CITY OF LOS ANGELES BOARD OF CULTURAL AFFAIRS COMMISSIONERS

"FORM A-1" APPLICATION FOR DESIGN REVIEW OF BUILDINGS, BRIDGES, AND OTHER MAJOR STRUCTURES

Cultural Affairs Department 201 N. Figueroa Street, Suite 1400 Los Angeles, CA 90012 Tel. (213) 202-5500 Fax (213) 202-5515

THIS APPLICATION MUST BE COMPLETE WITH ALL REQUIRED MATERIALS LISTED OR IT WILL NOT BE ACCEPTED FOR PROCESSING

OUTLINE OF THE JURISDICTION OF THE CULTURAL AFFAIRS COMMISSION:

Jurisdiction of Board of Cultural Affairs Commissioners (consisting of 7 members) is authorized by The Los Angeles Administrative Code Section 22.106. Additionally, Section 22.109 outlines the Commission's duties as follows:

"THE DESIGN OF NO PUBLIC building, bridge, approach, fence, retaining wall, lamp, lamp post, or other similar structure proposed to be erected by or under the authority of the city upon any land or in any place belonging to or under the control of the city shall be adopted by any board or officer having charge, superintendence or control of the design or construction thereof, unless such design shall have been first submitted to and approved by the Board of Cultural Affairs Commissioners by a majority vote thereof. No arch, bridge, structure or approach belonging to any PRIVATE INDIVIDUAL or corporation shall be permitted to extend over, into or upon any street, avenue, highway, park or other public place belonging to or under the control of the City of Los Angeles, unless the design and location thereof shall have first been approved by the said Board as hereinbefore provided."

Submission & Review Schedule: (Also see Workbook, Appendix B)

The Cultural Affairs Commission (CAC) meets the 2nd Wednesday of each month, at 1:30 p.m., for hearings in the 14th Floor Board Room at 201 N. Figueroa Street, Los Angeles. Plans and application forms must be submitted to the Cultural Affairs Commission Staff Architect between 10:00 a.m. and Noon on Wednesday, three weeks prior to the hearing. In special circumstances early arrangements may be made for a different submittal time. **Refer to Design Review Workbook for further information on process and policies of the Cultural Affairs Commission.**

PROJECT INFORMATION

PROJECT TITLE (BE SPECIFIC):				
SUBMISSION DATE:	REVIEV	W DATE:		
VALUATION: \$PREVIOUS ACTION & DATE:				
PROJECT ADDRESS:				
	ZIP	_COUNCIL DISTRICT #		
MAJOR CROSS STREETS:				
COMMUNITY PLAN AREA:		_ ZONING:		
REVIEW FEE: (see schedule below) * IF FEE EXEMPT, PROVIDE EXEMPTION I				
CHECK #: RECEIPT #:	IDO #:	SPO #:		

REVIEW FEE SCHEDULE FOR SUBMISSIONS BASED ON VALUATION

FROM	ТО	FEE
\$ 0.00	\$ 1,500.00	\$ 60.00
1,500.01	10,000.00	80.00
10,000.01	25,000.00	100.00
25,000.01	50,000.00	120.00
50,000.01	150,000.00	140.00
150,000.01	250,000.00	160.00
250,000.01	500,000.00	200.00
500,000.01	1,000,000.00	300.00
1,000,000.01	over	400.00

CITY DEPARTMENT FEES OR FEE EXEMPTION REQUIREMENTS:

Submissions presented to the Cultural Affairs Commission from other City departments are only exempted from fee if they conform to the conditions provided in Executive Directive 19 and Ordinance No. 125,413 Municipal Code Section 11.08. To be exempted, please submit a letter to this effect. All City department submissions shall pay a fee if reimbursable from a Revolving, Trust, Bond, or Capital Improvement Fund. If all or part of the proposed project is being funded in this manner, please state on your fee payment document the fund number, type and percentage of project which is being paid by these funds. Use that percentage of the total cost to determine the fee from the fee schedule.

PROJECT DIRECTORY				
ORIGINATING CITY DEPARTMENT:				
CITY PROJECT DESIGNERS (IF DESIGNED IN-HOUSE) ARCHITECT: ENGINEER: OTHER (SPECIFY)	CITY DEPT.:			
CITY PROJECT MANAGER/ CONTACT PERSON				
ADDRESS:	PHONE NO.			
ZIP:	E-MAIL ADDRESS			
CONTRACTED PRINCIPAL DESIGN FIRM:				
[] ARCHITECTURAL [] ENGINEERING []	OTHER (SPECIFY)			
ADDRESS:	PHONE NO.			
ZIP:	E-MAIL ADDRESS:			
PROJECT DESIGNER:	PHONE NO. E-MAIL ADDRESS:			
CONTACT PERSON:	PHONE NO. E-MAIL ADDRESS:			
PRIVATE OWNER/LESSEE:				
ADDRESS	PHONE NO.			
ZIP:	E-MAIL ADDRESS:			
CONTACT PERSON	PHONE NO. E-MAIL ADDRESS:			
PROJECT PLANNING BEGAN ESTIMATED DESIGN COMPLETION ESTIMATED CONSTRUCTION COMPLETION SOURCE OF FUNDING:	DATE:			
THE SPACE BELOW FOR STAFF USE ONLY COMMISSION ACTION:				
CONDITIONS IF ANY:				

CONSULTANT LIST					
Architectural Firm					
CONTACT PERSON	PHONE#	E-MAIL			
Structural Engineering Firm:					
CONTACT PERSON	PHONE#	E-MAIL			
Civil Engineering Firm:					
CONTACT PERSON	PHONE#	E-MAIL			
Mechanical Engineering Firm:					
CONTACT PERSON	PHONE#	E-MAIL			
Electrical Engineering Firm:					
CONTACT PERSON	PHONE#	E-MAIL			
Acoustical Engineering Firm:					
CONTACT PERSON	PHONE#	E-Mail			
Landscape Architect Firm:					
CONTACT PERSON	PHONE#	E-Mail			
Interior Design Firm:					
CONTACT PERSON	PHONE#	E-Mail			
Artist/Art Consultant:					
CONTACT PERSON	PHONE#	E-Mail			
Other:					
CONTACT PERSON	PHONE#	E-Mail			

Provide information if known or applicable. If all consultants have not been determined at this time, provide data at the next submittal.

PROJECT NARRATIVE

DESCRIBE YOUR DESIGN AND THE RELATIONSHIP OF THE DESIGN TO ITS SURROUNDINGS, BOTH NATURAL AND ARCHITECTURAL. MENTION ANY PERTINENT ISSUES (SUCH AS SURROUNDING BUILDING TYPES; MASSING; MATERIALS; SIGNAGE; LIGHTING; CANOPIES; PARKING; COMMUNITY INVOLVEMENT; COLLABORATION BETWEEN ARTIST AND DESIGNER, ETC.). HOW DOES THIS PROJECT CONTRIBUTE TO THE ARCHITECTURE AND URBAN DESIGN OF THE COMMUNITY AND THE CITY? (IF APPLICABLE AND/OR AVAILABLE). ATTACH ADDITIONAL SHEETS IF NECESSARY.

SITE INFORMATION

SITE AREA (NET ACRES/SQUARE FEET)

SITE USE(S): EXISTING
PROPOSED

SITE TOPOGRAPHY: AVERAGE % OF SLOPE

NATURE OF GRADING & EXTENT (IF ANY)

ARE THERE ANY EXISTING BUILDINGS ON THE SITE TO REMAIN [] YES [] NO
IF YES, DESCRIBE:

ARE THERE ANY EXISTING BUILDINGS ON THE SITE TO BE DEMOLISHED? [] YES [] NO
IF YES, DESCRIBE:

SITE DESIGN FEATURES

- DESCRIBE THE HARDSCAPE MATERIALS AND COLORS:
- INDICATE AMOUNT OF LANDSCAPING PROVIDED (% OF TOTAL SITE) AND <u>SIZE AND SPECIES:</u> (ALSO PROVIDE ESTIMATED LANDSCAPING VALUATION)
- ARE THERE ANY EXISTING TREES TO BE REMOVED OR SAVED? [] YES [] NO IF YES, DESCRIBE:
- DESCRIBE SECURITY ISSUES IF APPLICABLE:

•	DESCRIBE	PERIMETER	WALLS,	GATES,	FENCES,	IF	ANY	(HEIGHT,	LENGTH,
	MATERIALS	G, OPENINGS).	, AND PR	OVIDE D	RAWINGS:				

•	DESCRIBE	GRAFFIT	RESISTANCE	FEATURES IF	APPLICABLE

• DESCRIBE THE LOCATION AND TYPE OF EXTERIOR LIGHTING IF APPLICABLE/AVAILABLE (SHOW ON SITE PLAN AND/OR PLANS):

BUILDING INFORMATION

BUILDING NUMBER	BUILDING #1	BUILDING #2	BUILDING #3
TOTAL FLOOR AREA			
HEIGHT			
NUMBER OF STORIES			
BUILDING USE			
П			
MAXIMUM NO. OF OCCUPANTS			
STRUCTURAL SYSTEM			
MAJOR BUILDING MATERIALS			

ATTACH ADDITIONAL SHEETS IF NECESSARY

PARKING

PARKING TYPE	# OF LEVELS	EXISTING # OF STALLS	PROPOSED # OF STALLS	# OF STALLS REQUIRED
SURFACE PARKING				
PARKING STRUCTURE				
UNDERGROUND PARKING				

SIGNAGE

WILL THERE BE ANY EXTERIOR SIGNAGE? IF SO, DESCRIBE TYPE, SIZE AND ILLUMINATION (SHOW ON PLANS AND/OR ELEVATIONS):

SPECIFIC TREETSCAPE PLAN

DOES YOU	JR PROJECT FALL	WITHIN THE BOUNDARIES	S OF A SPECIFIC STREETSCAPE PL	AN?
YES []	NO []			

IF YES, PLEASE INCLUDE INFORMATION ON HOW YOUR PROJECT WILL BE COMPLYING WITH THE ELEMENTS OF THE PLAN IN YOUR "PROJECT NARRATIVE" ON PAGE 5