

Call PD to discuss 3/27-sent email



CITY OF TURLOCK DEVELOPMENT SERVICES
PLANNING DIVISION
156 SOUTH BROADWAY, SUITE 120
TURLOCK, CA 95380-5456 (209)668-5640

UNIFORM APPLICATION FORM

(PLEASE PRINT OR TYPE)

Project Information

PROJECT ADDRESS: 10 East Main St., Turlock, CA 95380

ASSESSOR'S PARCEL NUMBER: 061 . 018 . 045 AREA OF PROPERTY (ACRES OR SQUARE FEET): 33,700

EXISTING ZONING: TUR DC

GENERAL PLAN DESIGNATION: Outside Event

DESCRIBE THE PROJECT REQUEST: Outside event on private commercial property for 5/5/23, beer and alcohol will be served with approval from ABC, it will be a ticketed event with a band and/or DJ, parking lot area to the north will be closed off just like it is for Christmas Tree lighting, event is planned from 2pm to Midnight, food will be served in the restaurant customers will be allowed to take the food out to the event area, we may even take orders outside in designated areas.

Applicant Information

NOTE: Information provided on this application is considered public record and will be released upon request by any member of the public.

APPLICANT Kris Klair PHONE NO. 209-678-5747 E-MAIL: krisklair@gmail.com

** Corporate partnerships must provide a list of principals. FAX NO. _____

ADDRESS OF APPLICANT: PO Box 3398, Turlock, CA 95381

CONTACT PERSON (If different than applicant): Kris Klair 209-678-5747 or Michael Tellez 209-985-8137

*The applicant will be considered the primary point for all contact, correspondence, and billing from the City unless other arrangements are made in writing.

[Redacted] Kris Klair
PRINT NAME DATE

This fee is to be a deposit towards full cost of processing application. Yes No Applicant's Initials

Property Owner Info

Kreative Enterprises, LLC

PROPERTY OWNER: Kris Klair- Managing Member PHONE NO. 209-678-5747 E-MAIL: krisklair@gmail.com

ADDRESS OF PROPERTY OWNER: PO Box 3398, Turlock, CA 95381

Consent of Owner: I declare that I am the owner of the herein described property and that I have familiarized myself with this completed application and give consent to the action requested.

[Redacted] Kris Klair 3/23/23
ER PRINT NAME DATE

Office Use Only

APPLICATION TYPE & NO.: TULP 23-01 DATE RECEIVED: 4/3/23

CASH OR CHECK NO. 1\$ 295⁰⁰ CHECKED BY: [Signature]

PC HEARING DATE: _____ CC HEARING DATE: _____

PLANNER'S NOTES: _____