



FILE # P13-00212

NAPA COUNTY
CONSERVATION, DEVELOPMENT & PLANNING DEPARTMENT
1195 Third Street, Suite 210, Napa, California, 94559 • (707) 253-4417

A Tradition of Stewardship
A Commitment to Service

APPLICATION FORM

FOR OFFICE USE ONLY

ZONING DISTRICT: _____ Date Submitted: 6.27.13
TYPE OF APPLICATION: Major Modification (in AIA SP) Date Published: _____
REQUEST: Springhill Suites room addition + Date Complete: _____
N.V. Gateway Master Plan

TO BE COMPLETED BY APPLICANT
(Please type or print legibly)

PROJECT NAME: **NAPA GATEWAY PLAZA MASTER PLAN AND 60-ROOM ADDITION TO THE SPRINGHILL SUITES**

Assessor's Parcel #: **057-200-015 to 019, 024 to 026** Existing Parcel Size: **12.93 +/- ACRES**

Site Address/Location: **LOTS 4-6 AIRPORT BOULEVARD, NAPA, CA 94558**
No. Street City State Zip

Property Owner's Name: **AIRPORT BOULEVARD REALTY I, LLC**

Mailing Address: **c/o WILLIAM MASTON ARCHITECT & ASSOC., 384 CASTRO ST, MOUNTAIN VIEW, CA 94041**
No. Street City State Zip

Telephone #: **(650) 968-7900** Fax #: **(650) 968-4913** E-Mail: **billm@mastonarchitect.com**

Applicant's Name: **AIRPORT BOULEVARD REALTY I, LLC**

Mailing Address: **c/o WILLIAM MASTON ARCHITECT & ASSOC., 384 Castro St., MOUNTAIN VIEW, CA 94041**
No. Street City State Zip

Telephone #: **(650) 968-7900** Fax #: **(650) 968-4913** E-Mail: **billm@mastonarchitect.com**

Status of Applicant's Interest in Property: **Managing Member**

Representative Name: **William Maston**

Mailing Address: **384 Castro Street Mountain View, CA 94041**
No. Street City State Zip

Telephone # **(650) 968-7900** Fax #: **(650) 968-4913** E-Mail: **billm@mastonarchitect.com**

I certify that all the information contained in this application, including but not limited to the information sheet, water supply/waste disposal information sheet, site plan, floor plan, building elevations, water supply/waste disposal system site plan and toxic materials list, is complete and accurate to the best of my knowledge. I hereby authorize such investigations including access to County Assessor's Records as are deemed necessary by the County Planning Division for preparation of reports related to this application, including the right of access to the property involved.

William J. Maston as managing member
Signature of Property Owner Date 6-22-2013
WILLIAM J. MASTON
Print Name

William Maston
Signature of Applicant Date 6-22-2013
Print Name

TO BE COMPLETED BY CONSERVATION, DEVELOPMENT AND PLANNING DEPARTMENT

*Application Fee Deposit: \$ 7166.79 Receipt No. 11322 Received by: JS Date: 6.28.13

*Total Fees will be based on actual time and materials

INFORMATION SHEET

I. USE

A. Description of Proposed Use (attached detailed description as necessary) (including where appropriate product/service provided): See attached description

B. Project Phases: [] one [X] two [] more than two (please specify): _____

C. Estimated Completion Date for Each Phase: Phase 1: Spring 2015 Phase 2: 2017

D. Actual Construction Time Required for Each Phase: less than 3 months
 More than 3 months

E. Related Necessary On- And Off-Site Concurrent or Subsequent Projects: N/A

F. Additional Licenses/Approval Required:

District: Fire Department, Sanitation District Regional: City of American Canyon
 State: _____ Federal: _____

II. BUILDINGS/ROADS/DRIVEWAY/LEACH FIELD, ETC.

A. Floor Area/Impervious area of Project (in square ft): 107,578sf
 Proposed total floor area on site: 196,195sf
 Total development area (building, impervious, leach field, driveway, etc.) _____
 New construction: 107,578sf

existing structures or portions thereof to be utilized: 88,617sf

existing structures or portions thereof to be moved: 0

B. Floor Area devoted to each separate use (in square ft):

Hotel: 107,960sf Storage/warehouse: _____ offices: 25,086sf
 sales: 29,527sf caves: _____ restaurant: 10,700sf
 septic/leach field: _____ roads/driveways: _____

C. Maximum Building Height: existing structures: 35'-0" new construction: 35'-0"

D. Type of New Construction (e.g., wood-frame): Metal frame and wood frame

E. Height of Crane necessary for construction of new buildings (airport environs): 40-ft max

F. Type of Exterior Night Lighting Proposed: Post luminaire (75W) & dual head pole mounted luminaire (350 W)

G. Viewshed Ordinance Applicable (See County Code Section 18.106): Yes No

H. Fire Resistivity (check one; If not checked, Fire Department will assume Type V – non rated):

Type I FR Type II 1 Hr Type II N (non-rated) Type III 1 Hr Type III N
 Type IV H.T. (Heavy Timber) Type V 1 Hr. Type V (non-rated)

(Reference Table 6 A of the 2001 California Building Code)

III. PARKING

	<u>Existing</u>	<u>Proposed</u>
A. Total On-Site Parking Spaces:	_____	<u>396 total site</u>
B. Customer Parking Spaces:	_____	<u>202 for hotel</u>
C. Employee Parking Spaces:	<u>15</u>	<u>17</u>
D. Loading Areas:	<u>2</u>	<u>2</u>

IV. TYPICAL OPERATION

	<u>Existing</u>	<u>Proposed</u>
A. Days of Operation:	<u>7</u>	<u>7</u>
B. Expected Hours of Operation:	<u>24</u>	<u>24</u>
C. Anticipated Number of Shifts:	<u>3</u>	<u>3</u>
D. Expected Number of Full-Time Employees/Shift:	<u>27</u>	<u>32</u>
E. Expected Number of Part-Time Employees/Shift:	<u>7</u>	<u>9</u>
F. Maximum Number of Visitors		
• busiest day:	<u>350</u>	<u>470</u>
• average/week:	<u>70</u>	<u>100</u>
G. Anticipated Number of Deliveries/Pickups		
• busiest day:	<u>1</u>	<u>2</u>
• average/week:	<u>6</u>	<u>7</u>

V. SUPPLEMENTAL INFORMATION FOR SELECTED USES

A. Commercial Meeting Facilities Food Serving Facilities		
• Breakfast service area seating capacity	<u>78</u>	
• bar seating capacity:	<u>7</u>	
• public meeting room seating capacity:	<u>117</u>	
• assembly capacity:	<u>221</u>	
B. Residential Care Facilities (6 or more residents) Day Care Centers		
• type of care:	<u>Existing</u> <u>N/A</u>	<u>Proposed</u>
• total number of guests/children:	<u> </u>	<u> </u>
• total number of bedrooms:	<u> </u>	<u> </u>
• distance to nearest existing/approved facility/center:	<u> </u>	<u> </u>

WATER SUPPLY/WASTE DISPOSAL INFORMATION SHEET

	<u>Domestic</u>	<u>Emergency</u>
I. WATER SUPPLY		
A. Proposed source of Water (eg., spring, well, mutual water company, city, district, etc.):	<u>Water company</u>	_____
B. Name of Proposed Water Supplier (if water company, city, district): annexation needed?	<u>City of American Canyon</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	_____ <input type="checkbox"/> Yes <input type="checkbox"/> No
C. Current Water Use (in gallons/day): average over 23 months= <u>6,684 gpd</u> Current water source:	<u>City of American Canyon</u>	_____ _____
D. Anticipated Future Water Demand (in gallons/day):	_____	_____
E. Water Availability (in gallons/minute):	_____	_____
F. Capacity of Water Storage System (gallons):	_____	_____
G. Nature of Storage Facility (eg., tank, reservoir, swimming pool, etc.):	_____	_____
F. Completed Phase I Analysis Sheet (Attached):	Provided by RSA & Associates	
II. LIQUID WASTE		
	<u>Domestic</u> (sewage)	<u>Other</u> (please specify)
A. Disposal Method (e.g., on-site septic system on-site ponds, community system, district, etc.):	<u>community system</u>	_____
B. Name of Disposal Agency (if sewage district, city, community system): annexation needed?	<u>Napa Sanitation District</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	_____ <input type="checkbox"/> Yes <input type="checkbox"/> No
C. Current Waste Flows (peak flow in gallons/day):	_____	_____
D. Anticipated Future Waste Flows (peak flows in gallons/day):	_____	_____
E. Future Waste Disposal Capacity (in gallons/day):	_____	_____
III. SOLID WASTE DISPOSAL		
A. Operational Wastes (on-site, landfill, garbage co., etc.):	_____	_____
B. Grading Spoils (on-site, landfill, construction, etc.):	_____	_____
IV. HAZARDOUS/TOXIC MATERIALS (Please fill out attached hazardous materials information sheet, attached)		
A. Disposal Method (on-site, landfill, garbage co., waste hauler, etc.):	<u>N/A</u>	_____
B. Name of Disposal Agency (if landfill, garbage co., private hauler, etc.):	<u>N/A</u>	_____

**NAPA COUNTY UNIFIED PROGRAM CONSOLIDATED FORM
FACILITY INFORMATION
BUSINESS ACTIVITIES**

Page 1 of

I. FACILITY IDENTIFICATION

FACILITY ID # (Agency Use Only)		EPA ID # (Hazardous Waste Only)	
BUSINESS NAME (Same as Facility Name of DBA-Doing Business As)	NAPA GATEWAY PLAZA		
BUSINESS SITE ADDRESS	101 GATEWAY ROAD EAST		
BUSINESS SITE CITY	NAPA	CA	ZIP CODE 94558
CONTACT NAME	WILLIAM MASTON	PHONE	650-968-1900 EXT. 12

II. ACTIVITIES DECLARATION

NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page.

Does your facility...

If Yes, please complete these pages of the UPCF....

*A

A. HAZARDOUS MATERIALS Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	4	HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION
B. REGULATED SUBSTANCES Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release prevention Program (CalARP)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	6	Coordinate with your local agency responsible for CalARP.
C. UNDERGROUND STORAGE TANKS (USTS) Own or operate underground storage tanks?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	5	UST FACILITY (formerly SWRCB Form A) UST TANK (two page per tank) (formerly Form D)
D. ABOVE GROUND PETROLEUM STORAGE Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	8	NO FORM REQUIRED TO CUPAs
E. HAZARDOUS WASTE Generate hazardous waste? Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.3)? Treat hazardous waste on-site? Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)? Consolidate hazardous waste generated at a remote site? Need to report the closure/removal of a tank that was classified as hazardous waste and closed on-site? Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (220 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste. Household Hazardous Waste (HHW) Collection site?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	9 10 11 12 13 14 15 16	EPA ID NUMBER - provide at the top of this page RECYCLABLE MATERIALS REPORT (two page attached) ON-SITE HAZARDOUS WASTE TREATMENT - FACILITY ON-SITE HAZARDOUS WASTE TREATMENT - UNIT (two page per unit) CERTIFICATION OF FINANCIAL ASSURANCE REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION HAZARDOUS WASTE TANK CLOSURE CERTIFICATION Obtain federal EPA ID Number, file Biennial Report (EPA Form 3700-13A/B), and satisfy requirements for RCRA Large Quantity Generator. See CUPA for required forms.

F. LOCAL REQUIREMENTS

(You may also be required to provide additional information by your CUPA or local agency.)

UPCF Rev. (12/2007)

* NOTE: POOL CHEMICALS ARE PROVIDED BY POOL MAINTENANCE COMPANY AND NOT STORED ON SITE.

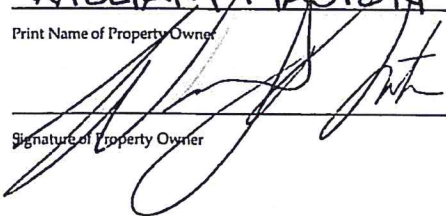
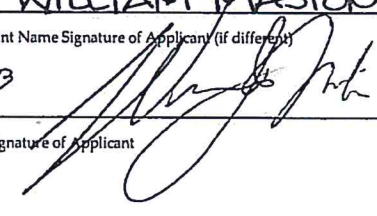
Certification and Indemnification

Applicant certifies that all the information contained in this application, including all information required in the Checklist of Required Application Materials and any supplemental submitted information including, but not limited to, the information sheet, water supply/waste disposal information sheet, site plan, floor plan, building elevations, water supply/waste disposal system site plan and toxic materials list, is complete and accurate to the best of his/her knowledge. Applicant and property owner hereby authorize such investigations including access to County Assessor's Records as are deemed necessary by the County Planning Division for preparation of reports related to this application, *including the right of access to the property involved.*

Pursuant to Chapter 1.30 of the Napa County Code, as part of the application for a discretionary land use project approval for the project identified below, Applicant agrees to defend, indemnify, release and hold harmless Napa County, its agents, officers, attorneys, employees, departments, boards and commissions (hereafter collectively "County") from any claim, action or proceeding (hereafter collectively "proceeding") brought against County, the purpose of which is to attack, set aside, void or annul the discretionary project approval of the County, or an action relating to this project required by any such proceeding to be taken to comply with the California Environmental Quality Act by County, or both. This indemnification shall include, but not be limited to damages awarded against the County, if any, and cost of suit, attorneys' fees, and other liabilities and expenses incurred in connection with such proceeding that relate to this discretionary approval or an action related to this project taken to comply with CEQA whether incurred by the Applicant, the County, and/or the parties initiating or bringing such proceeding. Applicant further agrees to indemnify the County for all of County's costs, attorneys' fees, and damages, which the County incurs in enforcing this indemnification agreement.

Applicant further agrees, as a condition of project approval, to defend, indemnify and hold harmless the County for all costs incurred in additional investigation of or study of, or for supplementing, redrafting, revising, or amending any document (such as an EIR, negative declaration, specific plan, or general plan amendment) if made necessary by said proceeding and if the Applicant desires to pursue securing approvals which are conditioned on the approval of such documents.

In the event any such proceeding is brought, County shall promptly notify the Applicant of the proceeding, and County shall cooperate fully in the defense. If County fails to promptly notify the Applicant of the proceeding, or if County fails to cooperate fully in the defense, the Applicant shall not thereafter be responsible to defend, indemnify, or hold harmless the County. The County shall retain the right to participate in the defense of the proceeding if it bears its own attorneys' fees and costs, and defends the action in good faith. The Applicant shall not be required to pay or perform any settlement unless the settlement is approved by the Applicant.

<u>WILLIAM MASTON</u> Print Name of Property Owner	<u>MANAGING MEMBER</u> Print Name Signature of Applicant (if different)
	
Date	Date
Nov 1, 2013	Nov 1, 2013