



DEPARTMENT OF PLANNING AND BUILDING

Promoting the wise use of land - Helping to build great communities

THIS IS A NEW PROJECT REFERRAL

DATE: 11/19/2015

TO: _____

FROM: BRANDI CUMMINGS, 805-781-1006, BCummings@co.slo.ca.us
COASTAL Team / Development Review

PROJECT DESCRIPTION: DRC2015-00059 SCHOONBECK MUP, PROPOSED RECREATION ROOM ADDITION OF 354 SQ. FT. TO EXISTING RESIDENCE LOCATED AT 239 VISTA CT., LOS OSOS APN: 074-042-054

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

DRC2015-00059

SCHOONBECK AL

APPLICATION TYPE - CHECK ALL THAT APPLY

- Emergency Permit
- Tree Permit
- Minor Use Permit
- Conditional Use Permit/Development Plan
- Plot Plan
- Curb, Gutter & Sidewalk Waiver
- Other
- Site Plan
- Surface Mining/Reclamation Plan
- Zoning Clearance
- Amendment to approved land use permit
- Variance

MINOR USE PERMIT

ADDITION TO EXISTING RESIDENCE, ADD 354 SQ.FT. REC ROOM.

EST/LSOS

AS CAZ LCP RSF

APPLICANT INFORMATION Check box for contact person assigned to this project

Landowner Name ALAN & PHYLLIS SCHOONBECK Daytime Phone (805) 528-5232
 Mailing Address 239 VISTA CT. LOS OSOS, CA. Zip Code 93402
 Email Address: _____

Applicant Name ALAN & PHYLLIS SCHOONBECK Daytime Phone (805) 528-5232
 Mailing Address 239 VISTA CT. LOS OSOS, CA Zip Code 93402
 Email Address: _____

Agent Name JOHN CLONINGER Daytime Phone (805) 528-6506
 Mailing Address 1883 8TH ST. LOS OSOS, CA. Zip Code 93402
 Email Address: DSU@FIX.NET

PROPERTY INFORMATION

Total Size of Site: 6734 SQ.FT. Assessor Parcel Number(s): 074-042-054

Legal Description: LOT 54 OF TRACT 417 - VISTA DE ORO

Address of the project (if known): 239 VISTA CT. LOS OSOS

Directions to the site (including gate codes) - describe first with name of road providing primary access to the site, then nearest roads, landmarks, etc.: LOS OSOS VALLEY RD WEST INTO PECHO VALLEY RD. LEFT ON MONTANA WAY, RIGHT ON LOS ARBOLES, RIGHT ON VISTA CT.

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

EXISTING SINGLE FAMILY RESIDENCE W/ DOMESTIC ~~AND~~ LANDSCAPING

PROPOSED PROJECT

Describe the proposed project (inc. sq. ft. of all buildings): ADD 354 SQ.FT. REC ROOM
ADDITION TO EXISTING RESIDENCE

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 Alan H. Schoonbeck

Date 11/17/15

FOR STAFF USE ONLY

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): _____

Describe existing and future access to the proposed project site: EXISTING PAVED STREET
- VISTA CT. W/ CONCRETE DRIVEWAY TO RESIDENCE

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: RESIDENTIAL

South: VACANT - UNDEVELOPED.
HAD BEEN FARMED IN THE PAST

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: 1971 sq. feet 29 % Landscaping: 3893 sq. feet 58 %

Paving: 870 sq. feet 13 % Other (specify) _____

Total area of all paving and structures: 2841 sq. feet acres

Total area of grading or removal of ground cover: 0 sq. feet acres

Number of parking spaces proposed: 2 (EXISTING) Height of tallest structure: 14'6" (EXISTING) 13'6" (NEW ADDITION)

Number of trees to be removed: 0 Type: _____

Setbacks: Front 20 Right 5 Left 5 Back 10

Proposed water source: On-site well Shared well Other _____

Community System - List the agency or company responsible for provision: GOLDEN STATE WATER CO.

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: _____

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

Fire Agency: List the agency responsible for fire protection: CAL 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: 1 - EXISTING Number of bedrooms per unit: 2 (EXISTING)

Total floor area of all structures including upper stories, but not garages and carports: 1418

Total of area of the lot(s) minus building footprint and parking spaces: 4763

ENVIRONMENTAL DESCRIPTION FORM

San Luis Obispo County Department of Planning and Building

File No _____

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: .154 acres
Moderate slopes of 10-30%: 0 acres
Steep slopes over 30%: 0 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: WHEN SUB DIVISION FIRST DEVELOPED
- 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: VISTA CT.

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? SINGLE FAMILY RESIDENCE
4. How many service connections will be required? 1 - IS ALREADY EXISTING
5. Do operable water facilities exist on the site?
 Yes No If yes, please describe: _____
- N/A 6. Has there been a sustained yield test on proposed or existing wells?
 Yes No If yes, please attach.
- N/A 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
- N/A 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.

N/A **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: _____
EXISTING CONNECTION (with arrow pointing to 'Yes')
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: MISSION COUNTRY DISPOSAL
- 3. Where is the waste disposal storage in relation to buildings? REAR OF BUILDING
- 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: SAN LUIS COASTAL UNIFIED
- 2. Location of nearest police station: 2099 10TH ST. LOS OSOS
- 3. Location of nearest fire station: 2315 BAYVIEW HEIGHTS RD. LOS OSOS
- 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:
SINGLE FAMILY RESIDENCE
- 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.

THE PREVIOUSLY FARMED PROPERTY TO THE SOUTH HAD AN ARCH SURVEY DONE - NO ARCHAEOLOGICAL FINDINGS

Commercial/Industrial Project Information

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

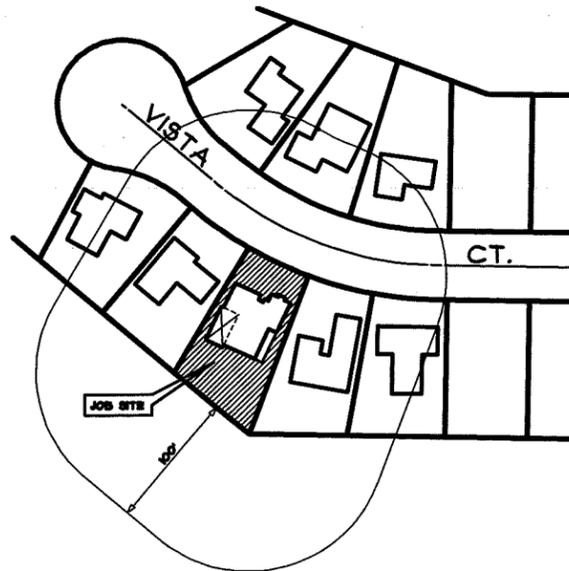
- 1. Days of Operation: _____ Hours of Operation: _____
- 2. How many people will this project employ? _____
- 3. Will employees work in shifts? Yes No
 If yes, please identify the shift times and number of employees for each shift _____
- 4. Will this project produce any emissions (i.e., gasses, smoke, 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.

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): SLO COUNTY BUILDING PERMIT, CALIF. COASTAL COMMISSION REVIEW

(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.)

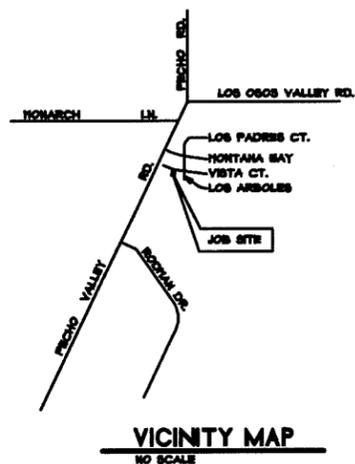


VICINITY SITE MAP

1"=40.00'
STRUCTURES WITHIN 100' OF PROJECT SITE
NOTE: STRUCTURES SHOWN ARE RESIDENCES.

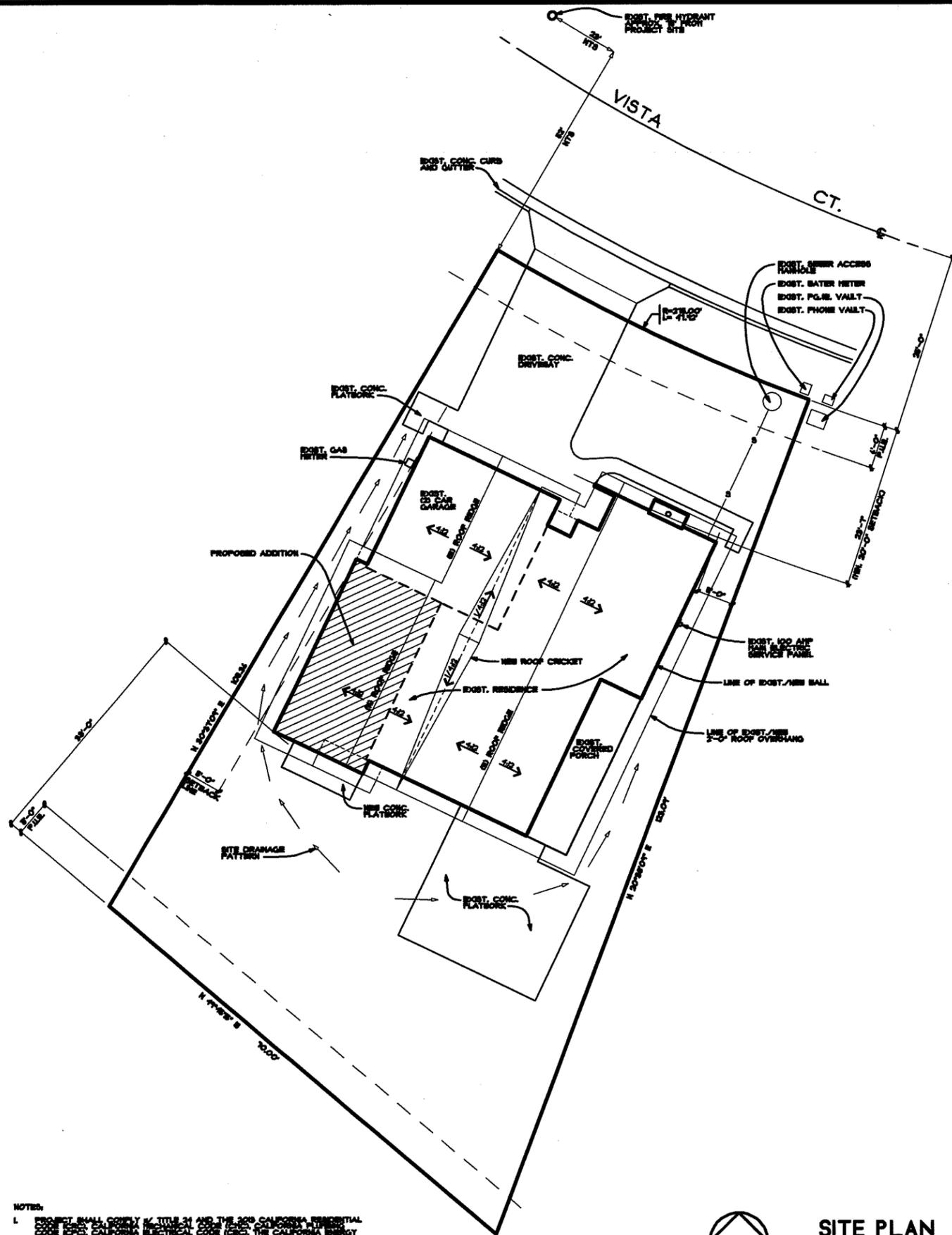
PROJECT INFORMATION

OWNER:	ALAN AND PHYLLIS SCHOONBECK 238 VISTA CT. 92402 (805) 528-5232
LEGAL DESCRIPTION:	LOT 874 OF TRACT 47 - VISTA DE ORO, CITY OF SAN LUIS OBISPO, STATE OF CALIFORNIA
A.P.N.:	074-043-024
ZONE:	SINGLE FAMILY RESIDENTIAL
OCCUPANCY:	RS-1
BUILDING TYPE:	V
SPRINKLERED:	NO
NO. OF STORES:	1
MAX BUILDING HEIGHT:	20' ABOVE AVERAGE NATURAL GRADE
PROPOSED HEIGHT:	19'-6"
NO. OF PARKING SPACES:	2
SITE AREA:	6784 SQ.FT.
LIVING AREAS:	
EXIST. RESIDENCE	1044 SQ.FT.
NEW ADDITION	344 SQ.FT.
TOTAL	1388 SQ.FT.
EXIST. GARAGE AREA:	400 SQ.FT.
EXIST. COVERED PORCH AREA:	83 SQ.FT.
EXIST. PAVED SURFACE AREA:	148 SQ.FT.
EXIST. IMPERVIOUS SURFACE AREA:	1044+400+83+148 = 2675 SQ.FT.
EXIST. IMPERVIOUS SURFACE AREA TO BE REMOVED:	-140 SQ.FT.
NEW PAVED SURFACE AREA:	42 SQ.FT.
NET NEW IMPERVIOUS SURFACE AREA:	254+40+42 = 296 SQ.FT.
INTERIOR AREA TO BE REMODELED:	45 SQ.FT.



VICINITY MAP

NO SCALE



NOTES:

1. PROJECT SHALL COMPLY WITH TITLE 24 AND THE 2001 CALIFORNIA RESIDENTIAL CODE BOOK, CALIFORNIA ELECTRICAL CODE BOOK, THE CALIFORNIA ENERGY CODE (CEC), AND LOCAL CODES OR ORDINANCES IN EFFECT.
2. PROVIDE IN-PLACE DRAINAGE AWAY FROM STRUCTURE FOR NEW LOT DISTANCE OR AS PER THE ELECTION TO CIRC DRAIN ALLOWING A 2% SLOPE.
3. FIELD SHALL VERIFY ALL DIMENSIONAL CONDITIONS AND LOCATION OF UTILITIES PRIOR TO THE START OF CONSTRUCTION.
4. PLANS MEET S.C.R. OF TITLE 24, PART 2 CHAP. 2-82 C.A.C.



SITE PLAN

SCALE: 1/8"=1'-0"

REVISED	BY

Drafting Services Unlimited
1888 24th St.
Los Osos, CA 93402
(805) 528-5232
RESIDENTIAL & COMMERCIAL

PROPOSED ADDITION FOR:
ALAN AND PHYLLIS SCHOONBECK
238 VISTA CT.
LOS OSOS, CA
(805) 528-5232

DATE: NOV. 11, 2008
SCALE: AS SHOWN
DRAWN BY: JOHN CLEMMER
SHEET:
A-1

REVISION	BY

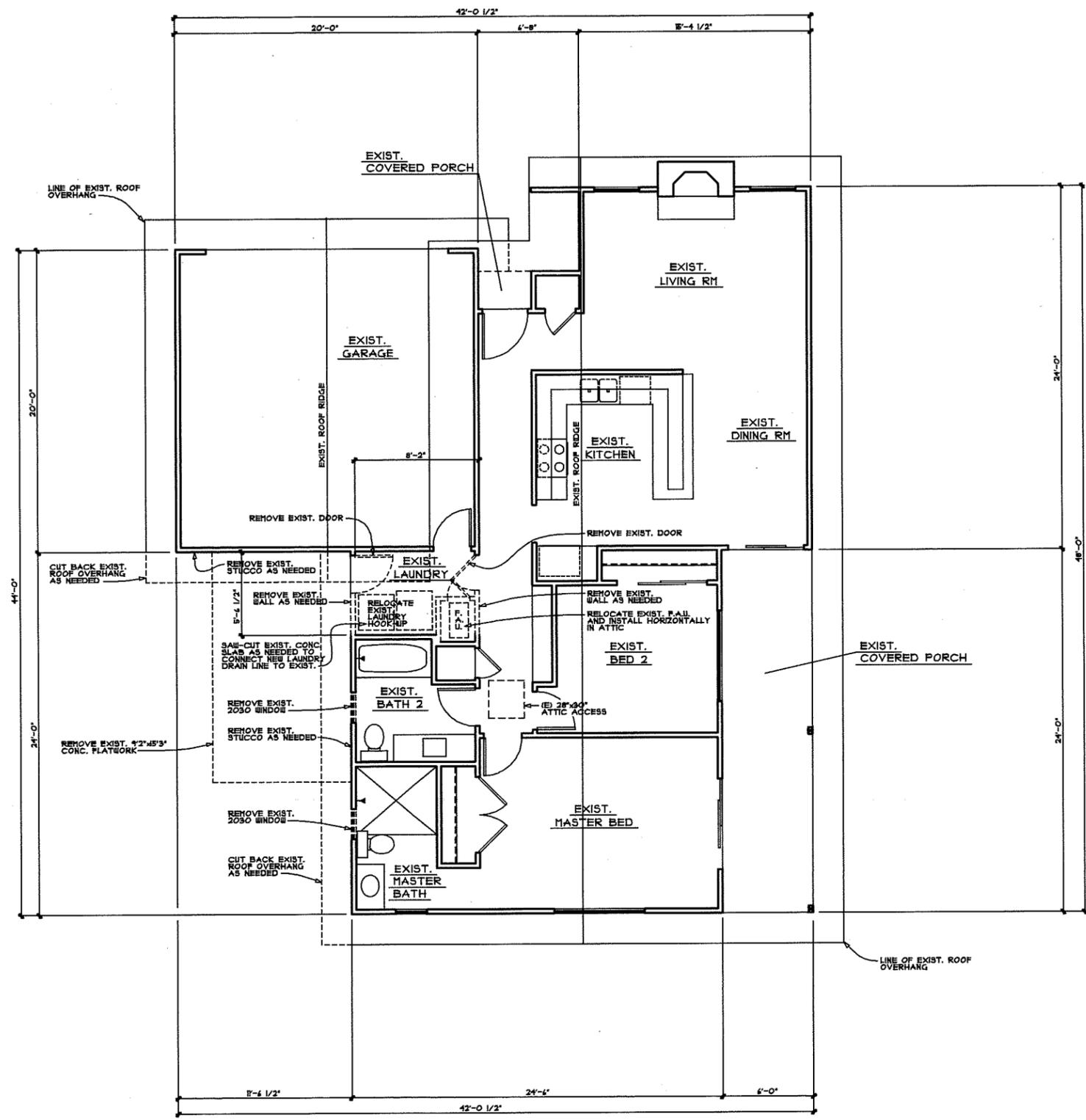
Drafting Services Unlimited

1883 8th St.
Los Osos, Ca. 93402
(805) 528-8508
RESIDENTIAL • COMMERCIAL

PROPOSED ADDITION FOR:
ALAN AND PHYLLIS SCHOONBECK
239 VISTA CT.
LOS OSOS, CA.
(805) 528-5232

DATE: NOV. 16, 2015
SCALE: AS SHOWN
DRAWN BY: JOHN CLONINGER

SHEET
A-2



EXIST. FLOOR/DEMO PLAN
1/4" = 1'-0"

REVISION	BY

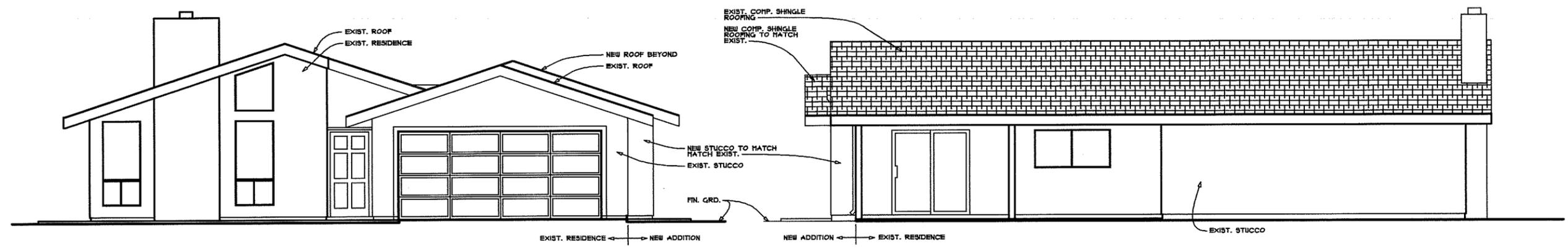
Drafting Services Unlimited

1883 8th St.
Los Angeles, Ca. 90102
(805) 528-8508
RESIDENTIAL • COMMERCIAL

PROPOSED ADDITION FOR:
ALAN AND PHYLLIS SCHOONBECK
239 VISTA CT.
LOS ANGELES, CA.
(805) 528-5232

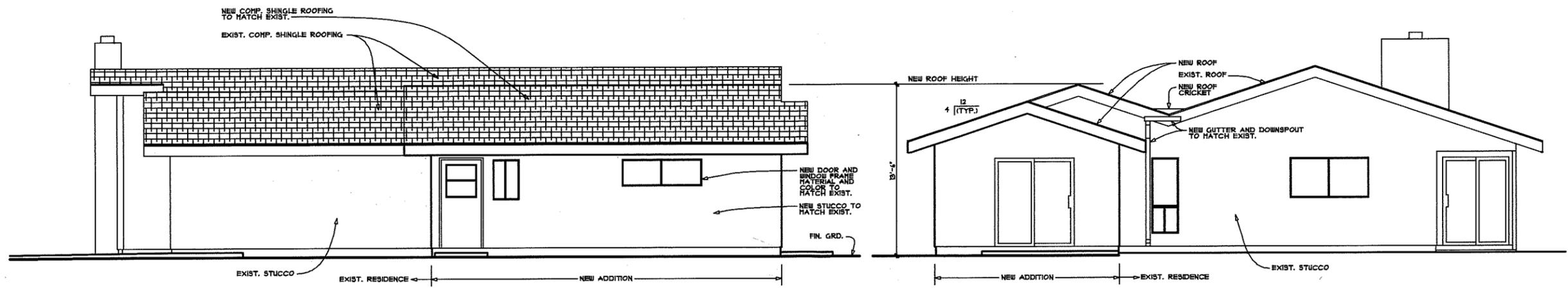
DATE: NOV. 14, 2016
SCALE: AS SHOWN
DRAWN BY: JOHN CLONINGER

HEET
A-4



NORTH ELEVATION 1/4" = 1'-0"

EAST ELEVATION 1/4" = 1'-0"



WEST ELEVATION 1/4" = 1'-0"

SOUTH ELEVATION 1/4" = 1'-0"



028

029

REVISIONS	
TECH	DATE



THIS MAP IS PREPARED FOR ASSESSMENT PURPOSES ONLY.

TRACT 417 - VISTA DE ORO R.M. BK. 8 PG. 3

LOS OSOS
 ASSESSOR'S MAP, COUNTY OF
 SAN LUIS OBISPO, CA.
 BOOK 074 PAGE 042



Parcel Summary Report For Parcel # 074-042-054

11/18/2015
8:19:17AM

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 SCHOONBECK ALAN H
239 VISTA COURT LOS OSOS CA 93402-3607

Address Information

Status Address
P 00239 VISTA CT LSOS

Lot Information:

<u>Tract / Twnshp</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>
074042	054	0001	Los Osos	Estero Plannin	CAZ					N
417	0000	0054	Los Osos	Estero Plannin	RSF	LCP	AS			Y

Parcel Information

Status Description
Active TR 417 LT 54 LESS MIN RTS

Notes

Tax Districts

SAN LUIS COASTAL
SAN LUIS OBISPO JT(27,40)
NO. 02
LOS OSOS, ZONE B
LOS OSOS, ZONE E
AREA NO. 21
LOS OSOS, ZONE J
LOS OSOS, ZONE K
LOS OSOS



Parcel Summary Report For Parcel # 074-042-054

11/18/2015
8:19:17AM

San Luis Obispo County Department of Planning and Building

County Government Center

San Luis Obispo, California 93408

Telephone: (805) 781-5600

Case Information

Case Number:

Case Status:

DRC2015-00059 REC Primary Parcel

Description:

PROPOSED RECREATION ROOM ADDITION OF 354 SQ. FT. TO EXISTING RESIDENCE.

P960381Z APP Primary Parcel

Description:

RETAIL MISC

PMT2004-00685 FNL Primary Parcel

Description:

RE-ROOF W/SHEATHING

PMT2012-01599 FNL Primary Parcel

Description:

Forced Air Heating / Air Conditioning Unit Replacement

This permit allows the replacement of the existing residential FAU, in the same location, for a single family dwelling.

ZON2013-00244 AUT Primary Parcel

Description:

REQUEST TO REMOVE ONE (1) ITALIAN STONE PINE AND ONE (1) LIVE OAK, LOCATED IN THE FRONT YARD, AND ONE (1) PINE LOCATED IN THE BACK YARD; TREES ARE HAZARDOUS AND ONE IS UPLIFTING THE ROAD. PLEASE CALL BEFORE INSPECTING SO CUSTOMER CAN UNLOCK BACK GATE. THREE (3) TREES IDENTIFIED BY OWNER. THE FIRST IS A PINE TREE TARGETING HOUSE AND ROAD. TREE HAS ALTERNATE LEADERS AND HAS CRACK AT UNION. SECOND TREE IS A SMALL COAST LIVE OAK DEFOLIATED BY OAK LEAF MOTH. THIRD TREE IS A PINE ON SLOPE ABOVE HOUSE LEANING OVER HOUSE. O.K. TO REMOVE TWO (2) PINE TREES. OWNER WILL MONITOR THE OAK THROUGH THE SPRING FOR RECOVERY FROM MOTH DAMAGE. OWNER CAN REMOVE OAK TREE IF IT DIES.