

“E”

Use Permit Application Packet



A Tradition of Stewardship  
A Commitment to Service

file No P17-00140-uP

Napa County  
**Planning, Building, and Environmental Services**  
1195 Third Street, Suite 210, Napa, California, 94559 phone (707) 253-4417  
web www.countyofnapa.org email planning@countyofnapa.org

**Use Permit Application**

To be completed by Planning staff...

Application Type: Use Permit  
Date Submitted: 4/6/2017 Resubmittal(s): \_\_\_\_\_ Date Complete: \_\_\_\_\_  
Request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Application Fee Deposit: \$ 5000.00 Receipt No. \_\_\_\_\_ Received by: TA Date: 4/6/2017  
\*Total Fees will be based on actual time and materials

To be completed by applicant...

Project Name: Blossom Creek Farm  
Assessor's Parcel No: 017-110-052 Existing Parcel Size: 7+/- ac.  
Site Address/Location: 3547 State Hwy 128 Calistoga CA 94515  
No. Street City State Zip

Primary Contact:  Owner  Applicant  Representative (attorney, engineer, consulting planner, etc.)  
Property Owner: Blossom Creek LLC (Robert Fish, General Manager)  
Mailing Address: 3417 St. Helena Hwy N St. Helena CA 94574  
No. Street City State Zip  
Telephone No: 707 260 4694 E-Mail: vbfish@msn.com

Applicant (if other than property owner): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
No. Street City State Zip  
Telephone No: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-Mail: \_\_\_\_\_

Representative (if applicable): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
No. Street City State Zip  
Telephone No: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-Mail: \_\_\_\_\_

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## Certification and Indemnification

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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.

# Blossom Creek LLC

Print Name of Property Owner

*Leant H. Lee*      *4/6/17*

Signature of Property Owner

Date

Print Name Signature of Applicant (if different)

Signature of Applicant

Date

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## Use Permit Information Sheet

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### Use

Narrative description of the proposed use (please attach additional sheets as necessary):

Blossom Creek Farm is an existing project consisting of a barn, covered arena, round pen, residence and garage.

The property initially housed only horses owned by the property owner, however, as of early 2015 it was leased to a horse trainer who now operates a boarding and training facility for 14 horses.

Current use: Four horses are boarded and approximately 25 riding lessons are conducted each week for owners of the boarded horses and for other interested individuals.

(continued on attached page)

What, if any, additional licenses or approvals will be required to allow the use?

District \_\_\_\_\_ Regional \_\_\_\_\_

State \_\_\_\_\_ Federal \_\_\_\_\_

### Improvements

Narrative description of the proposed on-site and off-site improvements (please attach additional sheets as necessary):

None. All improvements are existing.

## **Use** continued

During the summer months a "Horse Camp" program is offered to teach children the proper care of horses and to instill the basics of good horsemanship. The camp runs for 3 weeks with approximately 8 children attending each weekly session. The camp operates from 9am until 3pm each day Monday thru Friday. The remaining 10 horses on site are owned by the applicant and the horse trainer leasing the property.

Future use: There are no changes proposed for the use of the property in the future, however, the ownership of the horses on site can change from time to time with potentially up to 12 of the 14 horse capacity being owned by boarders. In that case the number of visits to the property would likely increase somewhat as shown in the estimated traffic data provided in the application.

**Improvements, cont.**

Total on-site parking spaces:	<u>8</u> existing	<u>0</u> proposed
Loading areas:	<u>n/a</u> existing	<u>n/a</u> proposed

Fire Resistivity (check one; if not checked, Fire Marshal 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)  
*(for reference, please see the latest version of the California Building Code)*

Is the project located in an Urban/Wildland Interface area?     Yes     No

Total land area to be disturbed by project (include structures, roads, septic areas, landscaping, etc): \_\_\_\_\_ acres

**Employment and Hours of Operation**

Days of operation:	<u>Mon - Sat</u> existing	<u>Mon - Sat</u> proposed
Hours of operation:	<u>8am-6pm</u> existing	<u>8am-6pm</u> proposed
Anticipated number of employee shifts:	<u>n/a</u> existing	<u>1/day</u> proposed
Anticipated shift hours:	<u>n/a</u> existing	<u>8am-5pm</u> proposed

Maximum Number of on-site employees:

- 10 or fewer   
 11-24   
 25 or greater (specify number) \_\_\_\_\_

**No current employees; maximum of 1-2 in the future**

# Water Supply/ Waste Disposal Information Sheet

## Water Supply

Please attach completed Phase I Analysis sheet.

Proposed source of water  
(e.g., spring, well, mutual water company, city, district, etc.):

Name of proposed water supplier  
(if water company, city, district):

Is annexation needed?

Current water use:

Current water source:

Anticipated future water demand:

Water availability (in gallons/minute):

Capacity of water storage system:

Type of emergency water storage facility if applicable  
(e.g., tank, reservoir, swimming pool, etc.):

Domestic

Emergency

See attached study

Yes  No

Yes  No

\_\_\_\_\_ gallons per day (gal/d)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ gal/d

\_\_\_\_\_ gal/d

\_\_\_\_\_ gal/m

\_\_\_\_\_ gal/m

\_\_\_\_\_ gal

\_\_\_\_\_ gal

\_\_\_\_\_

## Liquid Waste

Please attach Septic Feasibility Report

Type of waste:

Disposal method (e.g., on-site septic system, on-site ponds,  
community system, district, etc.):

Name of disposal agency  
(if sewage district, city, community system):

Is annexation needed?

Current waste flows (peak flow):

Anticipated future waste flows (peak flow):

Future waste disposal design capacity:

Domestic

Other

sewage

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Yes  No

Yes  No

\_\_\_\_\_ gal/d

\_\_\_\_\_ gal/d

\_\_\_\_\_ gal/d

\_\_\_\_\_ gal/d

\_\_\_\_\_ gal/d

\_\_\_\_\_ gal/d

## Solid Waste and Recycling Storage and Disposal

Please include location and size of solid waste and recycling storage area on site plans in accordance with the guidelines available at [www.countyofnapa.org/dem](http://www.countyofnapa.org/dem).

## Hazardous and/or Toxic Materials

If your facility generates hazardous waste or stores hazardous materials above threshold planning quantities (55 gallons liquid, 500 pounds solid or 200 cubic feet of compressed gas) then a hazardous materials business plan and/or a hazardous waste generator permit will be required.

## Grading Spoils Disposal

Where will grading spoils be disposed of?  
(e.g. on-site, landfill, etc. If off-site, please indicate where off-site): \_\_\_\_\_

**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 or DBA-Doing Business As) Blossom Creek Farm													
BUSINESS SITE ADDRESS 3457 State Hwy 128													
BUSINESS SITE CITY Calistoga										104	CA	ZIP CODE	105
CONTACT NAME Bob Fish										106	PHONE	707.260.4694	107

**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....
<b>A. HAZARDOUS MATERIALS</b> 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>B. REGULATED SUBSTANCES</b> 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 type="checkbox"/> NO 4a Coordinate with your local agency responsible for CalARP.
<b>C. UNDERGROUND STORAGE TANKS (USTs)</b> Own or operate underground storage tanks?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 5 UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form II)
<b>D. ABOVE GROUND PETROLEUM STORAGE</b> 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 type="checkbox"/> NO 8 NO FORM REQUIRED TO CUPAs
<b>E. HAZARDOUS WASTE</b> Generate hazardous waste?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 9 EPA ID NUMBER - provide at the top of this page
Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?	<input type="checkbox"/> YES <input type="checkbox"/> NO 10 RECYCLABLE MATERIALS REPORT (one per recycler)
Treat hazardous waste on-site?	<input type="checkbox"/> YES <input type="checkbox"/> NO 11 ON-SITE HAZARDOUS WASTE TREATMENT - FACILITY ON-SITE HAZARDOUS WASTE TREATMENT - UNIT (one page per unit)
Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?	<input type="checkbox"/> YES <input type="checkbox"/> NO 12 CERTIFICATION OF FINANCIAL ASSURANCE
Consolidate hazardous waste generated at a remote site?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 13 REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION
Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned on-site?	<input type="checkbox"/> YES <input type="checkbox"/> NO 14 HAZARDOUS WASTE TANK CLOSURE CERTIFICATION
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.	<input type="checkbox"/> YES <input type="checkbox"/> NO 14a Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.
Household Hazardous Waste (HHW) Collection site?	<input type="checkbox"/> YES <input type="checkbox"/> NO 14b See CUPA for required forms.

<b>F. LOCAL REQUIREMENTS</b> (You may also be required to provide additional information by your CUPA or local agency.)	15 UPCF Rev. (12/2007)
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# Sakai General Engineering

P.O. box 115 Calistoga, CA. 94515  
707-942-0578 sakaigeneralengineering@gmail.com

## Septic inspection report

Date 7/20/2017

Site address 3547 Ca. 128  
Customer name Bob Fish

### Septic Tank

1. Size tank ..... 1200
2. Tank Type..... Concrete
3. Baffle..... Yes
4. Risers..... Yes
5. Lids..... Yes
6. Water tight.....At flow line ..... Yes
7. Sanitary Tee..... Yes
8. Effluent Filter ..... Yes
9. Root intrusion..... No
10. Cover over tank ..... 12" min.

Set backs....Property Line ( 50' + ) Pool ( N/A ) Footings ( 50' + ) Well ( 100' + )

#### Condition of septic tank

This tank is in        **GOOD**        condition

### Pump Tank

1. Size tank ..... 810
2. Tank Type..... Concrete
3. Risers..... Yes
4. Lids..... Yes
5. Water tight.....At flow line ..... Yes
6. Root intrusion..... No
7. Cover over tank ..... 12" min.

Set backs....Property Line ( 50' + ) Pool ( N/A ) Footings ( 50' + ) Well ( 100' + )

#### Condition of septic tank

This tank is in        **GOOD**        condition

### Control Panel & pumps

1. Alarm test ..... Good
2. Pump test ..... Good
3. Floats ..... Good
4. Dose counter ..... Good

#### Transmission line from house to tanks

1. Type ..... ABS
2. Length ..... 50'
3. Size ..... 4"
4. Clean outs ..... Yes

#### Condition of transmission line

This line is in        **GOOD**        condition

**Transmission Line to leach field**

- 1. Type..... PVC
- 2. Length..... 20'
- 3. Size..... 2"

**Condition of transmission line**

This line is in        **GOOD**        condition

**Leach Field**

- 1. Number of lines..... 5
- 2. Length of lines..... 90'
- 3. Total lineal feet..... 450
- 4. Size of pipe..... 4" SDR35
- 5. Spacing of lines..... 7'
- 6. Gravel under pipe..... 18"
- 7. Dirt cover..... 12"
- 8. Trench width..... 24"
- 9. D Box..... Yes
- 10. Filter fabric over gravel..... Yes
- 11. Total side wall .....1800 Sq. Ft.
- 12. Set backs....Property Line ( 40' ) Pool ( N/a ) Footings ( 40' ) Well ( 100' + )

**Condition of leach field**

The leach field is in        **GOOD**        condition

**Recommendations**

-----**This system is in good condition**-----  
-----  
-----  
-----  
-----  
-----  
-----  
-----  
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*Over all this system is in        **GOOD**        condition*

*If you have any questions please call us at 707-942-5555  
[sakaigeneralengineering@gmail.com](mailto:sakaigeneralengineering@gmail.com)*

Blossom Creek Farm Horse Facility  
P17-00140; 3547 State Highway 128

### **Typical Weekly Lesson Schedule**

#### Monday – Friday

10am – owner lesson

11am – owner lesson

4pm – student lesson

5pm – student lesson

4 lessons per day x 5 days = 20 weekday lessons per week

#### Saturday

9am – student lesson

10am – owner lesson

11am – owner lesson

1pm – student lesson

2pm – student lesson

3pm - group student lesson\*

6 weekend lessons per week

\*afternoon students carpool

Blossom Creek Farm Horse Facility  
 P17-00140; 3547 State Highway 128

**Trip Generation Calculations**

Assumptions

1. Current operation = 4 boarded horses; proposed operation = 12 boarded horses.
2. Horse owners visit their horses once per week in addition to lesson visits.
3. Weekday lessons = 4 per day
4. Weekend lessons = 6 per day on Saturday; No lessons on Sunday.
5. Current operation = 1 employee; proposed operation = 2 employees
6. No veterinary, hay delivery or farrier visits are scheduled on weekends

**Weekday Operation - numbers given as (x, y), x is current y is proposed**

$$(\# \text{ number of boarded horses}) (4, 12) \times \frac{1 \text{ visit to each horse}}{\text{Every 7 days}} \times \frac{2 \text{ trips}}{\text{visit}} = (1.1, 3.4) \text{ trips/day}$$

$$(\# \text{ of lessons/day}) (4, 5) \quad \times \quad \frac{1 \text{ owner/student}}{\text{lesson}} \quad \times \quad \frac{2 \text{ trips}}{\text{visit}} = (8, 10) \text{ trips/day}$$

$$(\# \text{ of employees/day}) (1, 2) \quad \times \quad \frac{2 \text{ trips}}{\text{visit}} = (2, 4) \text{ trips/day}$$

$$\text{Veterinary visits, hay delivery, emergency visits, farriers etc.} = .1 \text{ trips/day}$$

$$\underline{\text{Total trips per weekday}} = \underline{(11.2, 17.5) \text{ trips/day}}$$

**Weekend Operation - numbers given as (x, y), x is current y is proposed**

$$(\# \text{ of lessons/day}) (6, 6) \quad \times \quad \frac{1 \text{ owner/student}}{\text{lesson}} \quad \times \quad \frac{.75 \text{ cars}}{\text{student}^*} \quad \times \quad \frac{2 \text{ trips}}{\text{visit}} = (9, 9) \text{ trips/day}^*$$

$$(\# \text{ of employees/day}) (0, 1) \quad \times \quad \frac{2 \text{ trips}}{\text{visit}} = (0, 2) \text{ trips/day}$$

$$\underline{\text{Total trips per weekend day}} = \underline{(9, 11) \text{ trips/day}}$$

\*one group lesson is given on Saturday, so this is a reduction for carpooling

Google Maps 3547 CA-128

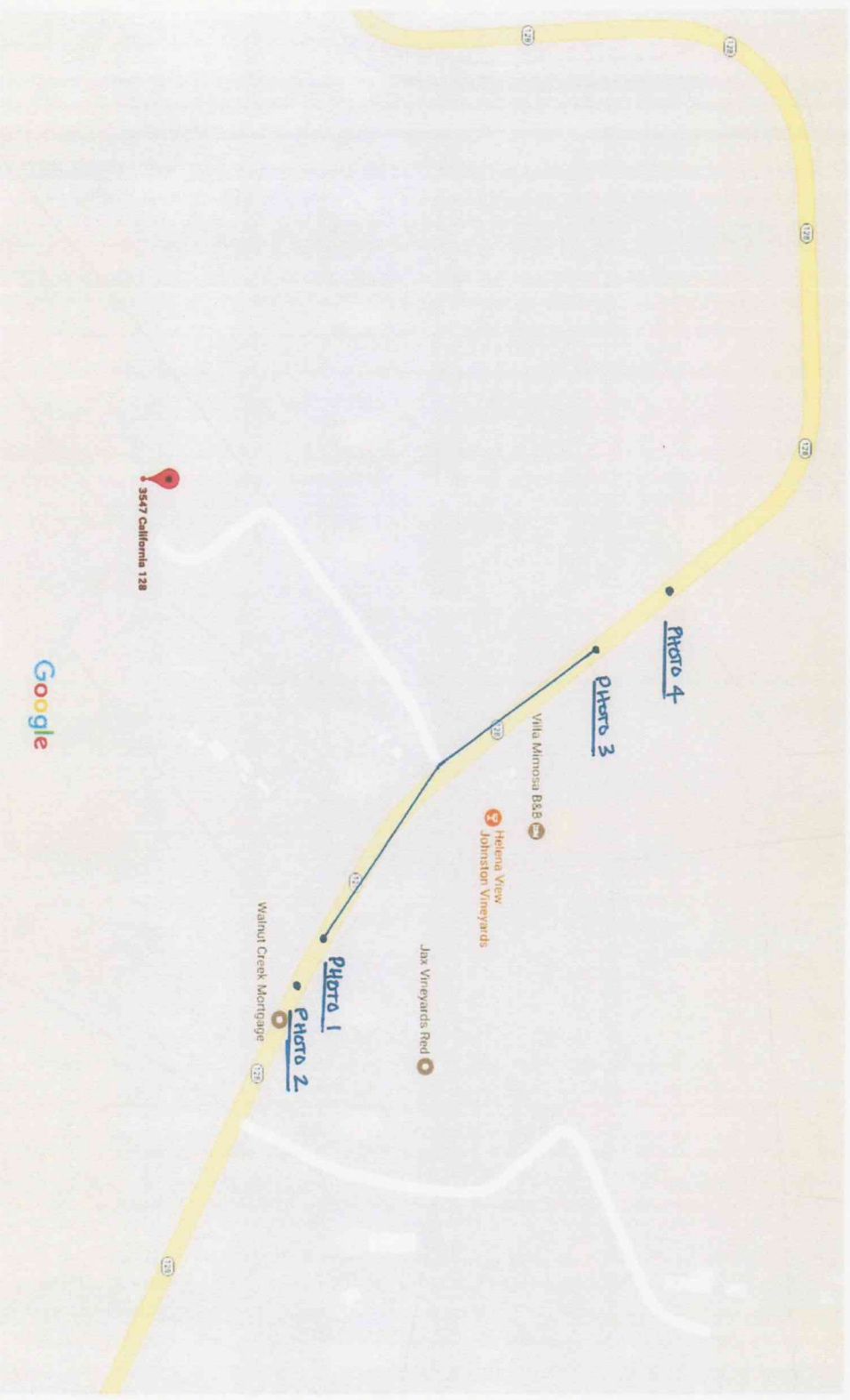




Photo 1 - Looking south from centerline of driveway - cone & flag placed 500' away



Photo 2 - Looking south - maximum distance flag can be seen is 602'



Photo 3 – Looking north – cone & flag placed 500' away



Photo 4 – Looking north – maximum distance cone & flag can be seen is over 725'