

MASTER LAND USE PERMIT APPLICATION
LOS ANGELES CITY PLANNING DEPARTMENT

Planning Staff Use Only

ENV No.		Existing Zone		District Map	
APC		Community Plan			Council District
Census Tract	APN	Case Filed With [DSC Staff]		Date	

CASE NO. _____

APPLICATION TYPE CUB per L.A.M.C. Sec 12.24 W1 to serve beer and wine at an existing restaurant.
(zone change, variance, conditional use, tract/parcel map, specific plan exception, etc.)

1. PROJECT LOCATION AND SIZE

Street Address of Project 1110 Gayley Avenue Zip Code 90024
 Legal Description: Lot 8 Block 9 Tract TR 10600
 Lot Dimensions irregular Lot Area (sq. ft.) 15,202.4 Total Project Size (sq. ft.) 1,179

2. PROJECT DESCRIPTION

Describe what is to be done: Conditional use permit to allow the sale of beer/wine for on-site consumption at a new 1179 s.f., 24 seat restaurant with hours from Mon-Thurs 11:30am – 11:00pm, Fri-Sat 11:30am – 12am and Sun 12pm-10pm located in a C4-2D-O form

Present Use: vacant (former restaurant) Proposed Use: restaurant with beer/wine sales

Plan Check No. (if available) _____ Date Filed: _____

Check all that apply:

<input type="checkbox"/> New Construction	<input type="checkbox"/> Change of Use	<input checked="" type="checkbox"/> Alterations	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Residential	<input type="checkbox"/> Tier 1 LA Green Code

Additions to the building:

<input type="checkbox"/> Rear	<input type="checkbox"/> Front	<input type="checkbox"/> Height	<input type="checkbox"/> Side Yard
-------------------------------	--------------------------------	---------------------------------	------------------------------------

No. of residential units: Existing 0 To be demolished 0 Adding 0 Total 0

3. ACTION(S) REQUESTED

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

Code Section from which relief is requested: _____ Code Section which authorizes relief: 12.24 W1 - CUB to permit the sale of beer and wine for on-site consumption in conjunction with a 1,179 s.f., 24-seat restaurant and hours of operation from Mon-Thurs 11:30am – 11:00pm, Fri-Sat 11:30am – 12am and Sun 12pm-10pm

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:

4. OWNER/APPLICANT INFORMATION

Applicant's name Jerry Greenberg, CEO Company Sushi Nozawa, LLC
 Address: 11628 Santa Monica Blvd Telephone: (310) 451-8424 Fax: (310) 451-8410
Santa Monica Zip: 90025 E-mail: lspann@gilmoredev.com

Property owner's name (if different from applicant) Duesenberg Investment Co., LLC, c/o Topa Management Company
 Address: 1800 Avenue of the Stars, #1400 Telephone: (310) 203-9199 Fax: ()
Los Angeles, CA Zip: 90067 E-mail: jgilmore@topa.com

Contact person for project information Valerie Sacks Company Liquor License Specialists
 Address: 2222 Damon Street Telephone: (310) 500-6282 Fax: (310) 943-3322
Los Angeles, CA Zip: 90021 E-mail: Valerie@liquorlicense.com

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.
- c. In exchange for the City's processing of this Application, the undersigned Applicant agrees to defend, indemnify and hold harmless the City, its agents, officers or employees, against any legal claim, action, or proceeding against the City or its agents, officers, or employees, to attack, set aside, void or annul any approval given as a result of this Application.

Signature: Judith G. Munzig 11/30/15 Print: Judith G. Munzig, Authorized Signatory
Duesenberg Investment Company, LLC
 ALL-PURPOSE ACKNOWLEDGMENT

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)

see attachment

6. 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 handout 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 [Project Planner]	Date
Receipt No.	Deemed Complete by [Project Planner]	Date

