

**COUNTY OF MENDOCINO  
DEPT. OF PLANNING & BUILDING  
SERVICES**

**120 WEST FIR STREET  
FORT BRAGG, CA 95437  
Telephone: 707-964-5379  
Fax: 707-961-2427**

Case No(s) MHRB-2015-09  
Date Filed 3-13-2015  
Fee \$ \$55-  
Receipt No. PRJ-006463  
Received by J. Cherry

Office Use Only

**MHRB APPLICATION FORM**

Name of Applicant <u>COUNTY OF MENDOCINO c/o MSWMA</u>	Name of Property Owner(s) <u>VARIOUS</u>	Name of Agent <u>MIKE SWEENEY</u>
Mailing Address <u>MSWMA 3200 TAYLOR DR UKIAH CA 95482</u>	Mailing Address	Mailing Address
Telephone Number <u>468-9710</u>	Telephone Number	Telephone Number

Assessor's Parcel Number(s)

Parcel Size <input type="checkbox"/> Square Feet <input type="checkbox"/> Acres	Street Address of Project <u>EXISTING TRASH RECEPTACLE LOCATIONS IN ZONE A</u>
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**TYPE OF DEVELOPMENT**

(Check appropriate boxes)

- Demolition. Please indicate the type and extent of demolition. (see next page)
- Construction of a structure.
- Addition to a structure.
- Alteration of exterior of structure.
- Construction, installation, relocation or alteration of outdoor advertising sign.
- Outdoor lighting.
- Walkways, driveways, parking areas, and grading.
- Exterior painting of a structure.
- Other.

# PROJECT DESCRIPTION QUESTIONNAIRE

The purpose of this questionnaire is to relate information to the Planning & Building Services Department and the MHRB. Please answer all questions. For those questions which do not pertain to your project, please indicate "Not Applicable" or "N/A". **NOTE: The more complete and clear the submitted information, the more quickly your application can be processed.**

## 1. Describe your project in detail.

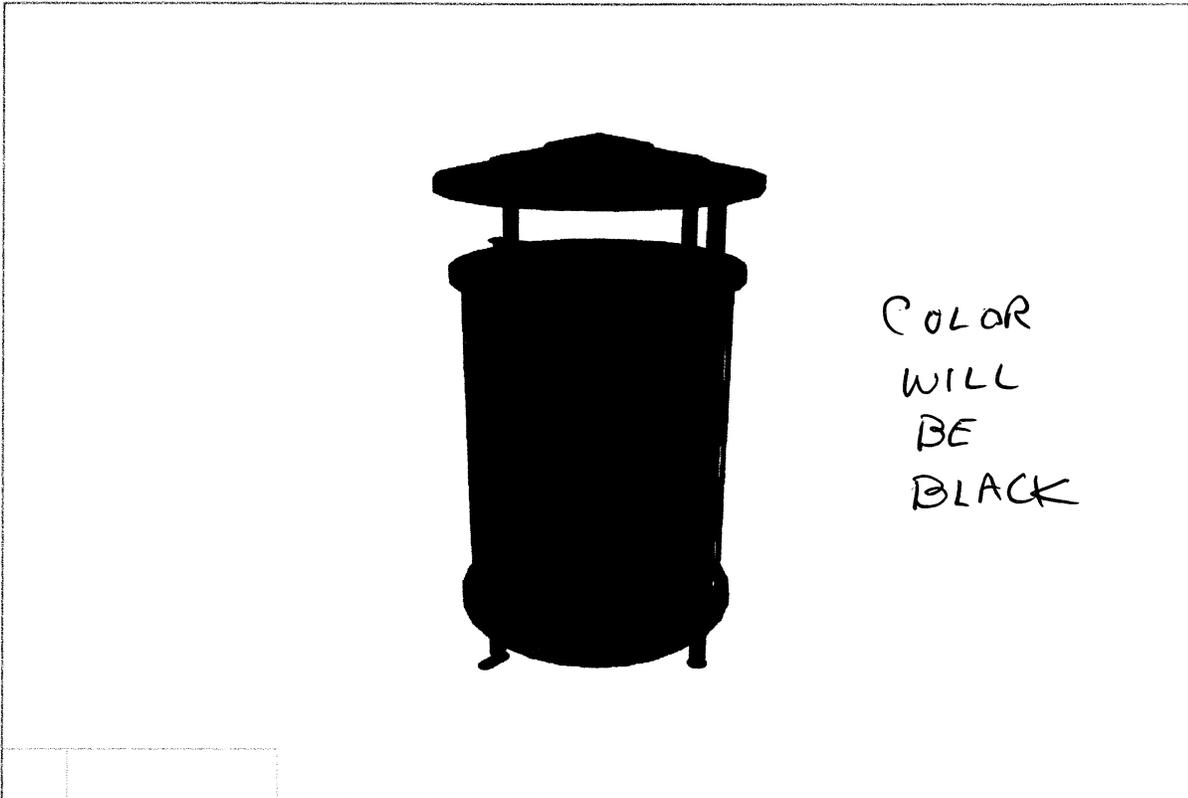
- For **demolition**, identify the items to be demolished, the percentage of the structure(s) to be demolished, and explain reason for demolition.
- For **new signs**, provide scaled drawings, describe wording, dimensions, materials, colors, and mounting detail. Indicate specific location on site plan.
- For **new copy on existing signs**, provide wording, graphics, font style, colors, and photographs of existing sign(s).
- For **exterior painting**, describe existing and proposed colors. Provide paint chips for proposed colors.
- For **exterior lighting**, include description/detail of fixtures and indicate locations on the site plan.
- For **new construction**, additions or architectural alterations, include plans, elevations, dimensions, height(s), materials, colors, finishes, trim and window details, walkways and paving locations.
- For **walkways, driveways, paving and grading**, provide dimensions, location and materials.

REPLACE 20 OAK BARREL SIDEWALK TRASH &  
RECYCLING UNITS WITH NEW METAL  
URBAN RENAISSANCE MODEL SLURB-4550 BLACK.  
SEE PICTURE ENCLOSED

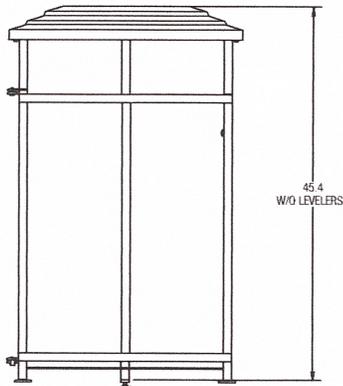
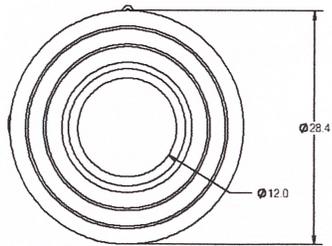
## 2. If the project includes new construction, please provide the following information:

- What is the total lot area presently covered by building(s), decks, walkways, water tanks, and other structures? N/A sq. ft.
- What is the total floor area (internal) of all structures on the property? N/A sq. ft.
- If located within the Mendocino Mixed Use (MMU) zoning district, What is the total floor area on the parcel that is devoted to residential use? N/A sq. ft.

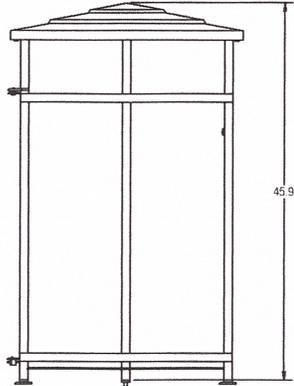
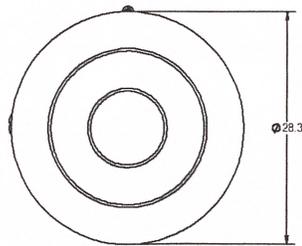
*If you need more room to answer any question, please attach additional sheets*



Urban Renaissance Litter & Recycling Receptacle, 45 gallon, side opening, Vertical grillwork



ASH LID  
(110 LBS)



DOMELID  
(108 LBS)

CUSTOMER APPROVAL:

X \_\_\_\_\_

DATE:

X \_\_\_\_\_

UNLESS OTHERWISE SPECIFIED,  
DIMENSIONS ARE IN INCHES.

TOLERANCES UNLESS OTHERWISE  
SPECIFIED:

FRACTIONAL: ±1/32

ANGULAR BEND: ±1°

TWO PLACE DECIMAL: ±0.00

THREE PLACE DECIMAL: ±0.00

MATERIAL: SEE DATA SHEET

FINISH: SEE DATA SHEET

WEIGHT: SEE ABOVE

SOURCE: M

SCALE: N.T.S.

**FORMS+SURFACES®** 30 Pico Street, Pittsburgh, PA 15223  
Tel: (800) 451-0410 Fax: (412) 781-7840

DATE

01.01/2011

URBAN RENAISSANCE RECEPTACLE  
45 GALLON SIDE OPENING

SLURB-45SO

DO NOT SCALE DRAWING

PROPRIETARY AND CONFIDENTIAL

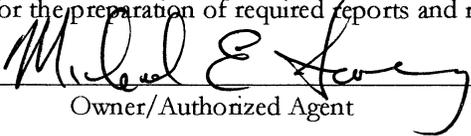
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PROHIBITED.

SIZE	DWG. NO.	REV	SHEET
B	SLURB-45SO-TD	0	1 OF 1

SUBMIT ONLY ONE COPY

## CERTIFICATION AND SITE VIEW AUTHORIZATION

1. I hereby certify that I have read this completed application and that, to the best of my knowledge, the information in this application, and all attached appendices and exhibits, is complete and correct. I understand that the failure to provide any requested information or any misstatements submitted in support of the application shall be grounds for either refusing to accept this application, for denying the permit, for suspending or revoking a permit issued on the basis of such misrepresentations, or for seeking of such further relief as may seem proper to the County.
2. I hereby grant permission for County Planning and Building Services staff and hearing bodies to enter upon and site view the premises for which this application is made in order to obtain information necessary for the preparation of required reports and render its decision.

  
\_\_\_\_\_  
Owner/Authorized Agent

3-5-15  
\_\_\_\_\_  
Date

NOTE: IF SIGNED BY AGENT, OWNER MUST SIGN BELOW.

### AUTHORIZATION OF AGENT

I hereby authorize \_\_\_\_\_ to act as my representative and to bind me in all matters concerning this application.

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Date

## MAIL DIRECTION

To facilitate proper handling of this application, please indicate the names and mailing addresses of individuals to whom you wish correspondence and/or staff reports mailed if different from those identified on Page One of the application form.

<b>Name</b>	<b>Name</b>	<b>Name</b>
<b>Mailing Address</b>	<b>Mailing Address</b>	<b>Mailing Address</b>

**SUBMIT ONLY ONE COPY**

**INDEMNIFICATION AND HOLD HARMLESS**

ORDINANCE NO. 3780, adopted by the Board of Supervisors on June 4, 1991, requires applicants for discretionary land use approvals, to sign the following Indemnification Agreement. Failure to sign this agreement will result in the application being considered incomplete and withheld from further processing.

**INDEMNIFICATION AGREEMENT**

As part of this application, applicant agrees to defend, indemnify, release and hold harmless the County of Mendocino, its agents, officers, attorneys, employees, boards and commissions, as more particularly set forth in Mendocino County Code Section 1.04.120, from any claim, action or proceeding brought against any of the foregoing individuals or entities, the purpose of which is to attack, set aside, void or annul the approval of this application or adoption of the environmental document which accompanies it. The indemnification shall include, but not be limited to, damages, costs, expenses, attorney fees or expert witness fees that may be asserted by any person or entity, including the applicant, arising out of or in connection with the approval of this application, whether or not there is concurrent, passive or active negligence on the part of the County, its agents, officers, attorneys, employees, boards and commissions.

Date: 3-5-14

  
Applicant