APPLICATION FOR VACATION OF PUBLIC RIGHT OF WAY ORIGINAL – (No copies or faxes)

TO A PERSON	_	18-20	19
DATE	6-	18-5°	1 1

PROJECT I	OCATION	AND	DESCRIPTION	IN:
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PROJ		LOCATION AND DESCRIPTION:		
(1)	Area proposed to be vacated is: Alley N/o Alams Bl. E/O AlsACE AVE. (Street/Avenue/Boulevard/alley/walk:N/S/E/Wof)			1E.
(2)	(Street, Attach	located between: SACE AVE and SYCAMORE AVE. Avenue, Boulevard or other limit) (Street, Avenue, Boulevard or other limit) a map if necessary. acation area lies within or is shown on:	-	
	(a)	Engineering District: (check appropriately)		5
		(V) Central () Harbor () Valley () West Los Angeles	2019 JUL 10 AM 9: 54	N. SE
	(b)	Council District No. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	JL 10	AELOI
	(c)	District Map No. <u>123 - B - 177</u>	3	HENT
	(d)	A CRA Redevelopment Area:OR(NO)	9: 54	AND BEVELOPHENT GROUP
(3)	Area (in sq. ft.) of the proposed vacation area is approx. 7,093 sq. ft. If over 10,000 sq. ft. of buildable area, the vacation is not categorically exempt from the California Environmental Quality Act Guidelines and will require a higher level of environmental review. Contact a vacation staff member to discuss the effect of this on the processing of your application prior to submittal. If the applicant is required to have an environmental determination performed by the Bureau of Engineering Environmental Management Group, the applicant must submit an additional \$32,100 fee deposit. This will also increase the processing time by approximately 6 months.			
•	Develor aware proces have a Environ	e vacation is located within a Coastal Development Zone, a Coast opment Permit will be required for the project. The applicant should that vacations within a Coastal Development Zone will take longer as and will be considerably more expensive. If the applicant is required a Coastal Development Permit processed by the Bureau of Engineeric commental Management Group, the applicant must submit an addition to fee deposit.	be to to ng	
•	deposi applica paid t	city agencies, including LADOT, may require additional fees to ted to cover costs during the referral and investigation process. The ant is responsible for paying the fees to the agency directly. Referral feet to other city agencies are separate from the Bureau of Engineering fees.	he es	
•		proposed vacation is only for a portion of the Right-of-Way or a particular a vacation staff member prior to submitting application.	al	
4)		se of vacation (future use of vacation area) is:	_	
	A	lley N/O ADAMS BLYD, E/O ALSACE AVE & U/O SYCAMORE AVE. She -uncluded in Propriately) on is in conjunction with: (Check appropriately)	_	
5)	Vacati	on is in conjunction with: (Check appropriately)		
		vocable Permit () Tract Map () Parcel Map () Zone Change therDIR - 2018 - 3435 - DB - SPR	_	

PET	ITIONER / APPLICANT:	
(6)	Petitioner(s): David Pourbaba, 5181 ADAMS, LLC Print Name(s) of Petitioner(s) in full – Name or Company Name Signature(s): If Company, Name and Title	
(7)	Mailing Address: 8271 Melrose AVE # 200, Los Angels (Address, City, State, Zip Code)	CA90046
(8)	Daytime phone number of petitioner is: (323) 951-0242 FAX number: (323) 951-0239 E-mail number: SMAROUF @ 4ddevelogment.com	
(9)	Petitioner is: (check appropriately) (Wowner OR () Representative o	f Owner
OW! (10)	NERSHIPS: Name(s) and address of the Owner(s) applying for vacation is/are: Same as above	
	Print Name(s) and Address of Owner(s) in Full (If Owner is Petitioner, Indicate "Same as above")	
	Signature(s)	
(11)	Petitioner is owner or representative of owner of: (check appropriately) (The property described in attached copy of Grant Deed OR ()	

(Lot, Tract No.) (Parcel, Parcel Map L.A. No.) (Other)

PETITIONER / APPLICANT:

(6)	Petitioner(s): David Pourbaba 5181 ADAMS, LLC Print Name(s) of Petitioner(s) in full - Name or Company Name	
	Signature(s): If Company, Name and Title	
(7)	Mailing Address: 8271 Melrose AVE # 200, Los Angelo (Address, City, State, Zip Code)	5 (A90046
(8)	Daytime phone number of petitioner is: (323) 951-0242 FAX number: (323) 951-0239	
	E-mail number: SMAROUF @ 4ddevelopment.com	
(9)	Petitioner is: (check appropriately) (YOwner OR () Representative	of Owner
		**
OWN	NERSHIPS:	
10)	Name(s) and address of the Owner(s) applying for vacation is/are:	
	Signe as above	-
		-
	Print Name(s) and Address of Owner(s) in Full (If Owner is Petitioner, Indicate "Same as above")	- 1
	THE STATE OF THE S	
	Signature(s)	
11)	Petitioner is owner or representative of owner of: (check appropriately)	
	The property described in attached copy of Grant Deed OR	1
	()	
	(Lot, Tract No.) (Parcel, Parcel Map L.A. No.) (Other)	