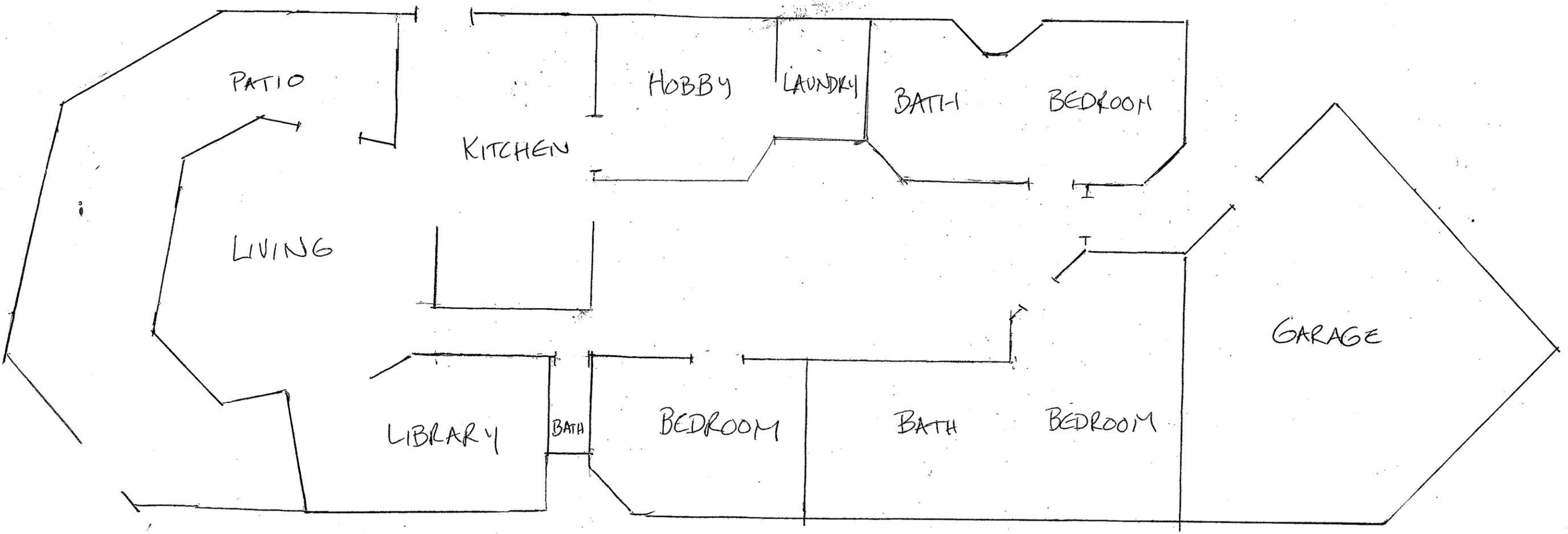
**Other Related Permits**

1. List all permits, licenses or government approvals that will be required for your project (federal, state and local): \_\_\_\_\_

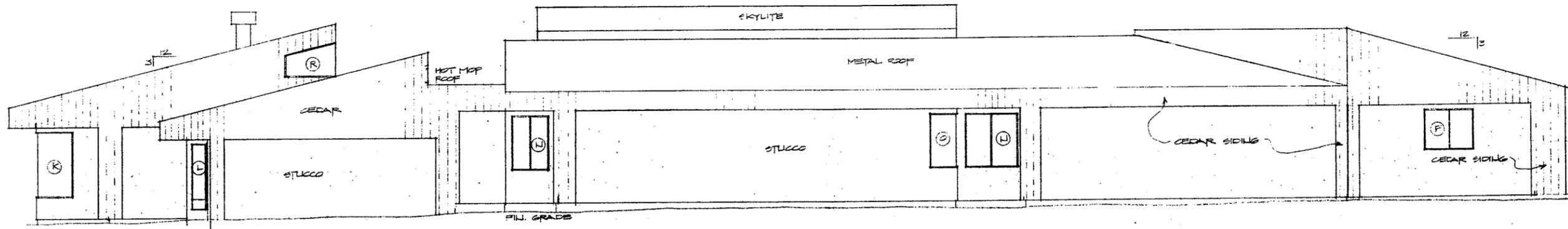
(If you are unsure if additional permits are required from other agencies, please ask a member of the Planning Department staff currently assigned in either Current Planning or the Environmental Division.)



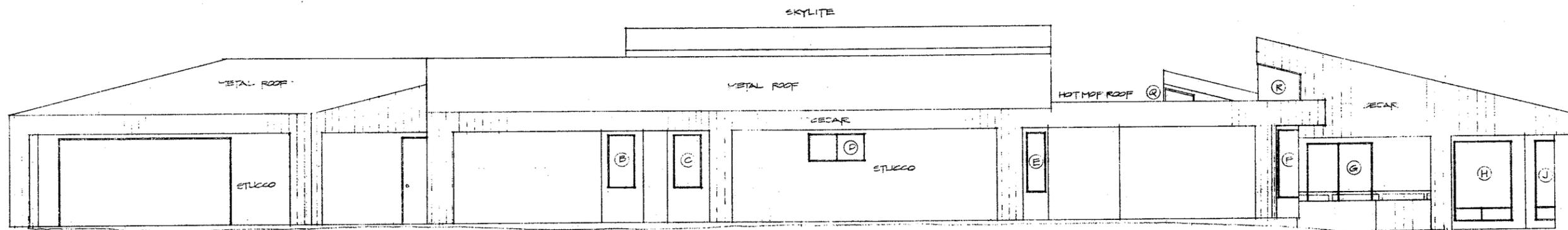
← N



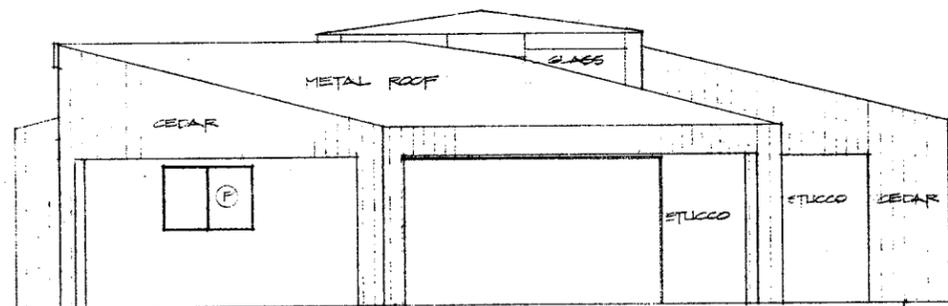
1" = 8'6"



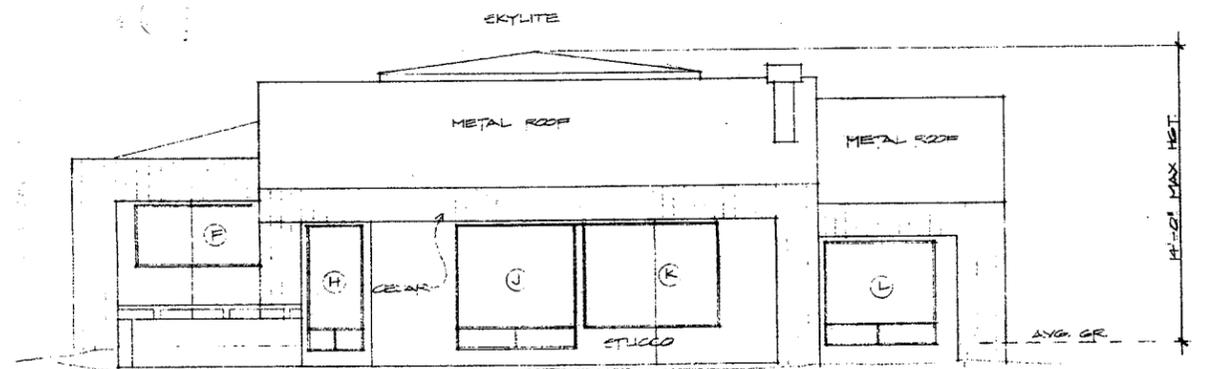
WEST ELEV. 1/4" = 1'-0"



EAST ELEV. 1/4" = 1'-0"



SOUTH ELEV. 1/4" = 1'-0"



NORTH ELEV. 1/4" = 1'-0"

COUNTY OF SAN LUIS OBISPO  
 PLANNING DEPARTMENT  
 BUILDING DIVISION

APPROVED with noted corrections

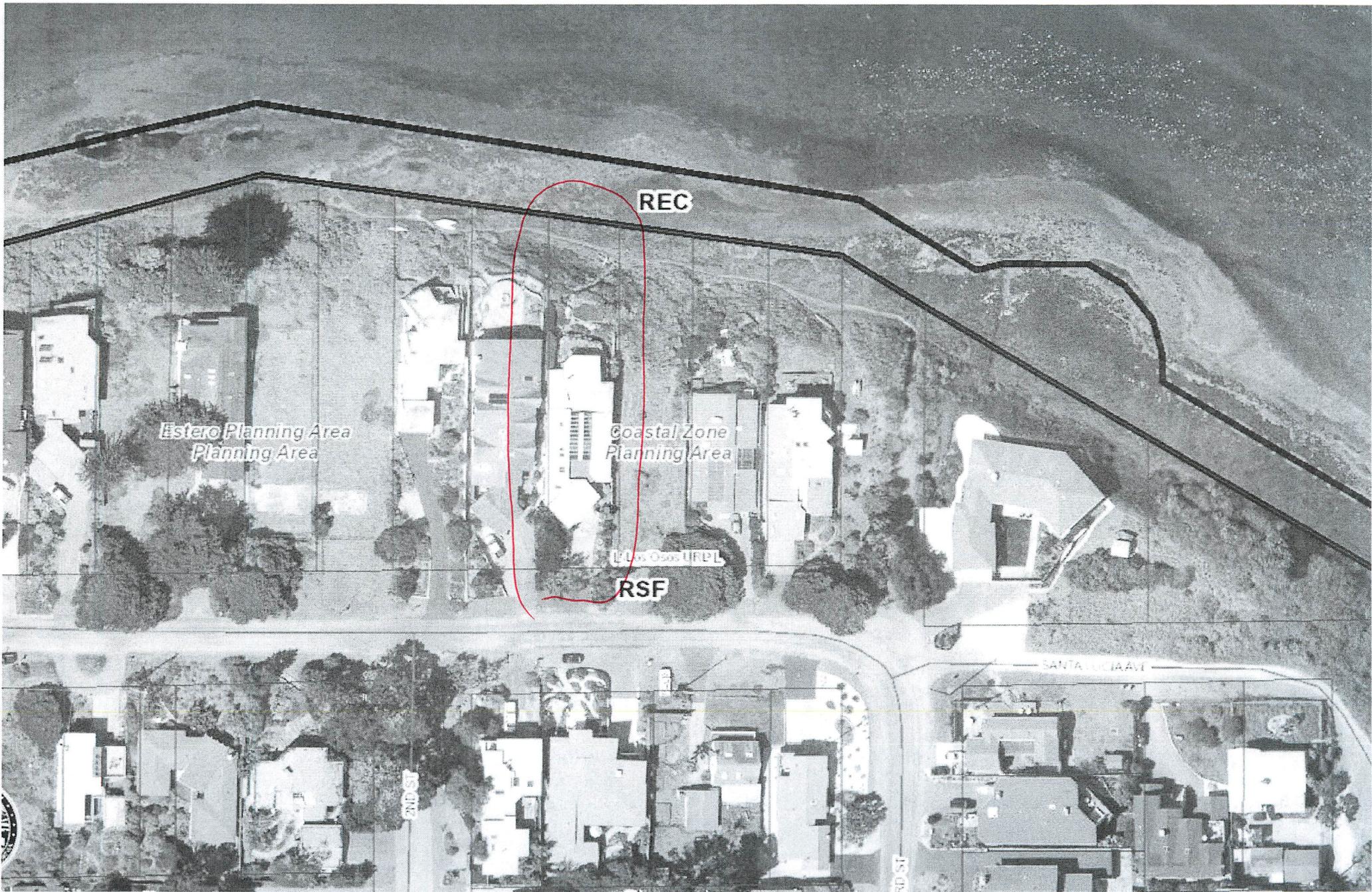
DATE \_\_\_\_\_  
 BY \_\_\_\_\_

The approval of these plans shall not be construed to permit violation of any county ordinance or State Law, and shall not prevent the County of San Luis Obispo from requiring correction of errors or omissions in plans, specifications or construction. A set of these approved plans shall be kept on job site at all times.

REVISIONS	BY

DRAWN
CHECKED
DATE
SCALE
JOB NO.
SHEET
9
OF SHEETS





REC

*Esteros Planning Area*  
*Planning Area*

*Coastal Zone*  
*Planning Area*

Las Osos URPL

RSF

SANTA LUCIA AVE

2ND ST

3RD ST



# Parcel Summary Report For Parcel # 038-681-015

9/16/2014  
2:32:20PM

## San Luis Obispo County Department of Planning and Building

County Government Center

San Luis Obispo, California 93408

Telephone: (805) 781-5600

### People Information

#### Role    Name and Address

OWN    PEREVOSKI ERNEST J  
          3463 STATE ST #204 SANTA BARBARA CA 93105-2601

OWN    ABBEY TERRI L

OWN    PEREVOSKI-ABBAY LIVING TRUST

### Address Information

<u>Status</u>	<u>Address</u>
P	00672 SANTA LUCIA AV LSOS

### Lot Information:

<u>Tract / Twncshp</u>	<u>Block / Range</u>	<u>Section</u>	<u>Community:</u>	<u>Plan/Area:</u>	<u>Lue 1:</u>	<u>Lue 2:</u>	<u>Lue 3:</u>	<u>Lot:</u>	<u>Flags:</u>	<u>Misc</u>
038681	015	0001	Los Osos	Estero Plannin	AS	CA	FH	N		
038681	015	0002	Los Osos	Estero Plannin	WET	CAZ	SSN	N		
40	0001	0015	Los Osos	Estero Plannin	RSF	LCP	SRA	Y		

### Parcel Information

<u>Status</u>	<u>Description</u>
Active	TR 40 BL 1 LT 15

### Notes

### Tax Districts

SAN LUIS COASTAL  
 SAN LUIS OBISPO JT(27,40)  
 NO. 02  
 LOS OSOS, ZONE A



# Parcel Summary Report For Parcel # 038-681-015

9/16/2014  
2:32:21PM

## San Luis Obispo County Department of Planning and Building

County Government Center

San Luis Obispo, California 93408

Telephone: (805) 781-5600

LOS OSOS, ZONE B  
AREA NO. 21  
LOS OSOS, ZONE J  
LOS OSOS, ZONE K  
LOS OSOS

### Case Information

**Case Number:**

DRC2014-00028

**Case Status:**

REC

Primary Parcel

**Description:**

VACATION RENTAL