

# CITY OF YUBA CITY

Community Development – Planning  
(530) 822-4700



## INITIAL STUDY/PROJECT INFORMATION

(ENVIRONMENTAL REVIEW)

<b>For Internal (City) Use Only:</b>	
EA #	_____
PROJECT #	_____

GENERAL:

Project Title: \_\_\_\_\_

Applicant: \_\_\_\_\_

Location [include Assessor’s Parcel Number(s)] \_\_\_\_\_

Describe the proposal: \_\_\_\_\_

Site size: \_\_\_\_\_ Existing use: \_\_\_\_\_

What are the surrounding land uses?

north _____	south _____
east _____	west _____

Is this project part of a larger project? Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If the project is phased, describe the phases: \_\_\_\_\_  
\_\_\_\_\_

*Please complete either the Residential or Commercial section below (as relevant to your proposal).*

RESIDENTIAL:

Number of dwelling units: single family \_\_\_\_\_ multiple family \_\_\_\_\_

If multiple family, number of dwellings with:

one bedroom _____	three bedrooms _____
two bedrooms _____	four bedrooms _____

Number of floor levels: \_\_\_\_\_

COMMERCIAL, INDUSTRIAL, INSTITUTIONAL:

Building square footage: \_\_\_\_\_ Days of operation: \_\_\_\_\_

Percent building coverage: \_\_\_\_\_ Hours of operation: \_\_\_\_\_

Amount of seating (for restaurants, churches, theaters, etc.): \_\_\_\_\_

Number of employees: \_\_\_\_\_ Maximum number of employees per shift: \_\_\_\_\_

Number of off-street parking spaces provided: \_\_\_\_\_ Number of truck loading docks: \_\_\_\_\_

If all or a portion of your proposal involves outdoor uses:

Type of use: storage  sales   
processing  manufacturing   
other  (please describe) \_\_\_\_\_

***All applicants must answer the following questions:***

Will this proposal:

Change the pattern, scale, or character of the general area around the project? Yes  No

Create significant amounts of solid waste or litter? Yes  No

Create dust, ash, smoke, fumes, or odors in the vicinity? Yes  No

Substantially change existing noise or vibration levels in the vicinity? Yes  No

Use or dispose of potentially hazardous materials such as toxic substances, flammables, or explosives? Yes  No

Create a substantial change in demand for municipal services (police, fire, water, sewage, etc.)? Yes  No

Affect a historical or archeological site? Yes  No

If any "yes" boxes were checked above, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

CERTIFICATION:

I hereby certify that the statements and information furnished are true and correct to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name (please print): \_\_\_\_\_