



Development & Resource Management Department Development Services Division 2600 Fresno Street, Room 3043 Fresno, CA 93721-3604 P: (559) 621-8277

Master Application Form #: T-6(9) \$ CUP											
(the line above should be completed by city staff) Check all that apply:											
Plan Amenda			Development Pern	nit		Amendme	ent	☐ Majo	ог Г	Mir	or
Rezone		=	Variance			Revised E		Maid		Mir	
	se Permit		Minor Deviation			Easemen	t Encroaci				
Tentative Tra	ct Map		Tentative Parcel M	lap		Lot Line A	Adjustmen	l l			
☐ Voluntary Par	cel Merger		Fresno Green Proj	iect		Public Art					
Annexation			Other:								
Project Name: Tract No. 6191											
Project Address: N/A A.P.N 313-270-97s											
Size of Site: 775,368 Sq. Ft. 17.80 Ac. Historical Project? (Building on registry and/or over 50 yrs. old) No											
Project Description (attach additional pages if necessary): Conditional Use Permit for a 110 lot single family											
residential subdivision with gates and private streets.											
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Zoning Designation		,		_		Plan Desig	,	Medium D			
List all previously a if available):	pproved and/	or pend	ding entitlements, a	associa	ited v	vith this pro	ject/site (p	provide ap	plicatio	num חכ	nber(s),
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Please read caref	ully before s	igning	or filing	af this		mait bu tha	Diannina	Dave		D-	
Submission of this application does not imply approval of this permit by the Planning and Development Department. Application approval will become null and void if it is determined that approval was based on omissions or inaccurate											
information submit	ed by the apr	olicant.	und void in it is di		ica ti	nat approve	ai was ba	sca on on	11133101	13 01 1	naccurate
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PRIMARY CONTA			pply 🗹 A	pplican	ıt	✓ Owne	er L	∟ Other			
Name: Joh	n A. Bonadell	le	Signa	ature:	-	70-6.1.1	12	22-			
Company/Organiza	ition: Bo	nadelle	Neighborhoods		/	1.	\bigcirc				
Address: 703	0 N. Fruit Ave	e. #101		City:	F	resno		Zip: 93	711		
Email: jab(bonadelle.c	om			=	Phone:	(559) 43				
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Check all that app	ely 🗀	Appl	icant 🔲 Owr	ner	\checkmark	Other	Consultan	t			
Name: Lori	en Smith		Sig	gnature):						-
Company/Organiza	ition: Ha	rbour 8	Associates	-							
	Clovis Ave.,			Cit	v.	Clovis		Zip: 9	3612		
	ens@harbour		ering com		у.	Phone:	(559) 32				
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Application Submittal Requirements for the checklist(s) of required documents.											
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Verification By: Application Fee:	- 5	<u> </u>		Date:							
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