



APPLICATIONS:

ENVIRONMENTAL ASSESSMENT FORM

THIS BOX FOR CITY PLANNING STAFF USE ONLY

Environmental Case Number: _____

Related Case Numbers: _____

Case Filed With (Print Name): _____ Date Filed: _____

EAF Accepted By (Print Name): _____ Date Accepted: _____

All terms in this document are applicable to the singular as well as the plural forms of such terms.

Project Address¹: _____

Assessor's Parcel Number: _____

Major Cross Streets: _____

Community Plan Area: _____ Council District: _____

APPLICANT (if not Property Owner)

PROPERTY OWNER

Name: _____

Name: _____

Company: _____

Company: _____

Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

City: _____ State: _____ Zip Code: _____

E-Mail: _____

E-Mail: _____

Telephone No.: _____

Telephone No.: _____

APPLICANT'S REPRESENTATIVE

ENVIRONMENTAL REVIEW CONSULTANT

Name: _____

Name: _____

Company: _____

Company: _____

Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

City: _____ State: _____ Zip Code: _____

E-Mail: _____

E-Mail: _____

Telephone No.: _____

Telephone No.: _____

¹ Project address must include all addresses on the subject site (as identified in ZIMAS; <http://zimas.lacity.org>)

OVERVIEW

CEQA, or the California Environmental Quality Act, is a statute that requires state and local agencies to identify the significant environmental impacts of their actions and to avoid or mitigate those impacts, if feasible. CEQA requires public agencies to conduct environmental review before making a determination on a project. The environmental review process examines the potential impacts your project will have on the property and its surroundings and makes recommendations (mitigation measures) on how to minimize or reduce those impacts that are found to be significant. The purpose of this application is to assist staff in determining the appropriate environmental clearance for your project. Please fill out this form completely. Missing, incomplete or inconsistent information will cause delays in the processing of your application.

1. PROJECT DESCRIPTION

A. Briefly describe the entire project and any related entitlements (e.g., Tentative Tract, Conditional Use, Zone Change, etc.). The description must include all phases and plans for future expansion.

Additional information or Expanded Initial Study attached: YES NO

B. Will the project require certification, authorization, clearance or issuance of a permit by any federal, state, county, or environmental control agency, such as Environmental Protection Agency, Air Quality Management District, Water Resources Board, Environmental Affairs, etc.? YES NO

If YES, please specify:

2. EXISTING CONDITIONS

A. Project Site.

Lot Area: _____ square feet

Net Acres: _____ Gross Acres: _____

B. Zoning/Land Use.

	Existing	Proposed
Zoning		
Use of Land		
General Plan Designation		

C. Structures.

1. Does the property contain any vacant structures? YES NO

If YES, describe and state how long it has been vacant: _____

2. Will any structures be removed/demolished as a result of the project? YES NO

If YES, provide the number: _____, type: _____
 _____, total square footage: _____
 and age: _____ of structures to be removed.

If residential dwellings (apartments, single-family, condominiums, etc.) are being removed indicate the number of units: _____

D. Trees.

Are there any trees on the property, and/or within the public right-of-way next to the property, that will be removed or impacted* as a result of the project? YES NO

If YES, complete the following: [tree types: pistachia chinensis, cupaniopsis anacardioides, syragrus romanzoffiana](#)

Tree Status	Quantity Existing	Tree Types	Quantity Removed	Quantity Relocated	Quantity Replaced	Quantity Impacted*
Non-Protected Trees (8" trunk diameter and greater)						
Protected Trees (4" trunk diameter and greater)		Oak Tree (excluding Scrub Oak)				
		Southern California Black Walnut				
		Western Sycamore				
		California Bay				
Protected Shrubs (4" trunk diameter and greater)		Toyon				
		Mexican Elderberry				

* Impacted means that grading or construction activity will be conducted within five (5) feet of, or underneath, the tree's canopy.

Additional information attached: YES NO [tree report attached](#)

*If a protected tree (as defined in Section 17.02 of the LAMC) will be removed, replaced, relocated, or impacted, a **Tree Report** is required.*

E. Slope. State the percent of property which is:

Less than 10% slope: _____ 10-15% slope: _____ over 15% slope: _____

*If slopes over 10% exist, a **Topographic Map** will be required.*

F. Grading. Specify the total amount of dirt being moved:

0-500 cubic yards More than 500 cubic yards

If more than 500 cubic yards (indicate amount): _____ cubic yards

G. Import/Export. Indicate the amount of dirt to be imported or exported:

Imported: _____ cubic yards Exported: _____ cubic yards

Location of disposal site: _____

Location of borrow site: _____

Is the Project Site located within a Bureau of Engineering (BOE) Special Grading Area? YES NO

*If YES, a **Haul Route** is required.*

H. Hazardous Materials and Substances. Is the project proposed on land that is or was developed with a dry cleaning, automobile repair, gasoline station, or industrial/manufacturing use, or other similar type of use that may have resulted in site contamination? YES NO

If YES, describe: _____

*If YES, a **Phase I Environmental Site Assessment (ESA)** is required. [attached](#)*

I. Historic, Cultural and/or Architecturally Significant Site or Structure. Does the project involve any structures, buildings, street lighting systems, spaces, sites or components thereof which are designated or may be eligible for designation in any of the following? If YES, please check and describe:

National Register of Historic Places: _____

California Register of Historic Resources: _____

City of Los Angeles Cultural Historic Monument: _____

Located within a City of Los Angeles Historic Preservation Overlay Zone (HPOZ): _____

Identified on SurveyLA: _____

Identified in HistoricPlacesLA: _____

Does the Project affect any structure 45 or more years old that does not have a local, state, or federal designation for cultural or historic preservation? YES NO

J. Miscellaneous. Does the property contain any easements, rights-of-way, Covenant & Agreements, contracts, underground storage tanks or pipelines which restrict full use of the property? YES NO

If YES, describe: _____
_____ and indicate the sheet number on your plans showing the condition: _____.

3. PROPOSED DEVELOPMENT

In the sections below, describe the entire project, not just the area in need of the entitlement request. If the project involves more than one phase or substantial expansion or changes of existing uses, please document each portion separately, with the total or project details written below. Attach additional sheets as necessary to fully describe the project.

A. ALL PROJECTS

i. Parking.

Vehicular Parking

Required: _____ + Guest: _____

Proposed: _____ + Guest: _____

Bicycle Parking:

Required Long-Term: _____ Required Short-Term: _____

Proposed Long-Term: _____ Proposed Short-Term: _____

ii. Height.

Number of stories (not including mezzanine levels): _____ Maximum height: _____

Are Mezzanine levels proposed? YES NO

If YES, indicate on which floor: _____

If YES, indicate the total square feet of each mezzanine: _____

*New construction resulting in a height in excess of 60 feet may require a **Shade/Shadow Analysis**. This does not apply to projects that are located within a Transit Priority Area (TPA) as defined by ZI-2452 (check the Planning and Zoning tab in ZIMAS for this information <http://ZIMAS.lacity.org>).*

iii. Project Size.

What is the total floor area of the project? _____ gross square feet

iv. Lot Coverage. Indicate the percent of the total project that is proposed for:

Building footprint: _____ %

Paving/hardscape: _____ %

Landscaping: _____ %

v. **Lighting.** Describe night lighting of project: _____
_____.

B. RESIDENTIAL PROJECT

If no portion of the project is residential, check -N/A and continue to next section

i. Number of Dwelling Units.

Single Family: _____, Apartment: _____, Condominium: _____

ii. Recreational Facilities. List recreational facilities for project: _____

iii. Open Space.

Does the project involve new construction resulting in additional floor area and units? YES NO

Does the project involve six or more residential units? YES NO

If YES to both, complete the following

Pursuant to LAMC 12.21.G	Required	Proposed
Common Open Space (Square Feet)		
Private Open Space (Square Feet)		
Landscaped Open Space Area (Square Feet)		
Number of trees (24-inch box or greater)		

iv. Utilities. Describe the types of appliances and heating (gas, electric, gas/electric, solar): _____

v. Accessory Uses. Describe new accessory structures (detached garage, guest house, swimming pool, fence, stable, etc.) and/or additions: _____

C. COMMERCIAL, INDUSTRIAL OR OTHER PROJECT

If the project is residential only, check -N/A and continue to next section

i. Type of Use. _____

ii. Project Size. Does the project only involve the remodel or change of use of an existing interior space or leasehold? YES NO

If YES, indicate the total size of the interior space or leasehold: _____ square feet

- iii. **Hotel/Motel.** Identify the number of guest rooms: _____ guest rooms

- iv. **Days of operation.** _____
Hours of operation. _____

- v. **Special Events.** Will there be special events not normally associated with a day-to-day operation (e.g., fundraisers, pay-for-view events, parent-teacher nights, athletic events, graduations)? YES NO
 If YES, describe events and how often they are proposed _____

- vi. **Occupancy Limit.** Total Fire Department occupancy limit: _____
 - a. Number of fixed seats or beds _____
 - b. Total number of patrons/students _____
 - c. Number of employees per shift _____, number of shifts _____
 - d. Size of largest assembly area _____ square feet

- v. **Security.** Describe security provisions for the project _____

4. SELECTED INFORMATION

- A. **Circulation.** Identify by name all arterial road types (i.e., Boulevard I, II, Avenue I, II, III) and freeways within 1,000 feet of the proposed Project; give the approximate distances (check <http://navigatela.lacity.org> for this information). _____

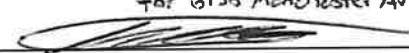
- B. **Green building certification.** Will the project be LEED-certified or equivalent? YES NO
 If YES, check appropriate box:
 Certified Equivalent Silver Gold Platinum Other _____

- C. **Fire sprinklers.** Will the Project include fire sprinklers? YES NO

APPLICANT/CONSULTANT'S AFFIDAVIT

OWNER MUST SIGN AND BE NOTARIZED,

IF THERE IS AN AGENT, THE AGENT MUST ALSO SIGN AND BE NOTARIZED

PROPERTY OWNER	CONSULTANT/AGENT
I, (print name) <u>Stephen Roberts</u> <i>for 6136 Manchester Avenue Apartments LLC</i>	I, (print name) _____
Signature <u></u>	Signature _____

being duly sworn, state that the statements and information, including plans and other attachments, contained in this Environmental Assessment Form are in all respects true and correct to the best of my knowledge and belief. I hereby certify that I have fully informed the City of the nature of the Project for purposes of the California Environmental Quality Act (CEQA) and have not submitted this application with the intention of segmenting a larger Project in violation of CEQA. I understand that should the City determine that the Project is part of a larger Project for purposes of CEQA; the City may revoke any approvals and/or stay any subsequent entitlements or permits (including certificates of occupancy) until a full and complete CEQA analysis is reviewed and appropriate CEQA clearance is adopted or certified.

Space Below for Notary's Use

California All-Purpose Acknowledgement

Civil Code Section 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document, to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of _____

On _____ before me, _____
(Insert Name of Notary Public and Title)

personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf on which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature (Seal)

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Los Angeles)

On August 12, 2022 before me, Miranda DellaMara Notary Public
(insert name and title of the officer)

personally appeared Stephen Roberts
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) ~~(is)~~ ~~(are)~~ subscribed to the within instrument and acknowledged to me that ~~he~~ ~~she~~ ~~they~~ executed the same in ~~his~~ ~~her~~ ~~their~~ authorized capacity~~(ies)~~, and that by ~~his~~ ~~her~~ ~~their~~ signature~~(s)~~ on the instrument the person~~(s)~~, or the entity upon behalf of which the person~~(s)~~ acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature  (Seal)

