

MASTER LAND USE PERMIT APPLICATION
LOS ANGELES CITY PLANNING DEPARTMENT

Planning Staff Use Only

ENV No. <u>2008-2607-EAF</u>	Existing Zone <u>RE11-1</u>	District Map <u>154.5A201</u>
APC <u>CENTRAL</u>	Community Plan <u>HOLLYWOOD</u>	Council District <u>4</u>
Census Tract <u>1891.00</u>	APN <u>5588 033 002</u>	Staff Approval * Date

* Approval for Filing by Community Planning or Division of Land Staff, When Applicable

CASE NO. ZA 2008-2606-ZAD

APPLICATION TYPE ZAD
(zone change, variance, conditional use, tract/parcel map, specific plan exception, etc.)

1. PROJECT LOCATION AND SIZE

Street Address of Project 4407 DUNDEE DR Zip Code 90027
 Legal Description: Lot 2 Block 1 Tract ~~4073~~ 7535
 Lot Dimensions _____ Lot Area (sq. ft.) 7527 SQ.FT. Total Project Size (sq. ft.) 910.65/100 SQ.F

2. PROJECT DESCRIPTION

Describe what is to be done: ADDITION OF 910 SQ.FT TO (EX) HOUSE CONSISTING OF A (N) KIT. + (N) GIRL BR. + ENLARGEMENT OF A BONUS RM + AN ENTRY PORCH

Present Use: RESIDENTIAL Proposed Use: RESIDENTIAL
 Plan Check No. (if available) B08VNO4873 Date Filed: 6-25-2008

- Check all that apply:
- | | | | |
|--|--|---|-------------------------------------|
| <input checked="" type="checkbox"/> New Construction | <input type="checkbox"/> Change of Use | <input type="checkbox"/> Alterations | <input type="checkbox"/> Demolition |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Industrial | <input checked="" type="checkbox"/> Residential | |
- Additions to the building:
- | | | | |
|--|--------------------------------|---------------------------------|------------------------------------|
| <input checked="" type="checkbox"/> Rear | <input type="checkbox"/> Front | <input type="checkbox"/> Height | <input type="checkbox"/> Side Yard |
|--|--------------------------------|---------------------------------|------------------------------------|

3. ACTION(S) REQUESTED

Describe the requested entitlement which either authorizes actions OR grants a variance:

Code Section from which relief is requested: 12.21A.17(e) Code Section which authorizes relief: 12.24x21

ADDITION OF 910 SQ.FT WITHOUT WIDENING THE EX. ROAD

Code Section from which relief is requested: _____ Code Section which authorizes relief: _____

Code Section from which relief is requested: _____ Code Section which authorizes relief: _____

Code Section from which relief is requested: _____ Code Section which authorizes relief: _____

List related or pending case numbers relating to this site:

SIGNATURES of adjoining or neighboring property owners in support of the request; not required but helpful, especially for projects in single-family residential areas. (Attach sheet, if necessary)

NAME (Print)	SIGNATURE	ADDRESS	KEY # ON MAP
SHEAR BARR	<i>[Signature]</i>	2515 N. Commonwealth Ave	
HENRY CYMERMAN	<i>[Signature]</i>	2528 N. Commonwealth Ave	
PETER KIM	<i>[Signature]</i>	4411 DUNDEE DR	
Angele Barsesyan	<i>[Signature]</i>	4462 Dundee Dr.	

4. OWNER/APPLICANT INFORMATION

Applicant's Name MS. CATUARIE BERBERIAN / EDWARD Company - OWNER
 Address: 4407 DUNDEE DR. 90027 Telephone: (213) 300 4316 Fax: () -
 Zip: 90027 E-mail: KBERBERIAN@LACUSC.ORG

Property Owner's Name (if different than applicant) Edward Berberian SAME Katherine Berberian
 Address: 4407 DUNDEE DR Telephone: (213) 300-4316 Fax: () -
 Zip: _____ E-mail: KBERBERIAN@LACUSC.ORG

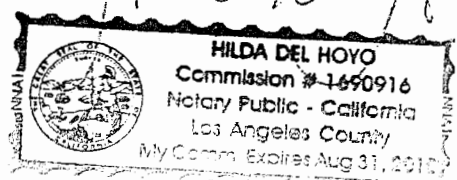
Contact Person for project information Katherine Berberian
 Address: see above Telephone: () - Fax: () -
 Zip: _____ E-mail: _____

5. APPLICANT'S AFFIDAVIT

- Under penalty of perjury the following declarations are made:
- a. The undersigned is the owner or lessee if entire site is leased, or authorized agent of the owner with power of attorney or officers of a corporation (submit proof). (NOTE: for zone changes lessee may not sign).
 - b. The information presented is true and correct to the best of my knowledge.

Signature: *[Signature]*
 Print: EDWARD BERBERIAN
 Date: 6/25/08

Subscribed and sworn before me this (date): June 25, 2008
 In the County of Los Angeles, State of California
 Notary Public *[Signature]*
 Stamp:



7. ADDITIONAL INFORMATION/FINDINGS

In order for the City to render a determination on your application, additional information may be required. Consult the appropriate "Special Instructions" handout. Provide on attached sheet(s) this additional information using the hand-out as a guide.

NOTE: All applicants are eligible to request a pre-final plan check. Fees for this service are \$100.00 per project. For more information, please contact the Planning Department at (213) 368-3300.

[Handwritten signature/initials across the top of the page]

4. OWNER/APPLICANT INFORMATION

Applicant's Name MS. CATHARIE BERBERIAN Company - OWNER
 Address: 4407 DUNDEE DR. 90027 Telephone: (213) 300 4316 Fax () -
 Zip: 90027 E-mail: KBERBERIAN@LACUSC.ORG

Property Owner's Name (if different than applicant) Ed & K Berberian SAME
 Address: 4407 DUNDEE DR Telephone: (213) 300-9316 Fax () -
 Zip: _____ E-mail: KBERBERIAN@LACUSC.ORG

Contact Person for project information Katherine Berberian
 Address: see above Telephone: () _____ Fax: () _____
 Zip: _____ E-mail: _____

5. APPLICANT'S AFFIDAVIT

Under penalty of perjury the following declarations are made:

- a. The undersigned is the owner or lessee if entire site is leased, or authorized agent of the owner with power of attorney or officers of a corporation (submit proof). (NOTE: for zone changes lessee may not sign).
- b. The information presented is true and correct to the best of my knowledge.

Signature: Katherine Berberian

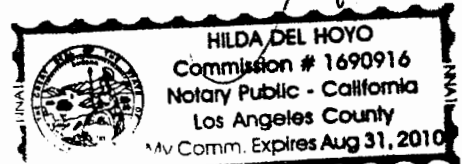
Subscribed and sworn before me this (date): June 25, 2008

Print: KATHERINE K. BERBERIAN In the County of Los Angeles State of California

Notary Public [Signature]

Date: 6-25-2008

Stamp:



7. ADDITIONAL INFORMATION/FINDINGS

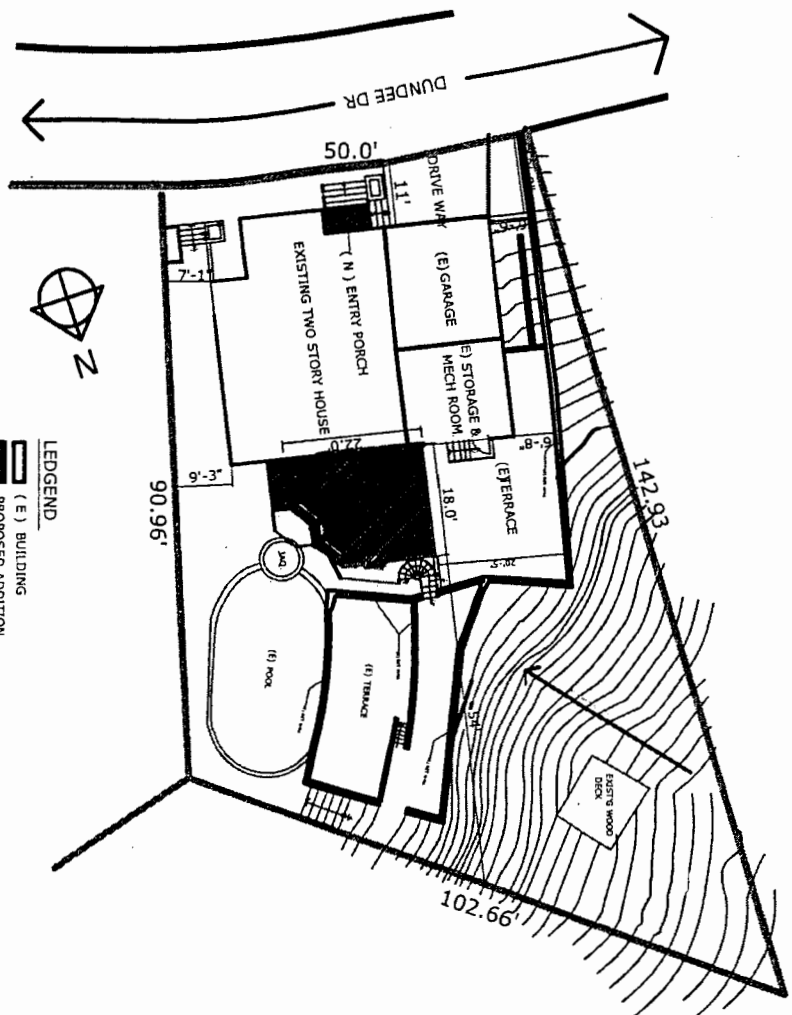
In order for the City to render a determination on your application, additional information may be required. Consult the appropriate "Special Instructions" handout. Provide on attached sheet(s) this additional information using the hand-out as a guide.

NOTE: All applicants are eligible to request a one time, one-year only freeze on fees charged by various City departments in connection with your project. It is advisable only when this application is deemed complete or upon payment of Building and Safety plan check fees. Please ask staff for details or an application.

Planning Staff Use Only

Base Fee	Reviewed and Accepted by	Date
Receipt No.	Deemed Complete by	Date

4407 DUNDEE DR.

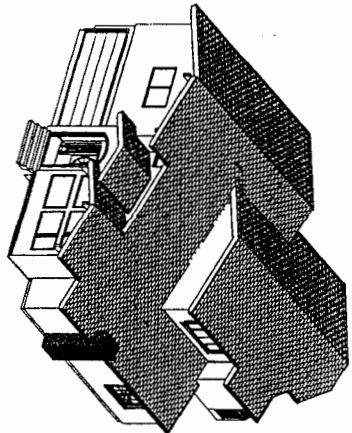


LEGEND
 (E) BUILDING
 PROPOSED ADDITION

SITE PLAN
 1/8" = 1'-0"

Scope Of Work:
 ADDITION OF A NEW BR. ON SEC FL,
 CONVERSION OF A BONUS RM TO A BR.
 ADDITION OF A NEW KIT. ON FIRST FL.
 & AN ENTRY PORCH
 TOT ADDITION = 910.65 SQ FT

TYPE OF CONSTRUCTION : VN - R3



PERSPECTIVE

A1	SITE PLAN	RESIDENTIAL ADDITION FOR : MR. & MRS. BERBERIAN ADDRESS: 4407 W DUNDEE DR, LA 90037 TEL: _____	DESIGNER: GERAR GHARAKHANIAN & ASSOC. 408 W. BROADWAY AVE. GLENDALE CA. 91204 TEL: 918-6236855 918-2478640
	TITLE: _____ DATE: _____ DRAWN BY: _____ CHECKED BY: _____ APPROVED BY: _____ NO. 1: _____		

4407 DUNDE DR.



DESIGNER:
CERAR CHARAKHIAN & ASSOC.
409 W. BROADWAY AVE., ENGLE CL 91204
TEL: 918-5238855 FAX: 918-2478640

RESIDENTIAL ADDITION FOR:
MR & MRS BERBERIAN
ADDRESS: 4407 DUNDE DR.
LA 90077 TEL: 818-5238855

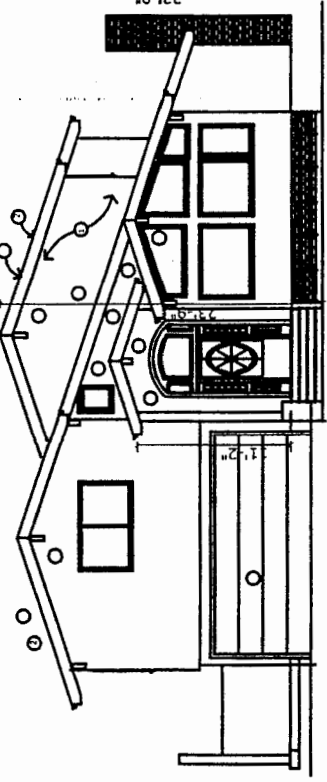
ELEVATIONS

1:8
1:4
1:2
1:1
1/2:1
1/4:1
SCALE: 1/4"=1'-0"



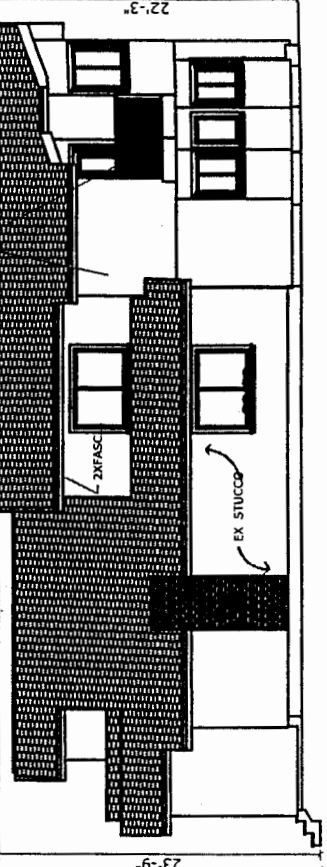
ELEVATION KEYED NOTES

1. 3/8" STUCCO OVER BLDG. PAPER & METAL LATH (TO MATCH EXISTING)
2. OVER TWO LAYERS OF CLASS "D" BLDG. PAPER
3. 2X FASCIA
4. 26 GA. G.I. GUTTER & DOWNSPOT
5. 14X6 GALV. MET. UNDER FL. VENTS
6. 24"X24" CRAWL SPACE
7. 26 GA. G.I. WEEP SCREEN
8. 2X4 TRIM
9. METAL GUARD RAIL W/ 4" MAX SPACING
10. ATTIC VENT @ 150 FT. = 150 SQ. FT. OF FLOOR AREA
11. 16" WIDE VINYL GARAGE DOOR
12. VINYL WINDOW (MIL GUARD)
13. WOOD CORBEL
14. EX STUCCO



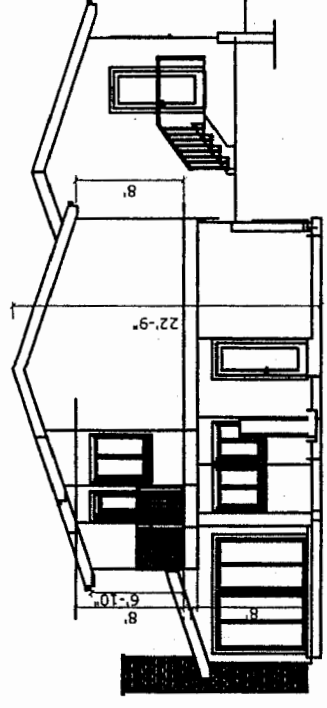
FRONT ELEVATION

1/4"=1'-0"



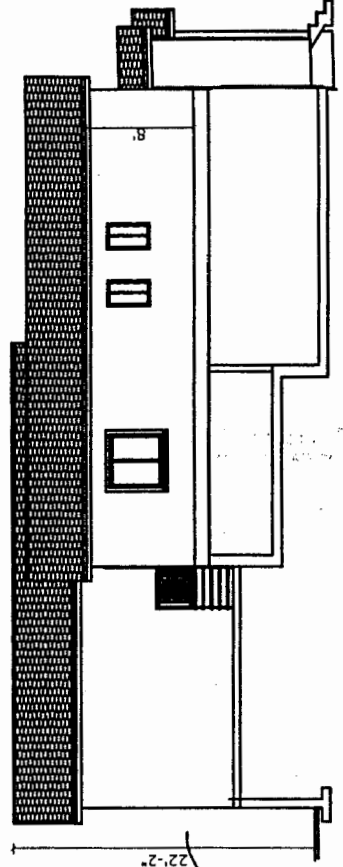
LEFT SIDE ELEV

1/4"=1'-0"



REAR ELEVATION

1/4"=1'-0"



RIGHT SIDE ELEV

1/4"=1'-0"



CITY OF LOS ANGELES
DEPARTMENT OF CITY PLANNING

ENVIRONMENTAL ASSESSMENT FORM

EAF Case No.: _____ ZA Case No.: _____ CPC Case No.: _____
Council District No.: _____ Community Plan Area: _____
PROJECT ADDRESS: 4407 DUNDEE DR. LA. CA. 90027

Major Cross Streets: COMMONWEALTH & LOS FELIS
Name of Applicant: MS. CATHARINE BERBERIAN
Address: 4407 DUNDEE DR. LA. CA. 90027
Telephone No.: (323) 663-5409 Fax No.: _____ E-mail: K.BERBERIAN@LAUSEL.COM

OWNER	APPLICANT'S REPRESENTATIVE (Other than Owner)
Name: <u>Katherine Berberian</u>	Name: <u>Katherine Berberian</u> (Contact Person)
Address: <u>4407 DUNDEE DR</u>	Address: <u>4407 DUNDEE DR</u>
Telephone No: <u>(213) 300-4316</u>	Telephone No: <u>(213) 300-4316</u>
Signature: <u>[Signature]</u>	Signature: <u>[Signature]</u> (Applicant's Representative)

The following Exhibits are required (3 copies of each exhibit and 3 Environmental Assessment Forms for projects in Coastal & S.M. Mtn. Zones): All Exhibits should reflect the entire project, not just the area in need of zone change, variance, or other entitlement.

NOTE: The exhibits are IN ADDITION TO those required for any case for which the Environmental Assessment Form is being filed.

- A. **2 Vicinity Maps:** (8½" x 11") showing nearby street system, public facilities and other significant physical features (similar to road maps, Thomas Brothers Maps, etc.) with project area highlighted.
- B. **2 Radius/Land Use Maps:** (1" = 100') showing land use and zoning to 500 feet (100 feet of additional land use beyond the radius for alcoholic beverage cases); 100' radius line (excluding streets) okay for Coastal building permits 300' for site plan review applications.
- C. **2 Plot Plans:** showing the location and layout of proposed development including dimensions; include topographic lines where grade is over 10%; tentative tract or parcel maps where division of land is involved to satisfy this requirement, and the location and diameter of all trees existing on the project site.
- D. **Application:** a duplicate copy of application for zone change, (including Exhibit "C" justification) batch screening form, periodic comprehensive general plan review and zone change map, variance, conditional use, subdivider's statement, etc.
- E. **Pictures:** two or more pictures of the project site showing walls, trees and existing structures.
- F. **Notice of Intent Fee:** a UNDATED check in the amount of \$50 made out to the **County of Los Angeles** for the purpose of filing a Notice of Intent to Adopt a Negative Declaration as required by § 15072 of the State CEQA Guidelines.
- G. **Hillside Grading Areas/Haul Route Approval:** Projects within a Hillside Grading Area involving import/export of 1,000 cubic yards or more shall submit a soils and/or geotechnical report reviewed & approved by LADBS (reports needed to be determined by LADBS) to include measures to mitigate impacts related to grading and obtain a Haul Route Approval from the Board of Building & Safety Commissioners (refer to <http://www.lacity.org/LADBS/forms/forms.htm>).

ENVIRONMENTAL ASSESSMENT

RECEIVED BY _____

DATE _____

APPLICANT/CONSULTANT'S AFFIDAVIT

OWNER MUST SIGN AND BE NOTARIZED;

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

I, KATHERINE K. BERBIERIAN
Owner (Owner in escrow)*
(Please Print)

I, _____
Consultant*
(Please Print)

Signed: [Signature]
Owner

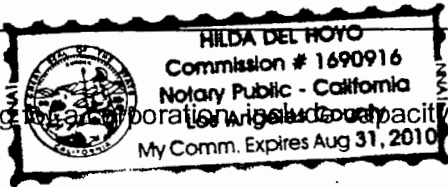
Signed: _____
Agent

being duly sworn, state that the statements and information contained in this Environmental Assessment Form are in all respects true and correct to the best of my knowledge and belief.

State of California, County and City of Los Angeles

Signed: [Signature]
Notary
Subscribed and sworn to before me this
25 day of June, 20 08
(NOTARY or CORPORATE SEAL)

Signed: _____
Notary
Subscribed and sworn to before me this
_____ day of _____, 20 ____
(NOTARY)



* If acting for a corporation, include capacity and company name.

STEWART BUCHHEIM

Owner (Owner in escrow)*
(Please Print)

Consultant*
(Please Print)

Signed:

Edward Buchheim
Owner

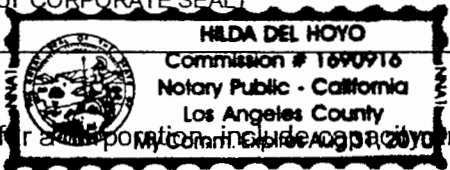
Signed: _____

Agent

being duly sworn, state that the statements and information contained in this Environmental Assessment Form are in all respects true and correct to the best of my knowledge and belief.

State of California, County and City of Los Angeles

<p>Signed: <u>Hilda Del Hoyo</u> Notary</p> <p>Subscribed and sworn to before me this <u>25</u> day of <u>June</u>, 20 <u>08</u> (NOTARY OF CORPORATE SEAL)</p>	<p>Signed: _____ Notary</p> <p>Subscribed and sworn to before me this _____ day of _____, 20 ____ (NOTARY)</p>
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* If acting for a corporation, include title and company name.

I. Project Description:

Briefly describe the project and permits necessary (i.e., Tentative Tract, Conditional Use, Zone Change, etc.) including an identification of phases and plans for future expansion:

BLDG. PERMIT NECESSARY TO ADD A (N) KIT ON 1ST FL IN THE REAR + A GIRL BR. ON TOP OF KIT. CONVERTING AN EXISTG. BONUS RM TO A BR. FOR 2ND GIRL + AN ENTRY PORCH

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.? If so, please specify:

NONE

II. Existing Conditions:

A. Project Site Area HILL SIDE ON A SUB-STANDARD 18' W ROADWAY
 Net and _____ Gross Acres 7527 SQ-FT.

B. Existing Zoning RE11-1

C. Existing Use of Land RESIDENTIAL

Existing General Plan Designation SINGLE FAMILY DWELLING

D. Requested General Plan Designation " " "

E. Number NONE type — and age ± — of structures to be removed as a result of the project. If residential dwellings (apts., single-family, condos) are being removed indicate the number of units: — and average rent: —

Is there any similar housing at this price range available in the area? If yes, where? N/A

F. Number NONE Trunk Diameter — and type — of existing trees.

G. Number — Trunk Diameter — and type — of trees being removed (identify on plot plan.)

H. Slope: State percent of property which is: 30% Less than 10% slope 40% 10-15% slope 30% over 15% slope
If slopes over 10% exist, a topographic map will be required. Over 50 acres, 1" = 200' scale is okay.

I. Check the applicable boxes and indicate the condition on the Plot Plan. There are natural or man-made drainage channels, rights of way and/or hazardous pipelines crossing or immediately adjacent to the property, or none of the above.

J. Grading: (specify the total amount of dirt being moved)
MAX 30 CU-YD 0-500 cubic yards.
— if over 500 cubic yards. indicate amount of cubic yards.

K. Import/Export: Indicate the amount of dirt being imported or exported 30 CU-YD.

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. Describe entire project, not just area in need of zone change, variance, or other entitlement.

III. Residential project (if not residential, do not answer)

- A. Number of Dwelling Units-
Single Family ONE Apartment — or Condominium —
- B. Number of Dwelling Units with:
One bedroom — Two bedrooms —
Three bedrooms — Four or more bedrooms 4-BR WITH EXISTG
- C. Total number of parking spaces provided 3
- D. List recreational facilities of project EX. POOL & SPA.
- E. Approximate price range of units \$ — to \$ —
- F. Number of stories TWO, height 23-9" feet.
- G. Type of appliances and heating (gas, electric, gas/electric, solar) GAS, ELEC. & SOLAR
Gas heated swimming pool? SOLAR
- H. Describe night lighting of the project ELECT.
(include plan for shielding light from adjacent uses, if available)
- I. Percent of total project proposed for:
Building 31%
Paving —
Landscaping —
- J. Total Number of square feet of floor area —

IV. Commercial, Industrial or Other Project (if project is only residential do not answer this section). Describe entire project, not just area in need of zone change, variance, or other entitlement.

- A. Type of use —
- B. Total number of square feet of floor area —
- C. Number of units if hotel/motel —
- D. Number of stories — height — feet.
- E. Total number of parking spaces provided: —
- F. Hours of operation — Days of operation —
- G. If fixed seats or beds involved, number —
- H. Describe night lighting of the project —
(Include plan for shielding light from adjacent uses, if available)
- I. Number of employees per shift —
- J. Number of students/patients/patrons —
- K. Describe security provisions for project —
- L. Percent of total project proposed for:
Building —
Paving —
Landscaping —

Historic/Architecturally Significant Project

Does the project involve any structures, buildings, street lighting systems, spaces, sites or components thereof which may be designated or eligible for designation in any of the following: (please check)

- National Register of Historic Places — NONE
- California Register of Historic Resources —
- City of Los Angeles Cultural Historic Monument —
- Within a City of Los Angeles Historic Preservation Overlay Zone (HPOZ) —

V. Hazardous Materials and Substance Discharge

Does the project involve the use of any hazardous materials or have hazardous substance discharge? If so, please specify. NONE

- A. Regulatory Identification Number (if known) _____
- B. Licensing Agency _____
- C. Quantity of daily discharge _____

VI. Stationary Noise Clearance: A clearance may be necessary certifying the project's equipment (e.g., air conditioning) complies with City Noise Regulations.

Some projects may require a Noise Study. The EIR staff will inform those affected by this requirement.

VII. Selected Information:

- A. Circulation: Identify by name all major and secondary highways and freeways within 1,000 feet of the proposed project; give the approximate distance(s):
NONE
- B. Air: All projects that are required to obtain AQMD permits (see AQMD Rules and Regulations) are required to submit written clearance from the AQMD indicating no significant impact will be created by the proposed project.*

VIII. Mitigating Measures:

Feasible alternatives or mitigation measures which would substantially lessen any significant adverse impact which the development may have on the environment. THE PROJECT WILL NOT HAVE ANY ADVERSE IMPACT ON ANY ENVIRONMENTAL ISSUES.

* Contact the South Coast Air Quality Management District at (909) 396-2000 for further information.