



COUNTY OF SAN LUIS OBISPO
DEPARTMENT OF PLANNING & BUILDING
TREVOR KEITH, *DIRECTOR*

THIS IS A NEW PROJECT REFERRAL

DATE: 4/5/2019

TO: 1st District Legislative Assistant, Agricultural Commissioner, Assessor, Air Pollution Control Board (APCD), Building Division, Cal Fire/County Fire, Environmental Health, Public Works, Sheriff, Caltrans, U.S. Fish and Wildlife, CA Fish and Wildlife, Upper Salinas Las Tablas Resource Conservation District, AB52

FROM: Cassidy McSurdy (cmcsurdy@co.slo.ca.us 805-788-2959)

PROJECT NUMBER & NAME: DRC2019-00042 Nahail

PROJECT DESCRIPTION: Proposed Minor Use Permit for 3 acres outdoor cannabis cultivation to be located at Neal Springs Rd. Templeton, CA.

APN(s): 020-301-010

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 I: 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.

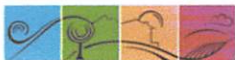
Please attach any conditions of approval you recommend to be incorporated into the project's approval, or state reasons for recommending denial.

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

- ☐ 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

Department Use Only
Do Not Mark
(Staff Apply Label Here)

APPLICANT INFORMATION Check box for contact

person assigned to this project

☒ Landowner Name Jeff Nahia Daytime Phone 805-712-4743
 Mailing Address PO BOX 1766 Templeton, CA 93 Zip Code 93465
 Email Address: ccranha@gmail.com

☐ Applicant Name Mark Legreid Daytime Phone 805-462-2400
 Mailing Address 2141 Cienega Street, Oceano CA 93445 Zip Code 93445
 Email Address: marklegreid@gmail.com

☒ Agent Name Henry Mancini Daytime Phone 805-440-6285
 Mailing Address 262 Phelan Ranch Way Arroyo Grande Zip Code 93420
 Email Address: hsmancini@gmail.com

PROPERTY INFORMATION

Total Size of Site: 2,348,755 sq. ft. Assessor Parcel Number(s): 020-301-010

Legal Description: RHO STA YSABEL LT 105

Address of the project (if known): 0 NEAL SPRING ROAD, Templeton, CA.

Directions to the site (including gate codes) - describe first with name of road providing primary access to the site, then nearest roads, landmarks, etc.: NEAL SPRING RD VIA EL POMAR DR

Describe current uses, existing structures, and other improvements and vegetation on the property:
VACANT LAND, 5000 GAL H₂O STORAGE, P&E SERVICE, WELL SERVICE

PROPOSED PROJECT

Describe the proposed project (inc. sq. ft. of all buildings): 3AC outdoor cannabis cultivation

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 3-28-19

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: EASEMENT ON EAST side of 2210 NEAL SPRING

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: RESIDENTIAL
East: AG West: RES/AG

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) Cannabis - 3AC

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

Total area of grading or removal of ground cover: 3AC ☐ sq. feet ☐ acres

Number of parking spaces proposed: 3 Height of tallest structure: _____

Number of trees to be removed: 0 Type: _____

Setbacks: Front 300' Right 300' Left 300' Back 300'

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

☐ Community System - List the agency or company responsible for provision: _____

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

Proposed sewage disposal: ☐ Individual on-site system ☒ Other Portable RESTROOM

☐ 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: Templeton Fire Department

For commercial/industrial projects answer the following:

Total outdoor use area: 3AC ☐ 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: _____ sf

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



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: 3 acres
Moderate slopes - 10-20%: _____ acres
20-30%: _____ 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 Cannabis cultivation
☐ Commercial/Office - Explain _____
☐ Industrial - Explain _____
3. What is the expected daily water demand associated with the project? 1600-2000gal
4. How many service connections will be required? 1
5. Do operable water facilities exist on the site?
☒ Yes ☐ No If yes, please describe: Installed domestic well
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 4 Hours / 67 GPM
☐ 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 If 'Yes', please attach.
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? _____ GPD
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? Portable Restrooms
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: Templeton Unified School district
2. Location of nearest police station: 356 N. MAIN ST, Templeton, CA.
3. Location of nearest fire station: 206 5th ST. Templeton, CA.
4. Location of nearest public transit stop: Lastables PARK & Ride, Bennet Way, Templeton, CA
5. Are services (grocery/other shopping) within walking distance (1/2 mile or closer) of the project? ☐ Yes ☒ No

Historic and Archeological Information

1. Please describe the historic use of the property: AG
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: 7 days of week Hours of Operation: sunup - sundown
2. How many people will this project employ? 2
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: cannabis odor during flowering cycle
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: ORGANIC plant materials ONLY
- 7. Will hazardous products be used or stored on-site? ☒ Yes ☐ No
If yes, please describe in detail: DIESEL FUEL, GASOLINE, LIQUID FERTILIZERS
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: None. Soil rated grade 2 (CA STORE INDEX)

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): N/A
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: 22,000 sq. ft greenhouse facility
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*: N/A

*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: SAN JUAN KIT FOX

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): CA CALIFORNIA MEDIUM OUTDOOR CULTIVATION LICENSE

(If you are unsure if additional permits are required from other agencies, please ask a member of the Planning Department staff currently assigned to the project)



COUNTY OF SAN LUIS OBISPO
DEPARTMENT OF PLANNING & BUILDING
CANNABIS APPLICATION SUPPLEMENT

PLN-2018
12/8/2017

The following information is required in addition to the Land Use Permit Application.

Cannabis Activities Proposed

☒ Cultivation
☐ Testing Facility

auxiliary
☒ Nursery
☐ Dispensary

☐ Manufacturing Facility
☒ Distribution Facility *transport*

For Cultivation and Nurseries ONLY

Approved Cooperative/Collective Registration number. *Note: If you do not hold an approved cooperative/collective registration, you cannot apply for cultivation until 2019.*

Approved registration number: CCM2016-

What is the applicant on the approved registration? *Note: The applicant name on the registration must match the applicant name on the land use permit.*

Name of applicant: MARK Leguina

Are you planning on cultivating on the same site that a registration was approved for?

☐ Yes ☒ No

What type of State cultivation license are you seeking?

☐ Type 1
☐ Type 5
☐ Mixed-light

☐ Type 2
☐ Microbusiness

☐ Type 3
☐ Indoor

☐ Type 4
☒ Outdoor

Designate the total square footage of your cultivation canopy area(s). This is not necessarily the maximum canopy size allowed by the tier of license for which you are applying, but the amount of canopy area you intend to produce. If you intend to have multiple canopy area locations, include only the total square footage of the total canopy.

130,680

Check one or more of the following that apply and attach a detailed diagram of your designated canopy area. Include specific dimensions, in feet and inches, in the diagram. If you have only a single canopy area, clearly indicate that. If you are designating multiple canopy areas, clearly identify the square footage and dimensions of each area and how it is separated from other canopy areas. Note that if you are designating multiple canopy areas you must separate each area by a physical boundary such as an interior wall. Vertically stacked canopy areas must be identified as such in the detailed diagram submitted by applicants.

I have designated the specific area and dimensions of my newly designated canopy area(s):

CANNABIS APPLICATION SUPPLEMENT

- ☒ On my floor plan submitted with the application
☐ On an additional document submitted with my application

Record your estimates of electrical usage in kilowatt-hours (kWh). To determine how many kWh a piece of equipment uses, take the following steps:

- Determine the wattage of the device by checking manufacturer specifications
- Multiply this number by the number of hours each month the device will be in use to determine watt-hours.
- Divide each month's watt-hours by 1,000 to determine kWh. Round to three decimal places.
- Repeat this for each piece of equipment and the total amounts for each month.
- Estimates should assume the business is in full production for each month.

Describe all sources of electrical power and the total annual kWh expected to be drawn from each. For example, if the operation uses on-site power generation from a source such as solar panels, document the amount of power you expect to use from that source in addition to any other sources.

Source or utility name	Expected kWh drawn annually
PGE	1000/kw
Total Annual kWh:	1000/kw

Clearly identify the measurement unit you are using to estimate or report your water usage. If you are using multiple units, you may use additional columns to record that information. If you are using reclaimed water, identify that as a source. If you are utilizing more sources of water than may be included on this form, you may include that information on a separate page submitted with this application.

Estimate the total water used in the production of marijuana by month. If recording estimates for multiple sources, estimate these amounts separately.

Source			
Month and Year			
1			
2			
3			
4			
5	May	1000g/day	
6	June	1000g/day	
7	July	1000g/day	
8	August	1000g/day	
9	September	1000g/day	
10	October	1000g/day	
11			
12			
Totals			

CANNABIS APPLICATION SUPPLEMENT

Do you plan on using pesticides?

☐ Yes ☒ No

List of pesticides anticipated to be used: _____

For Manufacturing ONLY

What type of State manufacturing license are you seeking? *Note: Volatile manufacturing is prohibited.*

☐ Type 6 ☐ Type 7 ☐ Type N ☐ Type P
☐ Microbusiness

What type of products do you plan on manufacturing?

☐ Oils ☐ Edibles ☐ Topicals ☐ Other _____

Will the facility be utilizing a closed-loop extraction system?

☐ Yes ☐ No

(If extracting) What types of extraction will you be performing?

☐ Butane ☐ Propane ☐ Hexane ☐ Carbon Dioxide
☐ Ethanol ☐ Mechanical ☐ None
☐ Other _____

For Distribution ONLY

What type of State distribution license are you seeking?

☐ Type 11 ☒ ^{9 or 13} Type 11 - Transport Only

Will you be operating a storage-only business?

☐ Yes ☒ No

How many vehicles do you anticipate transporting/distributing product?

☒ 1-5 ☐ 6-10 ☐ 11+ ☐ N/A Storage Only/Other

CANNABIS APPLICATION SUPPLEMENT

For Dispensaries ONLY

What type of State dispensary license are you seeking? *Note: Dispensaries are not allowed to have storefronts open to the public.*

☐ Type 9 – non-storefront dispensary ☐ Type 10 ☐ Microbusiness

Will you be delivering to other jurisdictions?

☐ Yes ☐ No

How many vehicles do you anticipate delivering product?

☐ 1-5 ☐ 6-10 ☐ 11+ ☐ N/A Storage Only/Other

How many deliveries per day do you anticipate delivering product?

☐ <10 ☐ 11-50 ☐ 51-100 ☐ >100 ☐ N/A Storage Only/Other

Abalone Coast Analytical, Inc.
141 Suburban Rd, Ste C-1 San Luis Obispo CA, 93401
Phone: 595-1080 Fax: 595-1080
ELAP #2881

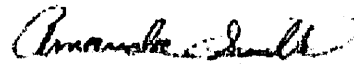
Order #: 14-8232
Date/Time Rec'd: 12/30/14 1323

Miller Drilling Company
301 North Main Street
Templeton, CA 93465

Contact: Kurt Bollinger
Phone: 434-1888

Sample #	Sample Description	Date / Time	Analysis	Method	Result	Units	RL	Completion
-1	# 19509	12/30/14	Total Coliform	SM 9223 B.	Absent	/100ml	1	12/31/1
	2210 Neal Springs Rd		E-coli	IDEXX	Absent	/100ml	1	12/31/1

Report Completion date: 12/31/14

Reviewed: 
Amanda Smith, Lab Director

Definitions

Absent: Less than 1 CFU/100mLs
Present: 1 or more CFU/100mLs
CFU: Colony Forming Unit

State of California CDPH ELAP 2881

**329 N. Main St.
Templeton, CA 93465
(805) 434-1888**

PUMP TEST REPORT

Job#	18509
Pump Set	210
Well #:	6"
Pump Size:	10 HP
Well Depth:	232
Testing Method:	SUBMERSIBLE
Perf Rec:	N/A
APN:	C20-301-010
LOCATION:	2210 NEAL SPRINGS

APN: C20-301-010
LOCATION: 2210 NEAL SPRINGS

[illegible]

STANDING LEVEL AFTER TEST: 152 AFTER 30 MIN
FINAL TEST RESULTS: Produced: 67 GPM for 4 hours on: 12/30/2014
Test Run By: KURT



Parcel Information

APN: 020-301-010

Assessee: NAHIAL JEFF & VALERIE

Care Of:

Address: PO BOX 1766 TEMPLETON
CA 93465

Description: RHO STA YSABEL LT 105

Site Address:
00000 NEAL SPRING

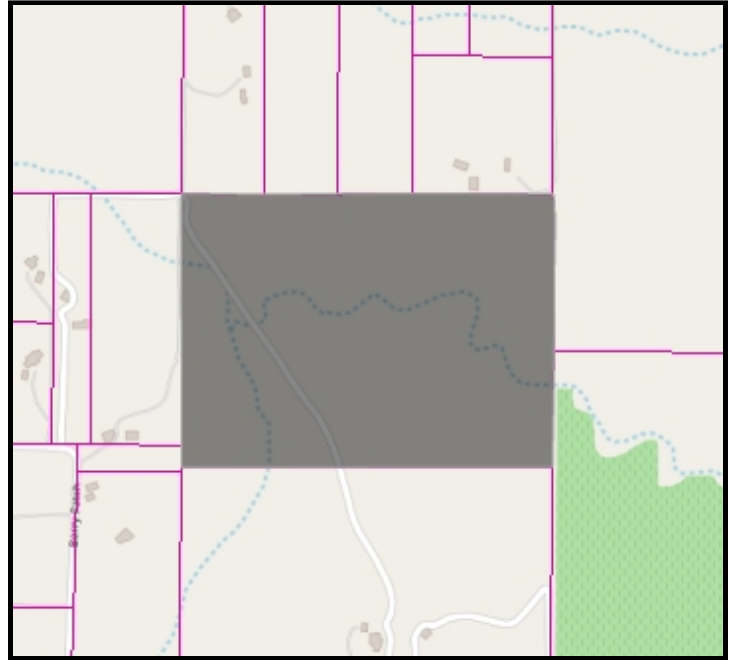
Tax Rate Area Code: 104001

Estimated Acres: 54.38

Community Code: NCELPO

Supervisor District: Supdist 1

Avg Percent Slope: 9



Selected Parcel

Land Use Information

Land Uses Combining Designations

AG	
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Parcel location within San Luis Obispo County

Permit Information

Permit	Description	Application Date
PMTR2018-01973	PMTR - Residential Permit	9/27/2018 8:52:19 AM
PMTR2018-01925	PMTR - Residential Permit	9/20/2018 1:27:58 PM
PMTR2018-01393	PMTR - Residential Permit	7/18/2018 12:29:18 PM
PMTR2018-01392	PMTR - Residential Permit	7/18/2018 12:08:13 PM
PMT2016-06206	PMTC - Commercial Permit	3/6/2017 4:36:08 PM



S980256L

Subdivision

5/10/1999 12:00:00 AM

Clerk Recorder Documents


Clerk Document	Date	Document Type
2001-R-035857	05/22/2001	O
1999-R-081754	11/19/1999	O
1998-R-029559	05/19/1998	O
1996-R-025519	05/22/1996	T
1996-R-020394	04/24/1996	T
1995-R-037965	08/23/1995	O
1988-R-077476	12/30/1988	O
1987-R-011307	02/18/1987	O
1987-R-011306	02/18/1987	O
1975-R-C37370	11/12/1975	C



Interactive Data Viewer



Legend

 SLO County Parcels

-752.33 0 376.17 752.33 Feet 1: 4,514

WGS_1984_Web_Mercator_Auxiliary_Sphere
© County of San Luis Obispo Planning and Building Department



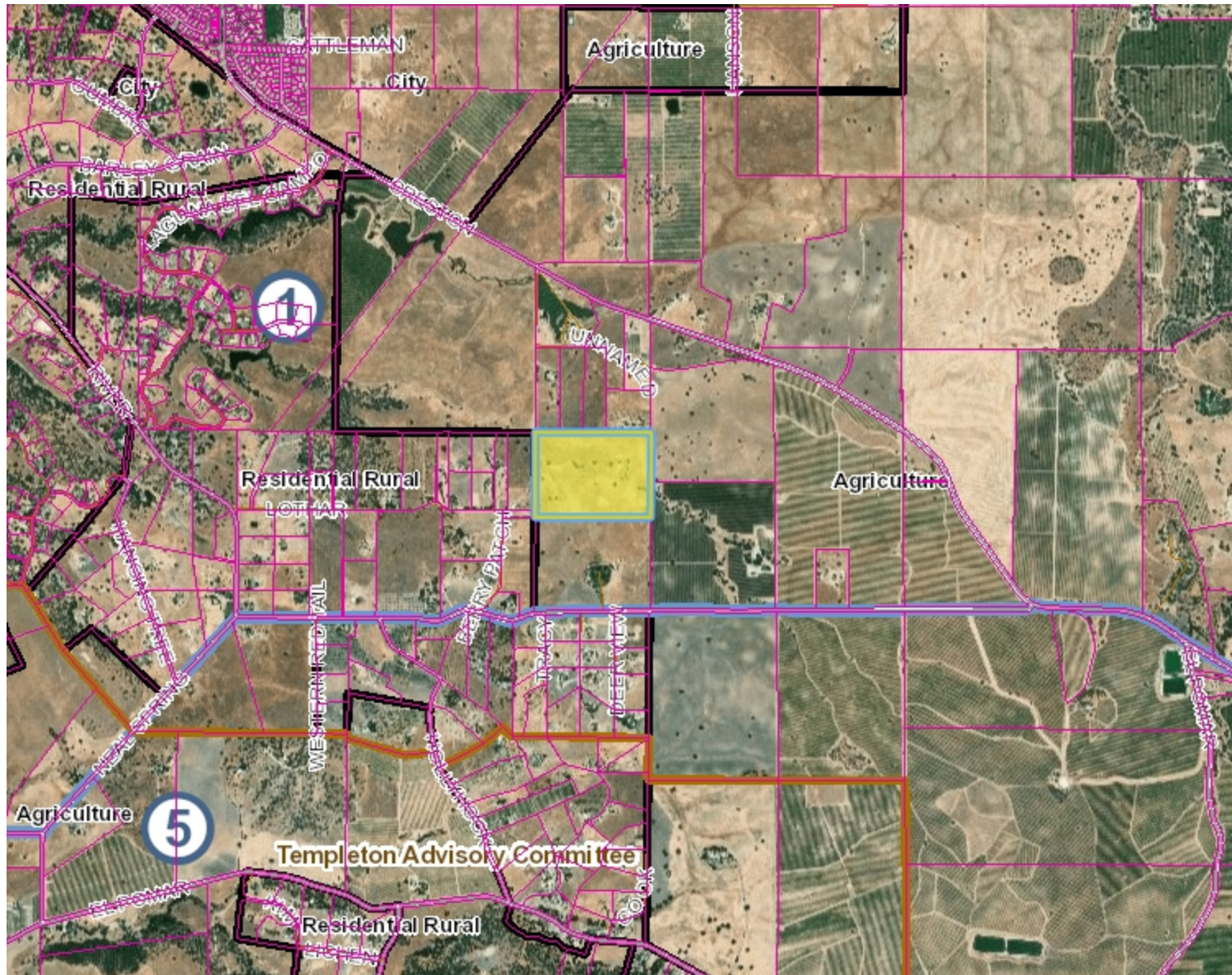
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Map for Reference Purposes Only



Referral -- Page 17 of 25

Interactive Data Viewer



Legend

- SLO County Parcels
- Roads**
 - CalTrans
 - Maintained by SLO CO
 - Private Maintenance
 - Federal or State Maintenance
- Community Advisory Groups**
 - Community Advisory Group Boundary
 - Cayucos Citizens Advisory Council Subarea
 - Creston Advisory Body Sub Areas
- Supervisor Districts
- Land Use Outlines

-6,018.65 0 3,009.33 6,018.65 Feet 1: 36,112

WGS_1984_Web_Mercator_Auxiliary_Sphere
 © County of San Luis Obispo Planning and Building Department

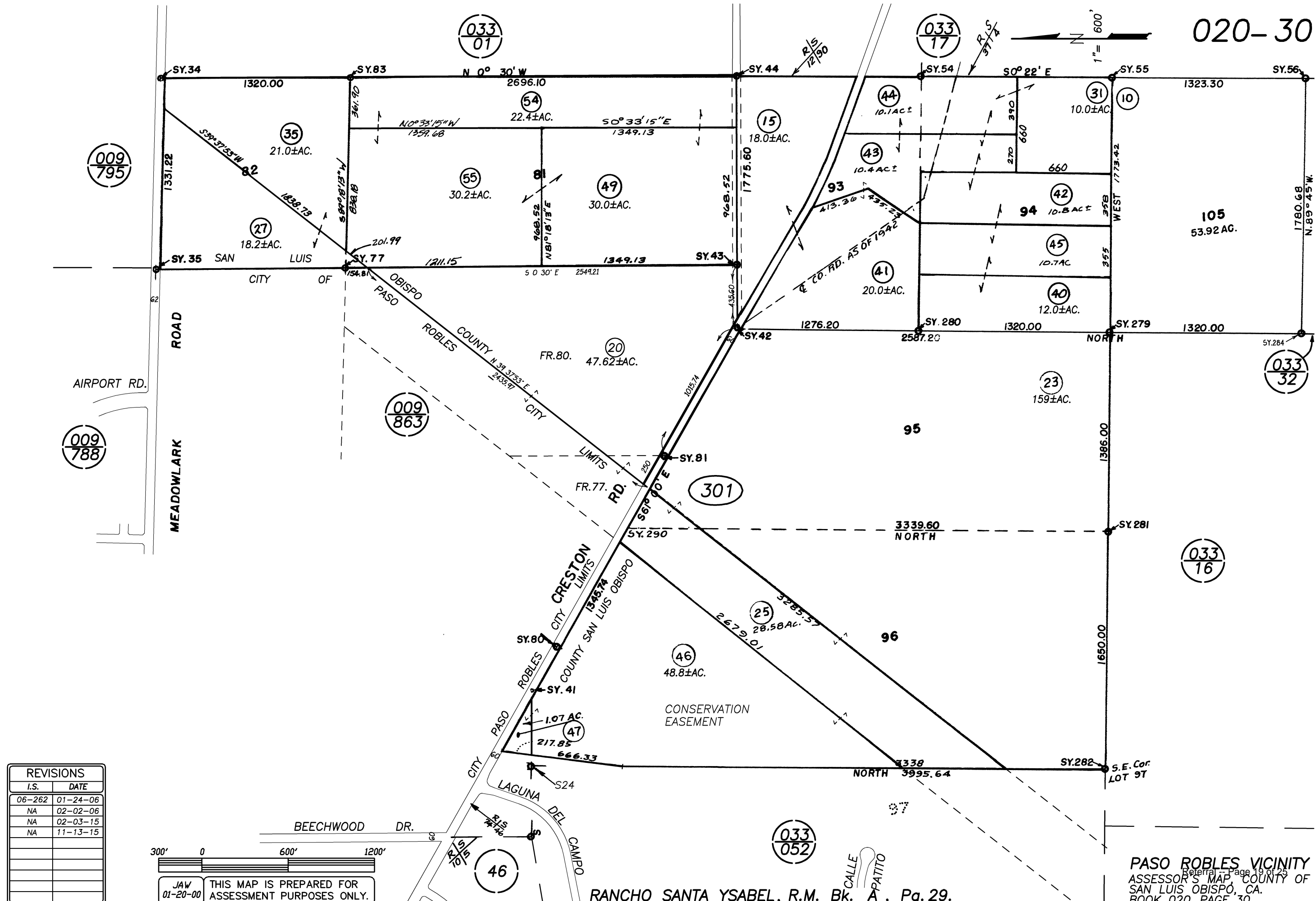


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Map for Reference Purposes Only



Referral -- Page 18 of 25



REVISIONS	
I.S.	DATE
06-262	01-24-06
NA	02-02-06
NA	02-03-15
NA	11-13-15

300' 0 600' 1200'

JAW
01-20-00

THIS MAP IS PREPARED FOR
ASSESSMENT PURPOSES ONLY.

Lockwood

[Soil Data Explorer](#) | [Series Extent Explorer](#) | [Description](#)

▼ **Soil Profiles**

▲ **Soil Taxonomy**

Order: [Mollisols](#)

Suborder: [Xerolls](#) [Map of Suborders](#)

Greatgroup: [Argixerolls](#)

Subgroup: [Pachic Argixerolls](#)

Family: [Fine-loamy, mixed, thermic Pachic Argixerolls](#)

Soil Series: [Lockwood](#)

▲ **Land Classification**

[CA Storie Index](#): [Grade 2 - Good \(66.8\)](#)

Land Capability Class (non-irrigated): 4-e4 ?

Land Capability Class (irrigated): 2-e4 ?

Ecological Site Description: n/a ?

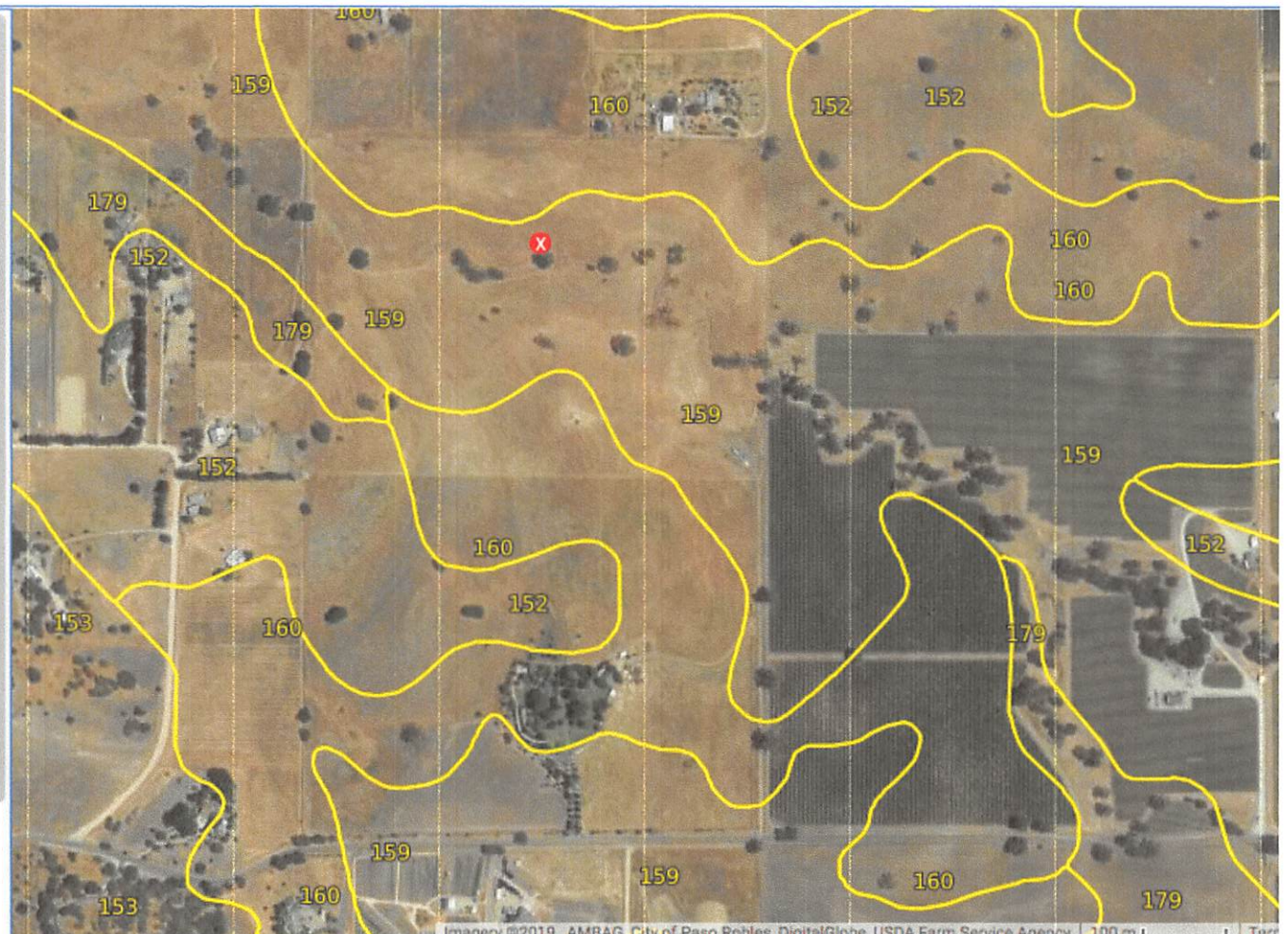
Forage Suitability Group: n/a ?

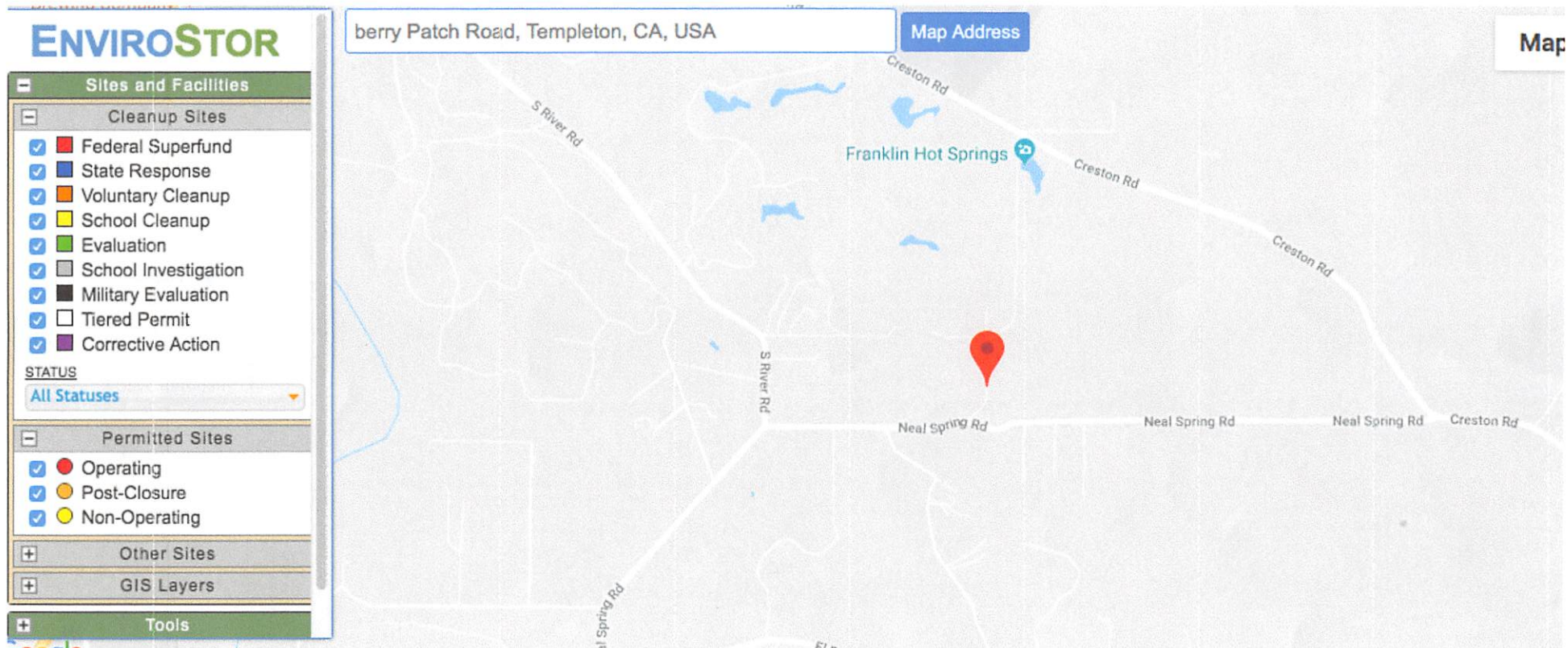
▼ **Hydraulic and Erosion Ratings**

▼ **Forest Productivity**

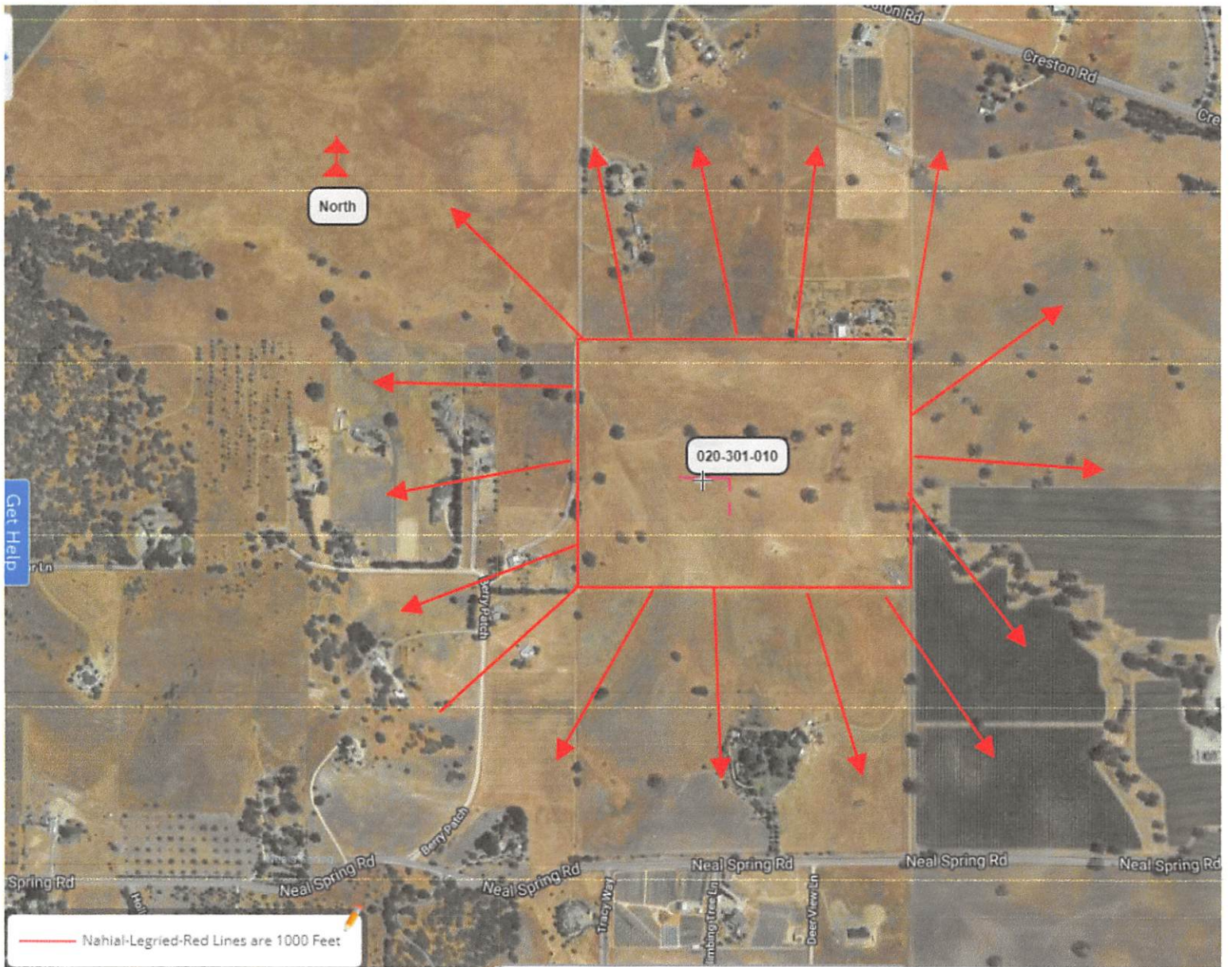
▲ **Soil Suitability Ratings**

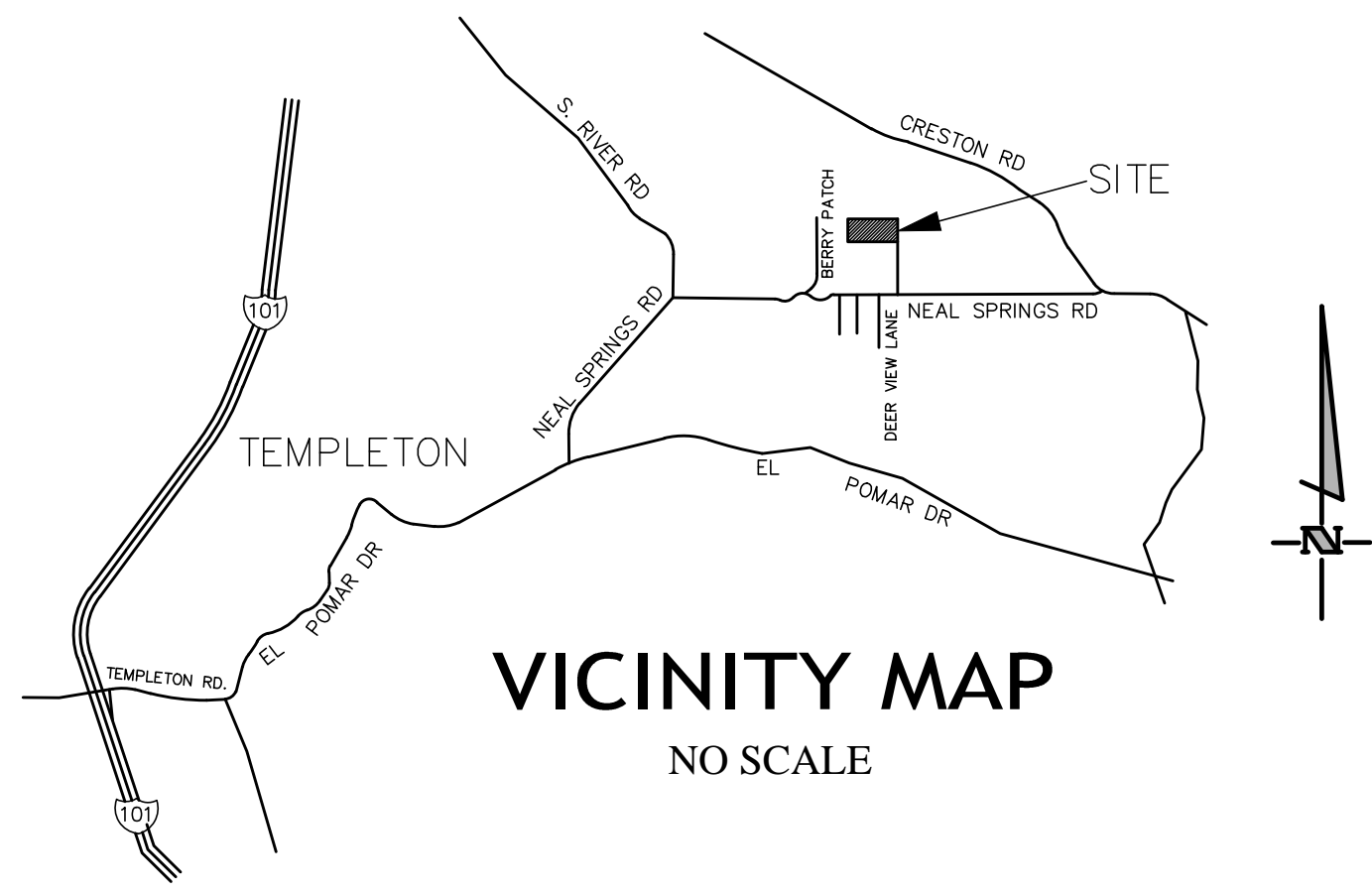
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SYMBOL LEGEND:

—□—	FENCE LINE
—S—	SEWER MAIN
—W—	WATER MAIN
—G—	GAS MAIN
—ETC—	ELEC/TELEPHONE/CABLE
—OH—	OVERHEAD UTILITIES
—	DROP INLET AT CURB
—	DROP INLET
—	STORM DRAIN MANHOLE
—	FIRE HYDRANT
—	WATER WELL
—	WATER VALVE
—	WATER METER
—	SEWER MANHOLE
—	SEWER CLEANOUT

—	RETAINING WALL/CMU WALL
—	PG&E BOX
—	GAS METER
—	TELEPHONE BOX
—	SIGNAL BOX
—	CABLE T.V. BOX
—	ELECTRIC BOX
—	TELEPHONE MANHOLE
—	STREET LIGHT
—	JOINT POLE
—	POWER POLE
—	GUY WIRE

ABBREVIATIONS:

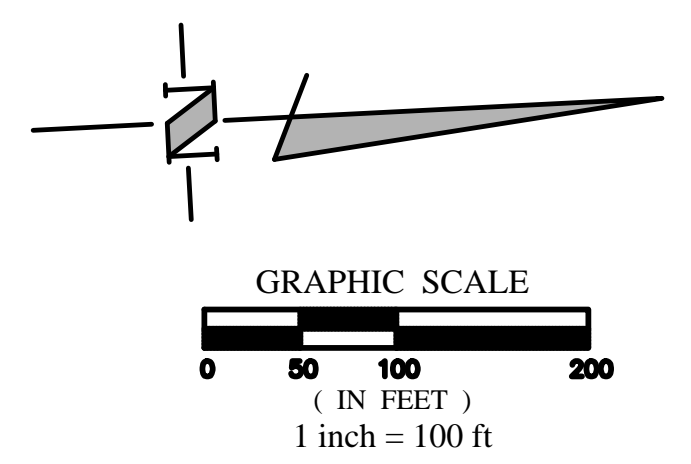
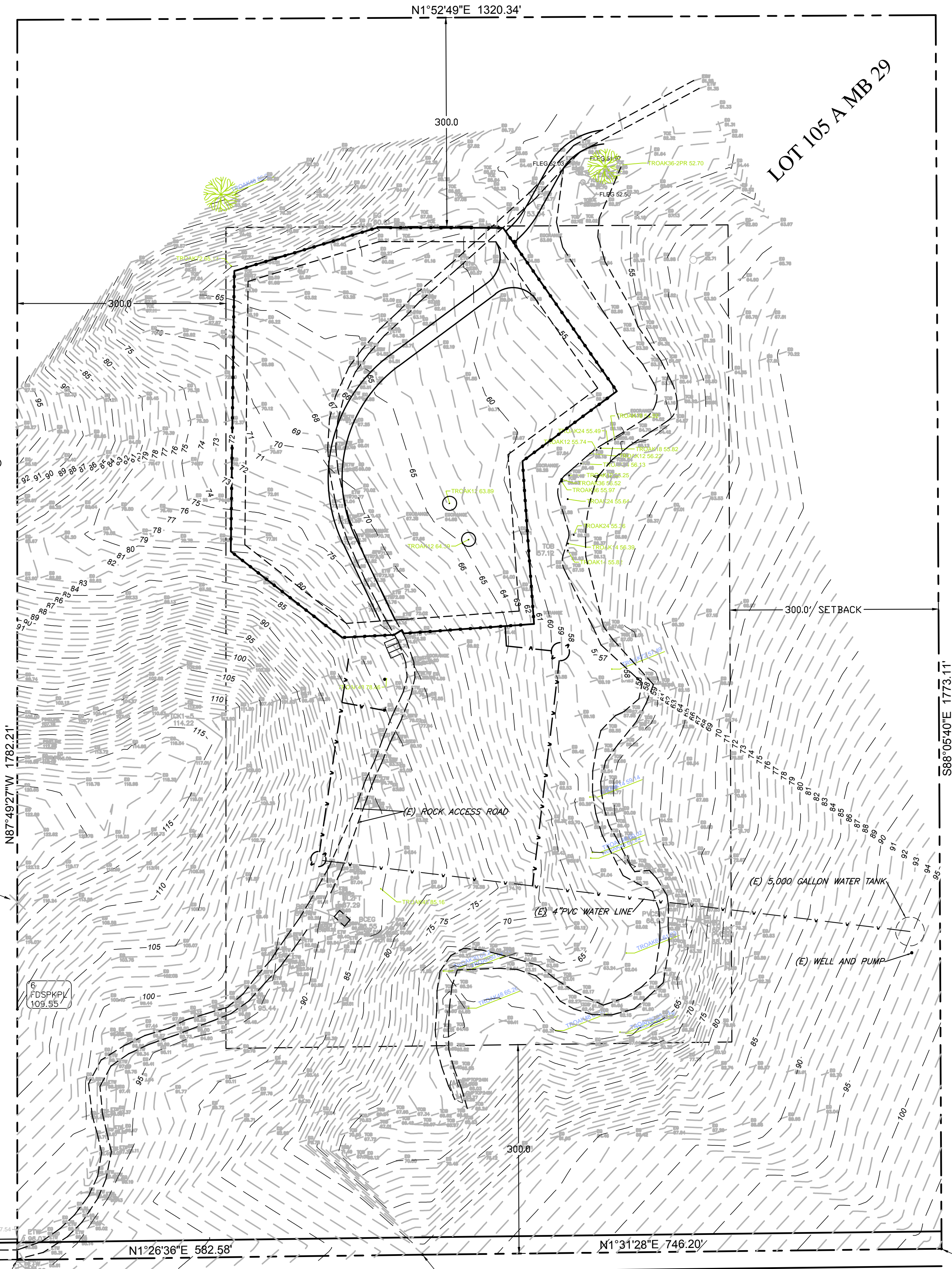
AC	ASPHALT CONCRETE	GRE	EDGE OF GRASS
BM	BENCH MARK	GRV	GRAVEL
BLDG	BUILDING	GM	GAS METER
BSW	BACK OF SIDEWALK	IP	IRON PIPE
CO	CLEAN OUT	GB	GRADE BREAK
DW	DRIVE WAY	LT	LIGHT
EG	EXISTING GRADE	MH	MAN HOLE
EP	EDGE OF PAVEMENT	PP	POWER POLE
ETW	EDGE OF TRAVELED WAY	SNF	SEARCH FOR, NOT FOUND
FD	FOUND	TC	TOP OF CURB
FE	FENCE EXISTING	TG	TOP OF GRATE
FL	FLOWLINE	TW	TOP OF WALL
FF	FINISHED FLOOR	WM	WATER METER
FSW	FRONT OF SIDEWALK	WV	WATER VALVE
GR	GRASS	(E)	EXISTING

OWNER:
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MAP DISCLAIMERS:

- ONLY THE SURFACE EVIDENCE OF UNDERGROUND UTILITIES HAVE BEEN MEASURED IN THE FIELD ON THIS SURVEY. IF APPROXIMATE UNDERGROUND ALIGNMENTS ARE SHOWN, I MAKE NO GUARANTEE AS TO THE ACTUAL LOCATION, TYPE, OR DEPTH OF THOSE UNDERGROUND UTILITIES. CALL UNDERGROUND SERVICE ALERT (USA) AT 1-800-642-2444 TO VERIFY THE ACTUAL LOCATION OF UTILITIES PRIOR TO ANY EXCAVATION. THE SURVEYOR ALSO HAS MADE NO INVESTIGATION AS TO SUBSURFACE ENVIRONMENTAL CONDITIONS THAT WOULD AFFECT THE USE OR DEVELOPMENT OF THIS PROPERTY.
- IT WILL BE THE ARCHITECT'S RESPONSIBILITY TO VERIFY SETBACK AND HEIGHT RESTRICTIONS WITH THE LOCAL GOVERNING AGENCY.
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- THE BOUNDARY LINES SHOWN HEREON ARE BASED ON A PARTIAL BOUNDARY SURVEY PERFORMED UNDER THE DIRECTION OF DENNIS SCHMIDT LS 8408. THESE LINES WERE COMPILED FROM RECORD INFORMATION AND FOUND MONUMENTS AS SHOWN. BOUNDARY LINES BASED ON RECORD INFORMATION SHOWN ARE APPROXIMATE AND WILL NEED TO BE FIELD VERIFIED PRIOR TO CONSTRUCTION OF ANY FOUNDATION BASED ON SPECIFIC AGENCY SETBACK REQUIREMENTS.
- TOPOGRAPHIC INFORMATION SHOWN HEREON IS BASED ON A FIELD SURVEY PERFORMED IN MARCH, 2019 AND DEPICT THE ON SITE CONDITIONS ON THAT DATE.



CIVIL DESIGN
SOLUTIONS
SITE PLAN
NEAL SPRINGS ROAD
TEMEPLETON, CA
MARCH 26, 2019

