

**Design and Historic Preservation Section
MASTER APPLICATION FORM**



Planning & Development Department
175 North Garfield Avenue
Pasadena, CA 91109-7215
626.744.4009 fax: 626.793.5937
<http://www.cityofpasadena.net/planninganddevelopment>

- Design Review (Ch. 17.61.030 P.M.C.)
 Certificate of Appropriateness (Ch. 17.62.090 P.M.C.)

Project Address 229-247 S. MARENGO AVE.

Project Name SOUTH MARENGO TOWN HOUSES

Project Description DEMOLITION OF 4 BUILDINGS CONTAINING A TOTAL OF 17 RESIDENT UNITS. CONSTRUCTION OF A 3 STORY CONDOMINIUM BLDG WITH A TOTAL OF 21 UNITS, OVER A PARTIALLY SUBTERR. PARKING LEVEL.

Applicant Architect Contractor Developer Other

name: SUAREZ ARCHITECTS INC phone: 626-568-1186

address: 120 W. BELLEVUE DR. #100 fax: 626-793-7083

city: PASADENA state: CA zip code: 91105 email: HSC@SUAREZARCH.COM

Applicant Signature: [Signature] Date: 6.21.06

(note: if the applicant is other than the property owner, separate signed owner authorization is required)

Architect or Designer (for design review projects)

name: SAME AS APPLICANT. phone:

address: fax:

city: state: zip code: email:

Property Owner

name: phone:

address: fax:

city: state: zip code: email:

Primary Contact Person: Applicant Architect Property Owner

Proposed Work

- new construction demolition relocation restoration/rehabilitation addition/alteration sign/awning

Project Information (for staff use only)

PLN <u>2226-22348</u>	Review Authority	Historic Preservation Review	Type of Design Review
PRJ _____	<input type="checkbox"/> staff	<input type="checkbox"/> Category 1	<input type="checkbox"/> concept design review
staff initials: _____	<input type="checkbox"/> Design Commission	<input type="checkbox"/> Category 2 (eligible)	<input type="checkbox"/> final design review
date accepted: <u>6/27/06</u>	<input type="checkbox"/> Historic Preservation Comm.	<input type="checkbox"/> Category 3 (potentially eligible)	<input type="checkbox"/> consolidated design review
date submittals rec'd: _____			
fee: \$ _____	CEQA Review	Landmark/Historic District	Tree Removal
notification: \$ _____	<input type="checkbox"/> Exempt	_____	<input type="checkbox"/> yes
3% records fee: \$ _____	<input type="checkbox"/> Pending	district name _____	<input type="checkbox"/> no
TOTAL: \$ _____	<input type="checkbox"/> Completed		<input type="checkbox"/> no

**Disclosure Pursuant to the
City of Pasadena Taxpayer Protection Act
Pasadena City Charter, Article XVII**

- I. Does the value of this application/project *have the potential* to exceed \$25,000? Yes No (Applicant *must* mark one)
- II. Is the application being made on behalf of a government entity? Yes No
- III. Is the application being made on behalf of a non-profit 501(c) organization? Yes No
 If yes, please indicate the type of 501(c) organization: 501(c)3 501(c)4 501(c)6

Applicant's name: Prominent Victoria Corp. Date of Application: 10/2005
 Owner's name: Prominent Victoria Corp. Contact phone number: 626-292-2559
 (for questions regarding this form)
 Project Address: 229 - 243 S. Marengo Ave Pasadena CA
 Project Description: 21 Condo units project

- IV. Applicant and Property Owner must disclose all joint owners, trustees, directors, partners, officers and those with more than a 10% equity, participation or revenue interest in owner and/or project. If any of these are an organization/entity, include the name of the organization/entity and the first and last names of all parties of interest of that organization/entity. (List all parties below and use additional sheets as necessary, or provide all parties on an attachment) Please print legibly.
 Have any additional sheets or an attachment been provided? Yes No

Names of Owner(s), Trustees, Directors, Partners, Officers of Owner/Project	Names of Owner(s), Trustees, Directors, Partners, Officers of Owner/Project (continued)	Those with more than a 10% equity, participation or revenue interest in Owner and/or project
Helen Woo		
James zheng Li		

I hereby certify that I am the owner or designated agent and that the statements and answers contained herein, and the information attached, are in all respects true, accurate and complete to the best of my knowledge and belief.

Signature of Owner or Designated Agent: [Signature] Date: 8/23/07

<i>For Office Use Only</i>	
Type of Application:	Variance (all types) Adjustment Permit Sign Exception Temporary Use Permit Expressive Use Permit Conditional Use Permit (excluding Master Plan) Master Plan Amendment Planned Development <input checked="" type="checkbox"/> Other
Assigned Planner:	<u>John English</u> PLN#: <u>2006-00349</u>
Attached Address:	No Attached Address
Appealed: Yes <input type="checkbox"/> No <input type="checkbox"/> Appeal PLN# _____	Application Withdrawn <input type="checkbox"/>
Final Decision: Approved <input type="checkbox"/> Denied <input type="checkbox"/> Decision Date: _____	Decision Maker: _____ (Name and Title, or Name of Commission/Committee)
Votes in favor (please print): _____ _____ _____	