

TOWN OF LOOMIS

6140 Horseshoe Bar Rd, Suite K Loomis, CA 95650 (916) 652-1840 FAX (916) 652-1847

For Town Use	
File Number	
Application Fee(s)_	
Receipt #	_Date
Date Received	
Paid \$	

PLANNING DEPARTMENT

Planning Application

1.	Project Title: GREEN BUSINESS PARK LO	OMIS					
2.	Street Address/ Location: SOUTH OF SIERRA COLLEGE BLVD BETWEEN DELMAR AVE AND BANKHEAD RD						
3.	030-110-010 / 030-110-011 / 030-110-013 / APN(s) 030-100-013 / 030-100-021 / 030-100-022 / 030-100-024						
	Zoning: RA / RE General Plan I	Designation: TO BE RE-EVALUATED (Ref	: Pg. 42,	Para. I-4)			
	Current Site Use: VACANT / PASTURE						
	Surrounding Land Use(s): SOUTH: INDUSTRIAL;	WEST/NORTH/EAST: RESIDENTIAL/	AGRICL	ILTURAL			
4.	Property Owner: MIMA CAPITAL, LLC						
	Address: 4120 DOUGLAS BLVD, NO. 306-175	GRANITE BAY	CA	95746			
	,	City	State	Zip			
	Telephone: (916) 315-8877	email: mfournier@mimacap.com					
5 .	Project Applicant: BUILDING ENGINEERING & MAINTENANCE, INC.						
	A Live and 4700 DOOKLINI DD	DOCK! IN	0.4	05077			
	Address: 4780 ROCKLIN RD	ROCKLIN City	CA State	95677 Zip			
	(0.10) = 11 = 110	•	Olalo	- .p			
	Telephone: (916) 741-7118	_email: evanm@bem.com					
6.	Project Engineer/Architect: MACKAY & SOMPS CIVIL ENGINEERS, INC.						
	Address: 1025 CREEKSIDE RIDGE DR, STE. 150		CA	95678			
	Telephone: (916) 773-1189	City email:dpasquantonio@msce.com	State	Zip			
	relephone:(310) 113-1103	emaii: upasquamomo @ msce.com					
7.	What actions, approvals or permits by the Town	of Loomis does the proposed project	require	?			
	[] Appeal	[] Miscellaneous Permit					
	[] Certificate of Compliance	[] Planned Development					
	[] Conditional Use Permit	Second Unit Permit					
	[] Design Review[] Development Agreement	[] Sign Review[] Tentative Review					
	[/] Environmental Review	[] Minor Land Division					
	General Plan Amendment	[] Subdivision					
	[] Hardship Mobile Home Permit	[] Variance					
	[] Lot Line Adjustment [✓] Other TBD BY TOWN STAFF	✓ Zoning Amendment (Rezone)					
	8. Does the proposed project need approval by other governmental agencies? [√] Yes [] no if yes, which agencies? TBD						
	[] res [] no il yes, which agencies? The						
a	Which agencies/utilities provide the following se	ervices to the project? (Please note if not	hooked ::	n to sewer			
٠.	Which agencies/utilities provide the following services to the project? (Please note if not hooked up to sewer or water)						
	Electricity PACIFIC GAS & ELECTRIC Natural Gas PACIFIC GAS & ELECTRIC						
	Fire Protection SOUTH PLACER FIRE DISTRICT	Water/Well PLACER COUNTY WA	TER AUT	HORITY			
	Sewer/Septic SOUTH PLACER MUNICIPAL UTILITY DISTR	RICT Telephone AT&T					

	High School PLACER UNION HIGH SCHOOL DISTRIC	Elem. School_	LOOMIS UNION SC	HOOL DISTRICT		
10.	The Town had informed me of my responsibilities pursuant to California Government Code, Section 65962.5(f), regarding notifying the Town of hazardous waste and/or hazardous substance sites on the project site. I have consulted the lists consolidated by the State Environmental Protection Agency dated MAY 10 [™] , 2021 and find: Regulatory identification number					
	Date of list MAY 10 [™] , 2021	lo problems identified				
	Type of problem_N/A I declare under penalty of perjury of the laws of	ho State of California that the	foregoing is true	and correct		
		Applicant	Floregoing is true	e and correct.		
11.	Project Description (Describe the project so understand the purpose, size, phasing, dur activities, surrounding land uses, etc. associnecessary.) SEE ATTACHED PROJECT DES	ation, required improveme iated with the project. Att	nts, duration of	construction		
12.	2. Owner Authorization: BUILDING ENGINEERING & I hereby authorize MAINTENANCE, INC. , the above-listed applicant, to m for project approvals by the Town of Loomis, regarding the above-described project and to recorrespondence, etc., from the Town regarding this project. I also hereby authorize the town noticing board (approximately 4' x 3') on my property, visible from the street, at least ten (10) first hearing on my project, and for subsequent hearings as determined necessary by the Plan					
1	Signature(s) of Owner(s)	Printed Name	(S)			
		MICHEL M. FOURNIER (MANAGING MEMBER, MIN		5/12/2021 Date		
		(MANAGING MEMBER, MIN	IA CAI ITAL)			
				Date		
13.	Applicant and/or Owner Hold Harmless: Owner, and Applicant (if different from Owner), costs and expenses, including attorney's fees r different from Owner), and their employees, co proceeding brought in any State or Federal cou	esulting from the negligence ntractors, subcontractors and rt with respect to the applica	of owner, and A d agents, in conn ant's project.	pplicant (if		
	Signature(s) of Owner(s)	Printe	ed Name(s)			
		MICHEL M. FOURNIE		5/12/2021		
		(MANAGING MEMBER, M	IMA CAPITAL)	Date		
14.	Applicant and/or Owner Acknowledgment: Owner/Applicant expressly agree they are sole rules, regulations, and practices required to impomissions in explaining what is required, wheth basis for Owner/Applicant failing to comply with	olement this development, and er on this application form o all such laws, rules, regulat	nd that Town stat r otherwise, do n	ff's errors or 123 ot establish a		
	and the state of t		a Hamo(3)	5/12/2021		
_		MICHEL M. FOURNIER (MANAGING MEMBER, MIN	MA CAPITAL)	Date		