

Exhibit B

Operational Statement Form

Please use this form to clearly explain the proposed project. This information will assist all individuals, departments and agencies in their review and drafting of comments, conditions, suggestions or recommendations. The goal is to facilitate an accurate and complete description of your project in order to avoid unnecessary delays in gathering additional information. If you have any questions about the requested information, please call Development Services at (559) 621-8277.

Note: If the Operational Statement is not submitted or if the submittal is illegible, unclear or incomplete, the review of your project will not be accepted for processing.

Project Description:

Tentative Tract Map _____ is being submitted by Dale G. Mell of Dale G. Mell & Associates on behalf of SMS Construction and pertains to 4.68 acres of property located at 17 N. Cornelia Ave
APN: 312-763-10 and is zoned RS-4 with a planned land use of _____

The applicant is requesting authorization to: _____

Propose 26 single family lots with minimum size of 4,690 sq ft

The proposed development will consist of _____

26 Single Family homes

The existing site currently consists of 1 Single Family dwelling with _____ existing parking spaces

The proposed hours of operation are from _____ to _____ on _____

Other facts pertinent to this project are as follows:

Affordable to moderately priced Single Family homes for first time home buyers

- Project Narrative:** *(communicate in detail all characteristics of your project; provide as much detail as possible; include basic information such as applicant/project name, business, product or service, anticipated traffic- customers, deliveries, etc., any special events, number of employees, required equipment, on-site storage, demolition or adaptive reuse of existing structures, noise generation, any hazardous materials, etc.)*

APPL. NO. P23-01677 EXHIBIT O DATE 10/07/2024

PLANNING REVIEW BY _____ DATE _____

TRAFFIC ENG. _____ DATE _____

APPROVED BY _____ DATE _____

CITY OF FRESNO DARM DEPT