

CITY OF CONCORD
PLANNING DIVISION
 PHONE: (925) 671-3152
 FAX: (925) 671-3381



Community & Economic
 Development Department
 1950 Parkside Drive, M/S 53
 Concord, CA 94519-2578
 www.cityofconcord.org

APPLICATION FORM



- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> Preliminary Application | <input checked="" type="checkbox"/> Development Code Amendment | <input type="checkbox"/> Minor Exception | <input type="checkbox"/> Use Permit |
| <input type="checkbox"/> Accessory Dwelling Unit | <input type="checkbox"/> Finding of Public Convenience | <input type="checkbox"/> Minor Subdivision | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Administrative Permit | <input checked="" type="checkbox"/> General Plan Amendment | <input type="checkbox"/> Minor Use Permit | <input type="checkbox"/> Vacation/Abandonment of Property Rights |
| <input type="checkbox"/> Animal Permit | <input type="checkbox"/> Heritage Tree Nomination | <input type="checkbox"/> Planned Development Use Permit | <input type="checkbox"/> Vendor Permit |
| <input type="checkbox"/> Building Move | <input type="checkbox"/> Hillside Development Use Permit | <input type="checkbox"/> Protected Tree Removal | <input type="checkbox"/> Wireless Communications Facility |
| <input type="checkbox"/> Certificate of Appropriateness | <input type="checkbox"/> Landscape Project Application | <input type="checkbox"/> Pumpkin & Christmas Tree Sales | <input type="checkbox"/> Pole License |
| <input type="checkbox"/> Condominium Conversion Use Permit | <input type="checkbox"/> Major Subdivision/Vesting Tentative Map | <input type="checkbox"/> Reasonable Accommodation | <input type="checkbox"/> Section 6409 |
| <input type="checkbox"/> Design & Site Development Review | | <input type="checkbox"/> Rezoning | <input type="checkbox"/> Administrative Permit |
| | | <input type="checkbox"/> Sidewalk Café | <input type="checkbox"/> Minor Use Permit |

PROJECT INFORMATION:

PROJECT NAME: Concord Villages

PROJECT SITE ADDRESS/LOCATION: 3295 Haleakala St. Concord, CA 94519 ASSESSOR'S PARCEL NUMBER: 111-010-014 & 111-010-006

PROJECT DESCRIPTION (Provide brief description and submit a more detailed description as an attachment.):
Please see attached.

NOTE: All applicants are encouraged to hold a neighborhood meeting with nearby property owners and tenants early in the development review process. Planning Division staff will work with applicants to schedule the neighborhood meeting.

APPLICANT'S CONTACT INFORMATION

PROPERTY OWNER'S CONTACT INFORMATION

NAME/COMPANY: <u>Eddie Haddad</u>	NAME/COMPANY: <u>Concord Villager LLC</u>
ADDRESS: <u>900 S. LV Veggs Blvd #810</u>	ADDRESS: <u>900 S. LV Blvd #810</u>
CITY, STATE: <u>LV NV</u> ZIP: <u>89101</u>	CITY, STATE: <u>LV NV</u> ZIP: <u>89101</u>
BUSINESS PHONE: <u>702-868-9000</u> CELL: <u>702-491-5812</u>	BUSINESS PHONE: <u>702-868-9000</u> CELL: <u>702-491-5812</u>
FAX: <u>702-380-2801</u> EMAIL: <u>eddie@huebldr.com</u>	FAX: <u>702-380-2801</u> EMAIL: <u>eddie@huebldr.com</u>

Agent Authorization Note: If the Applicant is not the Property Owner, then the Property Owner must sign below to authorize the Applicant as his/her official representative.

I, _____, Owner, authorize _____ to act as the official representative on my behalf for this project and in all matters relating to this application. I have read and agree with all of the above (application must be signed by property owner).

Property Owner's Signature

Date

FOR PLANNING DIVISION USE ONLY:

FILE NAME:		FEES	FIN. REV. CODE
FILE NUMBERS:	APPLICATION RECEIVED BY:	GP DESIGNATION:	
ASSOCIATED FILES:	PLANNER:	ZONING:	
	ENGINEER:		



PROJECT NAME: Concord Village FILE NUMBER: _____

PLEASE INCLUDE ALL RELEVANT CONTACT INFORMATION

PROJECT MANAGER

CIVIL ENGINEER

NAME/COMPANY: Eddie Haddad
 ADDRESS: 900 S. LV Blvd #870
 CITY, STATE: LV NV ZIP: 89101
 BUSINESS PHONE: 702-865-9000 CELL: 702-491-5812
 FAX: 702-380-2801 EMAIL: eddie.haddad@huelofts.com

NAME/COMPANY: Carlson Barbee & Gibson (Angelo Obertello)
 ADDRESS: 2633 Camino Ramon
 CITY, STATE: San Ramon CA ZIP: 94583
 BUSINESS PHONE: 925.866.0322 CELL: _____
 FAX: _____ EMAIL: aobertello@cbandg.com

ARCHITECT

LANDSCAPE ARCHITECT

NAME/COMPANY: _____
 ADDRESS: _____
 CITY, STATE: _____ ZIP: _____
 BUSINESS PHONE: _____ CELL: _____
 FAX: _____ EMAIL: _____

NAME/COMPANY: _____
 ADDRESS: _____
 CITY, STATE: _____ ZIP: _____
 BUSINESS PHONE: _____ CELL: _____
 FAX: _____ EMAIL: _____

OTHER

OTHER

NAME/COMPANY: _____
 ADDRESS: _____
 CITY, STATE: _____ ZIP: _____
 BUSINESS PHONE: _____ CELL: _____
 FAX: _____ EMAIL: _____

NAME/COMPANY: _____
 ADDRESS: _____
 CITY, STATE: _____ ZIP: _____
 BUSINESS PHONE: _____ CELL: _____
 FAX: _____ EMAIL: _____

I hereby authorize employees of the City of Concord to enter upon the subject property, as necessary, to inspect the premises and process this application.

CERTIFICATION:

I hereby certify that the statements furnished above, and in the attached exhibits, present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements, and information presented are true and correct to the best of my knowledge.

Date: 4-17-2021

Signature: [Signature] Owner Authorized Agent
 For: Eddie Haddad