



## ePlan Submittal Checklist

This submittal checklist form is required to be the first page of the Application (APP) file. It should not be used as the sole source of submittal information. To successfully prepare submittals, please see the [ePlan User Guide](#).

**Complete parts 1 through 3 prior to contacting the Planning Department to initiate an ePlan building permit application or a change order application to a building permit that was issued using ePlan.**

The preparer is legally responsible for signatures whether wet signed, typewritten, digital, or otherwise.

### Part 1: Notice to Building Permit Applicant

1. For information regarding your Building Permit Application, you may e-mail the Building Counter of the Planning Department at: [bdinfo@co.santa-cruz.ca.us](mailto:bdinfo@co.santa-cruz.ca.us), or you may call the Building Information Line at 831- 454-2260 - Please visit our website for hours of operation.
2. When review of your Building Permit Application has been completed, you will be notified of the results: either that your application has been approved or, if any reviewer has not approved your application, their comments will be forwarded to you. Please see the information below relating to appeals.
3. Your application fees are not refundable, except as specified in the Planning Department Fee Schedule.
4. You must advise residents of the subject property that Planning Department staff may be visiting the site. The site must be clearly marked/staked for staff inspection. Incomplete directions or markings will delay the review of the project.
5. If you have begun any activity requiring County review or approval without first obtaining a permit, you will be charged for staff time incurred to investigate the violation and costs for staff time that accrue until the violation is resolved. Authority for these charges is found in Chapter 1.12 of the Santa Cruz County Code.
6. Actions by County staff regarding your Building Permit Application may be appealed. For guidance on how to file an appeal, contact the Building Counter of the Planning Department or refer to the brochure on our Web site at: <http://www.sccoplanning.com/PlanningHome/BuildingSafety/ApplicantInformation/AppealsforBuildingPermitApplications.aspx>
7. Extension Policy: You have until the expiration date of this application to resolve all deficiencies and obtain your permit. Per County Code, the expiration date is two years after the application date or six months from the date the application is approved whichever comes first. Extensions of the expiration date are rarely granted and only in extreme cases where extenuating circumstances can be shown.

The undersigned applicant hereby authorizes the filing of this application, and authorizes staff to visit the subject property. I understand that staff may visit the property both during the review process and following the issuance of the permit. I certify to the best of my ability that the above and attached information is true and correct, and that I have read and understood the above information.

#### Applicant Signature

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Applicants must indicate which option they will use to contact the Planning Department.

### Part 2: Building Permit Application or Change Order Application

Info & Weblinks

After uploading the *Part 3: Submittal Files*, the applicant must contact the Planning Department to initiate the application using one of the options below. Once the application is created, payments can be made at the Planning Department or [online](#).

<input type="checkbox"/>	Option 1: Applicant will schedule an appointment at the Planning Department.	Call: 831-454-3252
<input type="checkbox"/>	Option 2: Applicant will click the project <i>Send New Permit Notification</i> button and a technician will contact you upon review of the submittal.	User Guide: Part 4 Project File Uploads



## ePlan Submittal Checklist

Mark all included items. [•] Bullet items are required.

### Part 3: Submittal Files

Info & Weblinks

Required submittals include the Application (APP) file; along with, the Plans (PLN) and/or the Supplemental (SUP) files.

#### • Application (APP)

The Application (APP) file must include the applicable Intake Items to initiate the permit. After approval by all agencies, the approval letter will identify the *Final Items*. Prior to permit issuance, revise the Application (APP) file to include *Intake Items + Final Items*.

#### Intake Items

<input checked="" type="checkbox"/>	Documents/Forms are complete, bookmarked, flattened, and ready for approval	User Guide: Part 4: Project File Types
<input checked="" type="checkbox"/>	ePlan Submittal Checklist – PLG230	Use as first page of Application (APP) file
<input checked="" type="checkbox"/>	Building Permit Application – PLG200 <u>or</u> Construction Change Documents – PLG205	Form: <a href="#">PLG200</a> or <a href="#">PLG205</a>
<input checked="" type="checkbox"/>	Owner-Agent Authorization – PLG210	Form: <a href="#">PLG210</a>
<input type="checkbox"/>	Zoning Review/Prescreen (Completed by Zoning Counter Staff)	Zoning Counter: <a href="#">Hours &amp; Location</a>
<input type="checkbox"/>	Parcels with Septic: Environmental Health clearance	Room 312: 8:00-9:30am, <a href="#">website</a>
<input type="checkbox"/>	Non-Public water: Environmental Health approval	Room 312: 8:00-9:30am, <a href="#">website</a>
<input type="checkbox"/>	Public water: Conditional Will Serve Letter	Provided by public water source
<input type="checkbox"/>	Discretionary Permit No: _____	Provided by Zoning
<input type="checkbox"/>	Other(s)	

#### Final Items (Required prior to permit issuance: *Intake Items + Final Items*)

<input checked="" type="checkbox"/>	Building Permit Application – PLG200 <u>or</u> Construction Change Documents – PLG205	Revise as needed
<input type="checkbox"/>	Owner-Builders Acknowledgement – PLG220	Form: <a href="#">PLG220</a>
<input type="checkbox"/>	Fire Department Payment Receipt	Provided by fire department
<input type="checkbox"/>	School Certificate of Payment	Provided by school district
<input type="checkbox"/>	Public water: Unconditional Will Serve Letter	Provided by public water source
<input type="checkbox"/>	Other(s)	

#### Plans (PLN)

Info & Weblinks

<input checked="" type="checkbox"/>	Stamps & signatures of licensed architects and/or engineers are embedded onto all sheets. (Digital signatures are not allowed).	User Guide: Part 3: ePlan Standards
<input checked="" type="checkbox"/>	Plans are combined into a single unlocked PDF and oriented for readability.	User Guide: Part 4: Project File Types
<input checked="" type="checkbox"/>	Bookmark each sheet with numbers/names matching the sheet index.	User Guide: Part 3: ePlan Standards
<input checked="" type="checkbox"/>	The PDF is flattened to remove layers.	User Guide: Part 3: ePlan Standards

#### Supplemental (SUP)

Info & Weblinks

<input checked="" type="checkbox"/>	Supplemental Documents Index – PLG235 (Use as first page)	Form: <a href="#">PLG235</a> User Guide: Part 4
<input checked="" type="checkbox"/>	Stamps & signatures of licensed architects and/or engineers are embedded onto the front of each document type. (Digital signatures are not allowed).	User Guide: Part 3: ePlan Standards
<input checked="" type="checkbox"/>	Documents are combined into a single unlocked PDF and oriented for readability.	User Guide: Part 4: Project File Types
<input checked="" type="checkbox"/>	Bookmark and name each document and their key index sections.	User Guide: Part 3: ePlan Standards
<input checked="" type="checkbox"/>	The PDF is flattened to remove layers.	User Guide: Part 3: ePlan Standards



**Building Permit Application Form**

This information is required pursuant to Section 19825 of the Health and Safety Code of the State of California.

**Part 1: Project Information & Description** Permit #: \_\_\_\_\_

APN: \_\_\_\_\_ Date: 4/23/2019  
 Project Address: \_\_\_\_\_ Process:  Paper  ePlan

Property Owner: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Licensed Design Professional (Architect or Engineer in charge of the project)**  
 Name: \_\_\_\_\_ Lic #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Email: \_\_\_\_\_  
 Phone: \_\_\_\_\_

**Licensed Contractor**  
 Name: \_\_\_\_\_ Lic #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Email: \_\_\_\_\_  
 Phone: \_\_\_\_\_

**Project Contact**  
 Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Permit Holder:  Property Owner  Licensed Contractor  TBD prior to Permit Issuance (plan review request only)

<input type="checkbox"/> Mechanical	Ret Wall (sf): _____	<del>Tenant Improvement</del> (sf): _____	Comm. Shell: <u>6,277 S.F.</u>
<input type="checkbox"/> Solar	Deck (sf/hgt): _____	Remodel (sf): _____	
<input type="checkbox"/> EV System	Trellis (sf): _____	Addition (sf): _____	
<input type="checkbox"/> Electrical	Door/Win (#): _____	Single Family Dwelling (sf): _____	
<input type="checkbox"/> Plumbing	Siding (sf): _____	Accessory Dwelling – ADU (sf): _____	
<input type="checkbox"/> Pool/Spa/Tub	Sheetrock (sf): _____	Multi-Family Dwelling (sf/bldg): <u>17,750 S.F.</u>	
<input type="checkbox"/> Sign	Reroof (#sqr): _____	Garage (sf): <u>4,032 S.F.</u>	
<input type="checkbox"/> Other	Demolition (#): _____	Accessory Building (sf): _____	

**Description**

NEW THREE STORY MIXED USE BUILDING COMPOSED OF 3 BUILDINGS CONNECTED BY A 2ND FLOOR LANDINGS SHARED BY RESIDENTIAL UNITS IN EACH BUILDING. FOR PURPOSES OF THE BUILDING CODE THE THREE BUILDINGS SHOULD BE CONSIDERED ONE. EACH BUILDING HAS A COMMERCIAL SPACE AT THE FIRST FLOOR SET UP TO BE DIVIDED FOR 2 FUTURE TENANTS, AS WELL AS 4 RESIDENTIAL GARAGES FOR THE RESIDENTIAL UNITS ABOVE. THE 3RD STORY OF THE BUILDING IS ACCESS EXCLUSIVELY FROM WITHIN EACH INDIVIDUAL DWELLING UNIT.



# Building Permit Application Form

The preparer is legally responsible for signatures whether wet signed, typewritten, digital, or otherwise.

**Part 2: Identify who will Perform the Work**

Permit #: \_\_\_\_\_

This permit is to be issued in the name of the Licensed Contractor or the Property Owner as the permit holder of record who will be responsible and liable for the construction.

Permit Holder: [Redacted] Email: [Redacted]  
Address: [Redacted] Phone: [Redacted]

Complete one of the following: 2A or 2B

**2A - California Licensed Contractor's Declaration**

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, my license is in full force and effect, and I have the authority of the property owner to obtain this permit. Please be aware that the status of your license will be verified by County staff.

Signature: [Redacted] Lic #: [Redacted]  
Date: [Redacted] Class: [Redacted]

**2B - Owner-Builder's Declaration**

I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s)

*Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9, commencing with Section 7000, of Division 3 of the Business and Professions Code) or that he or she is exempt from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).*

I, as owner of the property, or my employees with wages as their sole compensation, will do  all of or  portions of the work, and the structure is not intended or offered for sale.

*Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who, through employees' or personal effort, builds or improves the property, provided that the improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that it was not built or improved for the purpose of sale.*

I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project  
*Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed Contractor pursuant to the Contractors' State License Law.*

I am exempt from licensure under the Contractors' State License Law for the following reason:

\_\_\_\_\_

By my signature below, I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following Web site: <http://www.leginfo.ca.gov/calaw.html>.

**Property Owner or Authorized Agent Signature**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



### Building Permit Application Form

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**Part 3: Identify Worker's Compensation Coverage & Lending Agency**

Permit #: \_\_\_\_\_

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued.(3097 Civil Code)

Lender's Name: TBD

Email: TBD

Address: TBD

Phone: TBD

*Identify Worker's Compensation Coverage*

**Warning:** Failure to secure workers' compensation coverage is unlawful, and shall subject an employer to criminal penalties and civil fines up to one hundred thousand dollars (\$100,000). In addition to the cost of compensation, damages as provided for in Section 3706 of the Labor Code, interest, and attorney's fees.

I hereby affirm under penalty of perjury **one** of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

Policy/Cert No.: \_\_\_\_\_

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier: [REDACTED]

Email: [REDACTED]

Agent: [REDACTED]

Phone: [REDACTED]

Policy No.: [REDACTED]

Exp Date: [REDACTED]

I certify that, in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

**Property Owner, Licensed Contractor or Authorized Agent Signature**

Signature: [REDACTED]

Date: [REDACTED]

**Part 4: Declaration by Building Permit Applicant**

By my signature below, I certify to each of the following:

I am a  California Licensed Contractor, or  the Property Owner\*, or  authorized to act on the property owner's behalf\*\*.

The information submitted with this application is true and accurate to the best of my knowledge and belief. I understand that the County of Santa Cruz is not responsible for inaccuracies in information presented, and that inaccuracies may result in the revocation of building permits as determined by the Planning Director. I understand that the County of Santa Cruz has attempted to request everything necessary for an accurate and complete review of my application; however, after County staff has accepted the application and reviewed it further, it may be necessary to request additional information, clarification, and/or plan revisions.

I have read this construction permit application and the information I have provided is correct. I agree to comply with all applicable County ordinances and state laws relating to building construction. I authorize representatives the County to enter the above-identified property for inspection purposes.

**California Licensed Contractor, Property Owner\* or Authorized Agent\*\* Signature**

Signature: [REDACTED]

Date: [REDACTED]

\* Submit form: Owner-Builder Acknowledgement – [PLG220](#)

\*\* Submit form: Owner-Agent Authorization – [PLG210](#)



## Owner-Builder Acknowledgement

The preparer is legally responsible for signatures whether wet signed, typewritten, digital, or otherwise.

Form for Owner-Builders Applying for Construction Permits

Permit #: \_\_\_\_\_

Attention Property Owner:

An application for a building permit has been submitted in your name listing yourself as the builder of the property improvements specified at: \_\_\_\_\_.

We are providing you with an Owner-Builder Acknowledgment and Information Verification Form to make you aware of your responsibilities and possible risk you may incur by having this permit issued in your name.

**We will not issue a building permit until you have read, initialed your understanding of each provision, signed, and returned this form to the County of Santa Cruz Planning Department.**

An agent of the owner cannot execute this notice. It is required to be completed by the property owner.

### Owner's Acknowledgement and Verification of Information

DIRECTIONS: Read and initial each statement below to signify you understand and/or verify this information.

1. I understand a frequent practice of unlicensed persons is to have the property owner obtain an "Owner-Builder" building permit that erroneously implies that the property owner is providing his or her own labor and material personally. I, as an Owner-Builder, may be held liable and subject to serious financial risk for any injuries sustained by an unlicensed person and his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an Owner-Builder and am aware of the limits of my insurance coverage for injuries to workers on my property.
2. I understand building permits are not required to be signed by property owners unless they are responsible for the construction and are not hiring a licensed Contractor to assume this responsibility.
3. I understand as an "Owner-Builder" I am the responsible party of record on the permit. I understand that I may protect myself from potential financial risk by hiring a licensed Contractor and having the permit filed in his or her name instead of my own.
4. I understand Contractors are required by law to be licensed and bonded in California and to list their license numbers on permits and contracts.
5. I understand if I employ or otherwise engage any persons, other than California licensed Contractors, and the total value of my construction is at least five hundred dollars (\$500), including labor and materials, I may be considered an "employer" under state and federal law.
6. I understand if I am considered an "employer" under state and federal law, I must register with the state and federal government, withhold payroll taxes, provide workers' compensation disability insurance, and contribute to unemployment compensation for each "employee." I also understand my failure to abide by these laws may subject me to serious financial risk.
7. I understand under California Contractors' State License Law, an Owner-Builder who builds single-family residential structures cannot legally build them with the intent to offer them for sale, unless all work is performed by licensed subcontractors and the number of structures does not exceed four within any calendar year, or all of the work is performed under contract with a licensed general building Contractor.
8. I understand as an Owner-Builder if I sell the property for which this permit is issued, I may be held liable for any financial or personal injuries sustained by any subsequent owner(s) that result from any latent construction defects in the workmanship or materials.
9. I understand I may obtain more information regarding my obligations as an "employer" from the Internal Revenue Service, the United States Small Business Administration, the California Department of Benefit Payments, and the California Division of Industrial Accidents. I also understand I may contact the California Contractors' State License Board (CSLB) at 1-800-321-CSLB (2752) or www.cslb.ca.gov for more information about licensed contractors.



### Owner-Builder Acknowledgement

- 10. I am aware of and consent to an Owner-Builder building permit applied for in my name, and understand that I am the party legally and financially responsible for proposed construction activity at the following address:  
\_\_\_\_\_
- 11. I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern Owner-Builders as well as employers.
- 12. I agree to notify the County of Santa Cruz, Planning Department immediately of any additions, deletions, or changes to any of the information I have provided on this form. Licensed contractors are regulated by laws designed to protect the public. If you contract with someone who does not have a license, the Contractors' State License Board may be unable to assist you with any financial loss you may sustain as a result of a complaint. Your only remedy against unlicensed Contractors may be in civil court. It is also important for you to understand that if an unlicensed Contractor or employee of that individual or firm is injured while working on your property, you may be held liable for damages. If you obtain a permit as Owner-Builder and wish to hire Contractors, you will be responsible for verifying whether or not those Contractors are properly licensed and the status of their workers' compensation insurance coverage.

Before a building permit can be issued, this form must be completed and signed by the property owner and returned to the County of Santa Cruz, Planning Department.

Note: A copy of the property owner's driver's license, form notarization, or other verification acceptable to the agency is required to be presented when the permit is issued to verify the property owner's signature.

**Property Owner Signature**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

DO NOT DUPLICATE

February 19, 2014

[REDACTED]

**SUBJECT: Unconditional Water Service Application (Aptos Village Project) Tier I Single Family Residential; Tier II Multi-Family Residential; Commercial Subdivision Development at [REDACTED]**

Dear [REDACTED]

In response to the subject application, the Board of Directors of the Soquel Creek Water District (SqCWD) at their regular meeting of February 18, 2014 voted to grant your Commercial development project an Unconditional Will Serve Letter based upon your acceptance of an Infrastructure Agreement, compliance with SqCWD submittal requirements and payment of all fees as specified in Exhibit A of the Project's Subdivision Agreement.

Please note that this letter is specifically granted for the project as proposed in regards to uses and densities. Any changes in the project that result in a change in use or an increase in water demand will require an application for a modification of this Unconditional Will Serve Letter, but only as to the portions of other project for which use is changed or the water demand is increased, and otherwise this letter shall vest in you water for the project, which vested water rights are not subject to any Water Moratorium or to changes in Water Capacity fees or Water Demand Offset fees. The project's subdivision agreement is valid for 5 years and may be extended for an additional 2-year term subject to approval by the Board of Directors. The Board of Directors accepted a \$1,111,700.00 performance bond to cover water capacity fees for the subject project; however, full payment in the same amount must be made to the District prior to meters being set.

Additionally, activation of your water service is dependent upon compliance with all previously identified requirements, including those specified in your Conditional Will Serve Letter including execution of acquisition agreement for the Granite Way Well Site. At your convenience, please contact Conservation staff at (831)475-8500, x146 to schedule an on-site verification appointment once all plumbing fixtures have been installed.

Upon SqCWD on-site verification of compliance and payment of water capacity fees, your project will be presented to the SqCWD Board of Directors for final acceptance during a regularly scheduled meeting. If approved by the Board, SqCWD will work



with you to schedule water service activation, including meter drop-ins. Should you have any questions about this process or require assistance, please contact Conservation or Engineering staff at (831)475-8500.

Sincerely,  
SOQUEL CREEK WATER DISTRICT



Taj A. Dufour, P.E.  
Engineering Manager/Chief Engineer

Enclosures:    Water Demand Offset Calculation  
                    Subdivision Agreement  
                    Sub-metering Agreement  
                    Performance Bond for Water Capacity Fees

DO NOT DUPLICATE

**ATTACHMENT 2 - ITEM 6.3**

**Aptos Village BSB Final WDO Requirement February 11, 2014 sf/rd**  
 Revised based on updates provided by BSB on 2-11-2014 green outline is phase one project implementation

Master Meters (size varies)	Irrigation 5/8	Commercial 5/8	R. 5/8	Residential 5/8	BLD	Facility Type	GSF # unit	Usage Factor (sf/Offset) (sf)	Multiplier	Go Green	Total Offset
		1	1	5/8	1	Store	2,576	0.078	1.6	0.81	0.200
					1	In-line Store	1,039	0.078	1.6	0.81	0.109
					3	1 Apartment (above)	1,039	0.348	1.6	0.818	0.455
		1	1	3	2	Store	1,088	0.078	1.6	0.81	0.110
					4	In-line Stores (4 total)	4,497	0.078	1.6	0.81	0.455
		2	2	12	2	In-line Stores (w/ salon, café)	1,800	0.078	1.6	0.81	0.103
					12	2 Apartment (above)	1,800	0.078	1.6	0.81	0.103
		2	2	8	3	Restaurant (above)	4,130	1.352	1.6	0.818	1.822
					8	3 Apartment (above)	4,130	1.154	1.6	0.818	1.822
					8	3 Apartment (above)	4,130	0.928	1.6	0.818	1.215
					8	Grocery (w/comb)	4,789	0.278	1.6	0.81	2.130
		0	0	0	4	Office floor 2 - Grocery Office	1,200	0.059	1.6	0.80	0.091
		1	1	4	4	Office floor 2	3,645	0.059	1.6	0.80	0.275
					4	4 Apartment (above)	4,130	0.116	1.6	0.818	0.607
		1	1	4	5	Grocery (main)	12,891	0.278	1.6	0.81	5.734
					2	6a Apartment (above)	2,775	0.078	1.6	0.81	0.281
		1	1	2	6a	Apartment (above)	2,775	0.078	1.6	0.81	0.281
		1	1	2	6b	Apartment (above)	2,600	0.078	1.6	0.81	0.263
		2	2	2	6b	Apartment (above)	2,600	0.078	1.6	0.81	0.263
		1	1	2	7	Restaurant	1,500	1.154	1.6	0.818	2.854
		1	1	3	7	In-line Shop	791	0.078	1.6	0.81	0.099
					3	7 Apartment (above)	791	0.078	1.6	0.818	0.358
		1	1	4	8	Restaurant	2,784	1.154	1.6	0.818	5.159
					4	8 Apartment (above)	2,784	0.116	1.6	0.818	0.607
		1	1	1	9	Store	1,291	0.078	1.6	0.81	0.131
					1	In-line Store	670	0.078	1.6	0.81	0.088
		1	1	6	9	Store	1,291	0.078	1.6	0.81	0.131
					6	9 Apartment (above)	1,291	0.116	1.6	0.818	0.542
		1	1	4	10	Store	2,521	0.078	1.6	0.81	0.263
					4	10 Apartment (above)	2,521	0.078	1.6	0.81	0.263
		3	3	6	11	Apartment (above)	3,000	0.116	1.6	0.818	1.300
					6	11 Townhomes	3,000	0.200	1.6	0.818	2.872
		9	9	65	11	TOTALS	50,152	25.734	1.6	0.818	37,964

<b>Project Total (af)</b>	<b>37,964</b>
<b>Existing Credits Held by BSB (af)</b>	<b>29,700</b>
<b>Credit for Existing Buildings (af)</b>	<b>1.09</b>
<b>Credit for Synthetic Turf (instead of Offsets Purchased from SGCWD) (af)</b>	<b>6.067</b>
<b>Amount Outstanding (af)</b>	<b>0.007</b>

<b>Go Green for Residential (factored in to Total Offset):</b>	
Platinum + clothes washers	14.6% + 3.6% = 0.182
Reduction Factor	100% - 18.2% = 0.818

<b>Go Green for Commercial (factored in to Total Offset):</b>	
UHET's in stores & offices only	
Stores - 60% used indoors, 70% of indoor used for toilets	
Toilet use makes up 50% of total use (60% x 70%)	
Installing a 0.8 gpf toilet instead of a 1.28 gpf toilet saves 38%	
38% x 50% = 19%	
100% - 19% = 81%	
Offices - 70% used indoors, 75% of indoor used for toilets	
Toilets use makes up 53% of total use (70% x 75%)	
Installing a 0.8 gpf toilet instead of a 1.28 gpf toilet saves 35%	
35% x 53% = 20%	
100% - 20% = 80%	

**Credit for Replacing Planned Village Green with Synthetic Turf**  
 Planned grass area to be conserved = 3,269 sq. ft.  
 Credit per sq. ft. for replacing grass with synthetic turf = 0.00007 af x 90% = 0.000063 af/sq  
 Credit for synthetic turf = 3,269 sq. ft. x 0.000063 af/sq. ft. = 0.206 af

**SCWD Capacity Fees**  
 Phase 1 Meter City  
 Subtotal Cap Fees  
 Total Capacity Fee  
 Phase 2 Meter City  
 Subtotal Cap Fees  
 Total Capacity Fee  
 Phase City Cross Check  
 Total Capacity Charge

7.712 not using washers  
 -6.615  
 1.097 \$40,000  
 \$43,680 cost for credit  
 \$5 cost per washer  
 \$5 real units  
 \$32,500 under credit cost = net benefit  
 \$675.08 break even for green point.

**Total WDO Requirement**

**SCWD Capacity Fees**  
 Phase 1 Meter City  
 Subtotal Cap Fees  
 Total Capacity Fee  
 Phase 2 Meter City  
 Subtotal Cap Fees  
 Total Capacity Fee  
 Phase City Cross Check  
 Total Capacity Charge

37.64

RECEIVED

MAR 4 2014

BOND NO. 105987219  
PREMIUM: \$16,122.00

**S.C.W.D.**  
PERFORMANCE BOND

KNOW ALL MEN BY THESE PRESENTS, that we GREEN VALLEY CORPORATION, a California corporation dba BARRY SWENSON BUILDER, as principal and [REDACTED], a corporation organized and existing under the laws of the State of Connecticut, and authorized to transact surety business in the State of California, as Surety, are held and firmly bound unto the SOQUEL CREEK WATER DISTRICT a public corporation, in the County of Santa Cruz, State of California, hereinafter called "District", in the full and just sum of \$1,111,700. (the "Water Capacity Fees"), for which payment well and truly to be made, the said Principal and Surety bind themselves, their successors and assigns, jointly and severally, firmly by these presents.

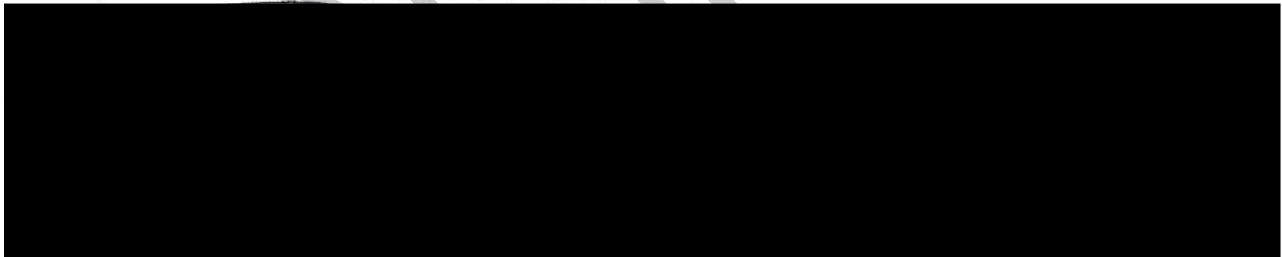
WHEREAS, the said Principal has entered into, or is about to enter into a Soquel Creek Water District Subdivision Agreement with the District for the Aptos Village Project and the District has issued, or is about to issue to Principal an Unconditional Will Serve Letter for the Aptos Village Project, in which, respectively the Principal agrees to install certain water mains and appurtenances and pursuant to which Principal is obliged to pay the Water Capacity Fees.

WHEREAS, it is the intention and purpose of the said Principal to install said water mains and appurtenances as provided by said agreement and to guarantee payment of the Water Capacity Fees to District on or before the first certificate of occupancy is issued for the Aptos Village Project, and

WHEREAS, the District, is willing and agreeable to accept a bond in the amount of the Water Capacity Fees to guaranty the payment of the Water Capacity Fees in full upon the issuance of the first certificate of occupancy for the Aptos Village Project, and

NOW, THEREFORE, the condition of this obligation is such that if said Principal shall timely pay the Water Capacity Fees then this obligation shall be null and void; otherwise, it shall remain in full force and effect.

SIGNED, SEALED AND DATED this 14th day of November, 2013.



NOTARY ACKNOWLEDGEMENT MUST BE ATTACHED TO THIS FORM EVIDENCING SIGNING OF BOTH PRINCIPAL OR PRINCIPALS AND SURETY) OFFICER'S TYPED NAME AND CONTACT INFORMATION IS REQUIRED

RECEIVED

MAR 4 2014

S.C.W.D.

DO



POWER OF ATTORNEY

Farmington Casualty Company
Fidelity and Guaranty Insurance Company
Fidelity and Guaranty Insurance Underwriters, Inc.
St. Paul Fire and Marine Insurance Company
St. Paul Guardian Insurance Company

St. Paul Mercury Insurance Company
Travelers Casualty and Surety Company
Travelers Casualty and Surety Company of America
United States Fidelity and Guaranty Company

Attorney-In Fact No. 217294

Certificate No. 004717548

KNOW ALL MEN BY THESE PRESENTS: That St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company and St. Paul Mercury Insurance Company are corporations duly organized under the laws of the State of Minnesota, that Farmington Casualty Company, Travelers Casualty and Surety Company, and Travelers Casualty and Surety Company of America are corporations duly organized under the laws of the State of Connecticut, that United States Fidelity and Guaranty Company is a corporation duly organized under the laws of the State of Maryland, that Fidelity and Guaranty Insurance Company is a corporation duly organized under the laws of the State of Iowa, and that Fidelity and Guaranty Insurance Underwriters, Inc., is a corporation duly organized under the laws of the State of Wisconsin (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint



of the City of Mountain View, State of California, their true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory in the nature thereof on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed and their corporate seals to be hereto affixed, this 30th day of January, 2012.

Farmington Casualty Company
Fidelity and Guaranty Insurance Company
Fidelity and Guaranty Insurance Underwriters, Inc.
St. Paul Fire and Marine Insurance Company
St. Paul Guardian Insurance Company

St. Paul Mercury Insurance Company
Travelers Casualty and Surety Company
Travelers Casualty and Surety Company of America
United States Fidelity and Guaranty Company



State of Connecticut
City of Hartford ss.

By: [Redacted signature]

On this the 30th day of January, 2012, before me personally appeared George W. Thompson, who acknowledged himself to be the Senior Vice President of Farmington Casualty Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Underwriters, Inc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

In Witness Whereof, I hereunto set my hand and official seal. My Commission expires the 30th day of June, 2016.



Marie C. Tetreault
Marie C. Tetreault, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Farmington Casualty Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Underwriters, Inc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company, which resolutions are now in full force and effect, reading as follows:

**RESOLVED**, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

**FURTHER RESOLVED**, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

**FURTHER RESOLVED**, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

**FURTHER RESOLVED**, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary, of Farmington Casualty Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Underwriters, Inc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 14th day of November, 20 13

  
Kevin E. Hughes, Assistant Secretary



To verify the authenticity of this Power of Attorney, call 1-800-421-3880 or contact us at [www.travelersbond.com](http://www.travelersbond.com). Please refer to the Attorney-In-Fact number, the above-named individuals and the details of the bond to which the power is attached.

# ACKNOWLEDGMENT

State of California  
County of Santa Clara )

On 11/14/13 before me, N. Pham, Notary Public  
(insert name and title of the officer)

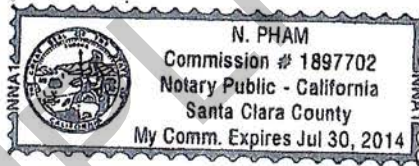
personally appeared [REDACTED]  
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are  
subscribed to the within instrument and acknowledged to me that he/she/they executed the same in  
his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the  
person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing  
paragraph is true and correct.

WITNESS my hand and official seal.

Signature [Handwritten Signature]

(Seal)



DO NOT EXEMPT DUTY

# CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Santa Clara

On Feb 18, 2014, before me, \_\_\_\_\_  
(Here insert name and title of the officer)

personally appeared \_\_\_\_\_

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Connie Louise Miller  
Signature of Notary Public



(Notary Seal)

## ADDITIONAL OPTIONAL INFORMATION

### INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he/she/they~~, ~~is/are~~) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
  - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
  - ❖ Indicate title or type of attached document, number of pages and date.
  - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

### DESCRIPTION OF THE ATTACHED DOCUMENT

\_\_\_\_\_  
(Title or description of attached document)

\_\_\_\_\_  
(Title or description of attached document continued)

Number of Pages \_\_\_\_\_ Document Date \_\_\_\_\_

\_\_\_\_\_  
(Additional information)

### CAPACITY CLAIMED BY THE SIGNER

- Individual (s)  
 Corporate Officer

\_\_\_\_\_  
(Title)

- Partner(s)  
 Attorney-in-Fact  
 Trustee(s)  
 Other \_\_\_\_\_

# CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Santa Clara

On Feb 18, 2014 before me, \_\_\_\_\_  
(Here insert name and title of the officer)

personally appeared \_\_\_\_\_

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is are subscribed to the within instrument and acknowledged to me that he ~~he~~ ~~she~~ ~~they~~ executed the same in his ~~his~~ ~~her~~ ~~their~~ authorized capacity(ies), and that by his ~~his~~ ~~her~~ ~~their~~ signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Connie Louise Miller  
Signature of Notary Public



(Notary Seal)

## ADDITIONAL OPTIONAL INFORMATION

### INSTRUCTIONS FOR COMPLETING THIS FORM

*Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.*

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- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he~~/~~she~~/~~they~~, ~~is~~/~~are~~) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
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- Signature of the notary public must match the signature on file with the office of the county clerk.
  - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
  - ❖ Indicate title or type of attached document, number of pages and date.
  - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

#### DESCRIPTION OF THE ATTACHED DOCUMENT

Title or description \_\_\_\_\_  
(Title or description of attached document)

Title or description continued \_\_\_\_\_  
(Title or description of attached document continued)

Number of Pages \_\_\_\_\_ Document Date \_\_\_\_\_

\_\_\_\_\_  
(Additional information)

#### CAPACITY CLAIMED BY THE SIGNER

- Individual (s)  
 Corporate Officer

\_\_\_\_\_  
(Title)

- Partner(s)  
 Attorney-in-Fact  
 Trustee(s)  
 Other \_\_\_\_\_





## County of Santa Cruz Planning Department

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Approval of application 171292 [REDACTED]

Your Design Review has been administratively approved by the Planning Department, subject to completion of a 14 day appeal period. This approval is not final and cannot be exercised until the appeal period is completed. This decision is appealable by you, or by any other interested person. Any appeal must be filed in writing and be accompanied by the current appeal filing fee.

Following the local appeal period, Coastal Development Permits may also be subject to appeal through the California Coastal Commission, with a 10 working day appeal period from the date that notice of final local action is received by the California Coastal Commission.

In order to validate this approval, you must sign the permit, affirming that you have reviewed the permit and agree to the conditions imposed by it. Until this occurs, the permit is not active. **This means that no building permit will be issued, nor can the use begin unless and until the permit is signed and returned.** Within this mailing is a separate page which requires your signature to validate this permit. Please sign, detach, and return the separately labeled "Signature Page" for our files. **This approval is for the discretionary review of this project only and any additional permits required as Conditions of Approval of this permit (i.e. Building Permits, Grading Permits, Encroachment Permits, etc.) must be obtained prior to beginning construction.** You should carefully review the attached conditions, as these are the terms under which your project can proceed. If you are the agent for the property owner, you may sign the permit only if you provide proof of service by mail that the signed conditions have been provided to the owner.

Please contact the project planner at (831) 454-3218 or [randall.adams@santacruzcounty.us](mailto:randall.adams@santacruzcounty.us) should you have further questions about the processing of your application.

## Conditions of Approval

Exhibit A. Project plans, prepared by [REDACTED], dated 7/14/17.

- I. This permit is an amendment to Subdivision and Commercial Development Permit 101027, and Design Review approval 151005, and all required conditions of approval for those permits are hereby incorporated into these conditions of approval by reference with the following exceptions:
  - A. This permit authorizes modifications to the approved building and site designs of the Aptos Village project (as approved under 101027 & 151005) with modifications as indicated on the approved Exhibit "A" for this permit and as further modified by these conditions of approval.
  - B. Transportation Improvement Area (TIA) fees may be phased with the project, subject to review and approval by the Department of Public Works at the time of map recordation.
- II. Prior to exercising any rights granted by this permit including, without limitation, any construction or site disturbance, the applicant/ owner shall:
  - A. Sign, date, and return to the Planning Department one copy of the approval to indicate acceptance and agreement with the conditions thereof.
- III. As a condition of this development approval, the holder of this development approval ("Development Approval Holder"), is required to defend, indemnify, and hold harmless the COUNTY, its officers, employees, and agents, from and against any claim (including attorneys' fees), against the COUNTY, its officers, employees, and agents to attack, set aside, void, or annul this development approval of the COUNTY or any subsequent amendment of this development approval which is requested by the Development Approval Holder.
  - A. COUNTY shall promptly notify the Development Approval Holder of any claim, action, or proceeding against which the COUNTY seeks to be defended, indemnified, or held harmless. COUNTY shall cooperate fully in such defense. If COUNTY fails to notify the Development Approval Holder within sixty (60) days of any such claim, action, or proceeding, or fails to cooperate fully in the defense thereof, the Development Approval Holder shall not thereafter be responsible to defend, indemnify, or hold harmless the COUNTY if such failure to notify or cooperate was significantly prejudicial to the Development Approval Holder.
  - B. Nothing contained herein shall prohibit the COUNTY from participating in the defense of any claim, action, or proceeding if both of the following occur:
    1. COUNTY bears its own attorney's fees and costs; and
    2. COUNTY defends the action in good faith.

- C. Settlement. The Development Approval Holder shall not be required to pay or perform any settlement unless such Development Approval Holder has approved the settlement. When representing the County, the Development Approval Holder shall not enter into any stipulation or settlement modifying or affecting the interpretation or validity of any of the terms or conditions of the development approval without the prior written consent of the County.
  
  - D. Successors Bound. “Development Approval Holder” shall include the applicant and the successor'(s) in interest, transferee(s), and assign(s) of the applicant.
- 

In accordance with Chapter 18.10 of the County Code, minor variations to this permit which do not affect the overall concept, intensity, or density may be approved by the Planning Director at the request of the applicant or staff.

**Please note: This permit expires with the Subdivision and Commercial Development Permit 101027. Any extensions to Subdivision and Commercial Development Permit 101027 extend this permit as well.**

Approval Date: 1/10/18

Effective Date: 1/24/18

Expiration date: See Permit 101027

