

1. Owner/Applicant Information

PROPERTY OWNER'S NAME:  
**Forest Hill Chrisitan Church**

ADDRESS: **250 Laguna Honda Boulevard, San Francisco** ZIP CODE: **94116** TELEPHONE: **(415 ) 566-1414**

PROPERTY OWNER'S EMAIL:  
**Allen@foster-braque.net**

APPLICANT'S NAME:  
 Same as Above  **Christian Church Homes**

ADDRESS: **303 Hegenberger Road, Suite 201, Oakland, CA** ZIP CODE: **94621** TELEPHONE: **(510 ) 746-4148**

APPLICANT'S EMAIL:  
**Kmertz@cchnc.org**

CONTACT FOR PROJECT INFORMATION:  
 Same as Above Owner  or Applicant  **KAVA MASSIH**

ADDRESS: **920 GRAYSON BERKELEY, CA** ZIP CODE: **94710** TELEPHONE: **(510) 644 1920**

CONTACT PERSON EMAIL:  
**kavam@kavamassiharchitects.com**

Request a meeting with PPA planner(s)? YES  NO

*yes, want a meeting  
- JL 7/6/16*

2. Location and Classification

STREET ADDRESS OF PROJECT: **250 LAGUNA HONDA BOULEVARD** ZIP CODE: **94116**

CROSS STREETS:  
**CLAREDON AVENUE**

ASSESSORS BLOCK/LOT:	LOT DIMENSIONS:	LOT AREA (SQ FT):	ZONING DISTRICT:	HEIGHT/BULK DISTRICT:
<b>2819 / 021</b>	<b>617' x 191'</b>	<b>70,796</b>	<b>RH-1(D)</b>	<b>40-X</b>

3. Project Description

Please Check  
 New Construction  Demolition  Alteration  Change of Use  Change of Hours  Other

Describe what is to be done:

Existing church and child care buildings to be demolished and replaced with a new five story building incorporating a church/community center and senior housing apartments.

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**JUL 06 2016**

**CITY & COUNTY OF S.F.**  
 PLANNING DEPARTMENT  
 NEIGHBORHOOD PLANNING

**Additions to Building:** Rear  Front  Height  Side Yard

**Present or Previous Use:** Religious Institution and Child Care Facility

**Proposed Use:** Religious Institution and Senior Housing

4. Project Summary Table

If you are unsure of the final size of the project, provide maximum estimates. TOTALS DO NOT AUTO CALCULATE.

	EXISTING USES:	EXISTING USES TO BE RETAINED:	NET NEW CONSTRUCTION AND/OR ADDITION:	PROJECT TOTALS:
<b>GROSS SQUARE FOOTAGE (GSF)</b>				
Residential	0	0	116,395	116,395
Retail	0	0	0	0
Office	0	0	0	0
Industrial/PDR <i>Production, Distribution, &amp; Repair</i>	0	0	0	0
Parking	18,300	0	20,949	20,949
Other (Specify Use)*	12,330	0	4,983	4,983
<b>TOTAL GSF</b>	<b>30,630</b>	<b>0</b>	<b>142,327</b>	<b>142,327</b>
<b>PROJECT FEATURES</b>				
Dwelling Units	0	0	149	149
Hotel Rooms	0	0	0	0
Parking Spaces	49	0	62	62
Loading Spaces	0	0	0	0
Number of Buildings	2	0	1	1
Height of Building(s)	14.5'	0	49'	49'
Number of Stories	2	0	5	5

Please describe any additional project features that are not included in this table:  
(Attach a separate sheet if more space is needed)

\*Existing 12,330 SF is composed of Religious Institution and Child Care Facility. The 4,983 SF net new construction consists of Religious Institution only.

5. Additional Project Information

Please answer each question to the best of your ability. If the answer is unknown, please state so and provide a brief explanation. Please note that providing more information about the proposed project may result in additional and/or more detailed feedback from the Department.

- 1. Would the project involve a major alteration of a structure constructed 45 or more years ago or a structure in an historic district?  YES  NO
- 2. Would the project involve demolition of a structure constructed 45 or more years ago or a structure located in an historic district?  YES  NO
- 3. Would the project result in excavation or soil disturbance/modification?  YES  NO

If yes, how many feet below grade would be excavated? Varies; Maximum 16'

What type of foundation would be used (if known)? \_\_\_\_\_

- 4. Is the project site located in an area of potential geotechnical hazard as identified in the San Francisco General Plan or on a steep slope or would the project be located on a site with an average slope of 20% or more?  YES  NO
- 5. Would the project result in ground disturbance of 5,000 gross square feet or more?  YES  NO
- 6. Would the project result in a construction of a structure 80 feet or higher?  YES  NO
- 7. Would the project impact any public property or right(s)-of-way?  YES  NO
- 8. For any project site that is located on the Maher map or is suspected of containing hazardous materials (based on a previous use such as gas station, auto repair, dry cleaners, or heavy manufacturing, or a site with underground storage tanks):  YES  NO

**Would the project involve soil disturbance of any amount (including grading or minor excavation for utilities) or a change of use from industrial to commercial/residential?**

If yes, please describe and provide the amount of soil disturbance in cubic yards. \_\_\_\_\_

**AND**

If yes, please describe.

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

- 9. Is the project related to a larger project, series of projects, or program?  YES  NO

If yes, please describe.

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

- 10. Is the project in a Community Plan Area (for example, Market/Octavia)? If yes, please identify the area.  YES  NO

\_\_\_\_\_

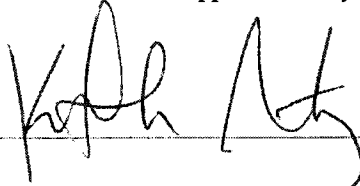
# Estimated Construction Costs

TYPE OF APPLICATION:	
OCCUPANCY CLASSIFICATION: <b>R-2</b>	
BUILDING TYPE: <b>(4) Floors of Type V over Type I podium</b>	
TOTAL GROSS SQUARE FEET OF CONSTRUCTION: <b>142,327</b>	BY PROPOSED USES: <b>4,983 (Religious Institution)</b>
	<b>20,949 (Parking)</b>
	<b>116,395 (Senior Housing)</b>
ESTIMATED CONSTRUCTION COST: <b>\$44,000,000</b>	
ESTIMATE PREPARED BY: <b>Scott Smitt, James E. Roberts-Obayashi Corp.</b>	
FEE ESTABLISHED: <b>14%, per TCAC statue</b>	

## Applicant's Affidavit

Under penalty of perjury the following declarations are made:

- a: The undersigned is the owner or authorized agent of the owner of this property.
- b: The information presented is true and correct to the best of my knowledge.
- c: The other information or applications may be required.

Signature: 

Date: 7/5/16

Print name, and indicate whether owner, or authorized agent:

Kathleen Mertz  
Owner /  Authorized Agent (circle one)

# Application Submittal Checklist

Applications listed below submitted to the Planning Department must be accompanied by this checklist and all required materials. The checklist is to be completed and **signed by the applicant or authorized agent and a Department staff person.**

APPLICATION MATERIALS	CHECKLIST
Application, with all blanks completed	<input checked="" type="checkbox"/>
300-foot radius map, if applicable	<input type="checkbox"/>
Address labels (original), if applicable	<input type="checkbox"/>
Address labels (copy of the above), if applicable	<input type="checkbox"/>
Site Plan	<input checked="" type="checkbox"/>
Floor Plan	<input checked="" type="checkbox"/>
Elevations	<input checked="" type="checkbox"/>
Section 303 Requirements (shown on info. sheet)	<input type="checkbox"/>
Prop. M Findings	<input type="checkbox"/>
Photographs	<input checked="" type="checkbox"/>
Check payable to Planning Dept.	<input checked="" type="checkbox"/>
Application signed by owner or agent	<input checked="" type="checkbox"/>
Letter of authorization for agent	<input checked="" type="checkbox"/>
Electronic copy of required materials	<input checked="" type="checkbox"/>

*- plans only*

#### NOTES:

Required Material. Write "N/A" if you believe the item is not applicable, (e.g. letter of authorization is not required if application is signed by property owner.)

Typically would not apply. Nevertheless, in a specific case, staff may require the item.

Some applications will require additional materials not listed above. The above checklist does not include material needed for Planning review of a building permit. The "Application Packet" for Building Permit Applications lists those materials.

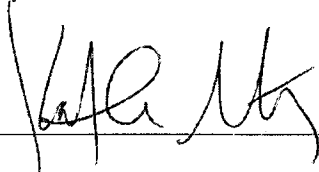
No application will be accepted by the Department unless the appropriate items on this checklist is completed. Receipt of this checklist, the accompanying application, and required materials by the Department serves to open a Planning file for the proposed project. After the file is established it will be assigned to a planner. At that time, the planner assigned will review the application to determine whether it is complete or whether additional information is required in order for the Department to make a decision on the proposal.

# Acknowledgement and Signatures

## OTHER APPLICATIONS THAT MAY BE REQUIRED:

By signing below, I acknowledge: That I have read and completed this form in its entirety; that I understand that receipt of these materials by the Department does not mean that the application has been accepted as complete; that all of the information provided in this application is accurate.

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



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

7/5/16

Print name, and indicate whether owner, or authorized agent:

Kathleen Murtz  
Owner / Authorized Agent (circle one)

For Department Use Only

Application received by Planning Department:

By: JESSICA LOOK

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

7/6/16

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CITY & COUNTY OF S.F.  
PLANNING DEPARTMENT  
PIC

angie,  
will send letter of authorization  
and/or email from owner  
by COB 7/6/16..

Jessica

Rec'd letter 7/6/16

*Angie Betts*



SAN FRANCISCO  
PLANNING  
DEPARTMENT

### FOR MORE INFORMATION:

Call or visit the San Francisco Planning Department

#### Central Reception

1650 Mission Street, Suite 400  
San Francisco, CA 94103-2479

TEL: 415.558.6378

FAX: 415.558.6409

WEB: <http://www.sfplanning.org>

#### Planning Information Center (PIC)

1660 Mission Street, First Floor  
San Francisco, CA 94103-2479

TEL: 415.558.6377

Planning staff are available by phone and at the PIC counter.  
No appointment is necessary.