City of Santa Rosa Planning & Economic Development Department 08/01/2022



invalidate any approval of this application.

UNIVERSAL PLANNING APPLICATION

(Form 1 of 5)



Planning Entitlement Applications are filed with the Planning Division at the Planning and Economic Development Department. Only applications with all required submittal items for each corresponding checklist will be accepted. Applicants should contact the Planning Division regarding any questions with the checklist requirements prior to submitting an application. Email any questions to the Planning helpline at planning@srcity.org, or call 707-543-3200. You may also visit our website at srcity.org/ped for additional information and forms. Please review the Planning Review Times and Process document linked here.

Project Site Information:		
Project Name: Pura Vida Recovery Services		
Zoning. CN-SR		
General Plan Designation. Very Low Residenti	ial	
Site Address(es): 5761 Mountain Hawk Dr. Sant	a Rosa, CA 95409	
Assessor's Parcel Number(s): 153-180-029		
Total Property size in acres: 1.21		
Applicant Information:		
Contact Name/Organization: Alex Wignall, Pura	Vida Recovery Services	
Mailing Address, 1154 Lodi Ln		
City: St. Helena	State: CA	Zip: <u>94574</u>
Phone: 707-968-1555	State: CA Zip: 94574 Alternate Phone: 707-308-4492	
Email Address: alex@pvrecovery.com		
Application Representative Information (if di Contact Name/Organization: Mailing Address:		
City:	State:	Zip:
Phone:	Alternate Phon	e:
Email Address:		
	ner Signature Required Belov	
Mailing Address: 1154 Lodi Ln		04574
City: St. Helena	State: CA	Zip: <u>94574</u>
Phone: 707-968-1555	State: CA Zip: 94574 Alternate Phone: 707-308-4492	
Email Address: alex@pvrecovery.com		
	e this application. I certify tha	at all of the submitted information is true and
correct to the best of my knowledge and be	lief. I understand that any m	nisrepresentation of submitted data may

PROPERTY OWNER'S SIGNATURE

Revised 7/2020

Project Description: Please provide a brief description of the proposed project below. A more detailed narrative may be required along with the application materials. 24 bed community care facility upstairs utilizing the seven, 2bed-2bath apartments (units 201-207) Office - professional services, counseling office and outpatient addiction medicine treatment center downstairs (Units 102-103) Please check each relevant application box below: ☐ Public Convenience or Necessity ☐ Annexation Prezoning Conditional Use Permit ☐ Public Information Services ☐ Zoning Verification ☐ Subdivision Status ☑ Minor □ Major ☐ Rezoning ☐ Map ☐ Text Density Bonus Design Review ☐ Sign ☐ Concept ☐ Minor ☐ Reduced Review Authority ☐ Major ☐ Permit ☐ Permit - Temporary ☐ Program ☐ Variance ☐ Entitlement Extension ☐ Temporary Use Permit ☐ Tentative Map ☐ General or Specific Plan Amendment □ Text □ Diagram ☐ Minor ☐ Major ☐ Hillside Development Permit ☐ Tree Removal ■ Minor ■ Major ☐ Utility Certificate ☐ Home Occupation ☐ Vacation of Easement or Right of Way ☐ Landmark Alteration Permit ☐ Waiver of Parcel Map □Concept □Minor □Major ☐ Zoning Clearance ☐ Landmark Designation ■ Modification of Final Map/Parcel Map

☐ Neighborhood Meeting