

**Monogram Villa Inc**  
5536 Tyrone Avenue,  
Sherman Oaks, CA 91401-5126

CUP APPLICATION FOR A RESIDENTIAL CARE FACILITY FOR THE ELDERLY

**Monogram Villa Inc** is a business registered for a Business Tax Registration Certificate with the Los Angeles Office of Finance. The account number is #0003245688-0001-0. The business address is 5536 Tyrone Avenue, Sherman Oaks, CA 91401-5126. The business type is *Nursing & residential care facilities*. This is 6-bed Nursing & residential care facility. CUP for an additional 6 beds for a total of 12 beds.

**Monogram Villa Inc** offers personalized care and assistance with daily living activities. These Assisted Living services are offered to senior residents in order to make sure their individual needs are met. **Monogram Villa Inc** allows seniors to continue to enhance their quality of life in a welcoming and home-like, Assisted Living environment.

## **PROJECT DESCRIPTION**

*Prepared by RB CAS LLC*

### **FOR SHERMAN OAKS NEIGHBORHOOD COUNCIL PLANNING AND LAND USE COMMITTEE**

#### **PROJECT ADDRESS:**

5536 TYRONE AVE., SHERMAN OAKS CA 91401

#### **PROJECT TITLE:**

[E] 6 BED RESIDENTIAL CARE FACILITY. CUP FOR AN ADDITIONAL 6 BEDS FOR A TOTAL OF 12 BEDS

#### **DESCRIPTION:**

Current site is a six [6] bed residential care facility with a proposed additional six [6] more beds for a total of twelve [12] bed accommodation with no interior and exterior construction proposed.

One bed will be added to each of the 5 bedrooms for non-ambulatory residents and another will be added to the 1 bedroom for the bedridden resident, making a total of six [6] additional beds.

#### **DETAILS:**

1. Total Lot Area: 9,495 Sq. Ft.
2. Building Footprint / Area: 4,143 Sq. Ft.
3. Building Height: 17 Ft. [from Finish Grade to Top of Ridge]
4. Open Space: 5,352 Sq. Ft.
5. Two-Car Covered Carport: 324 Sq. Ft. [included in open space square footage]
6. Existing No. of Beds: 6
7. Proposed Additional No. of Beds: 6
8. Total No. of Beds Once Approved: 12
9. No interior construction proposed to existing 9 bedrooms + 7 bathrooms and others
10. No exterior construction proposed to existing structure
11. For Conditional Use Permit [CUP]

CITY OF LOS ANGELES  
DEPARTMENT OF CITY PLANNING  
ZONING INFORMATION (ZI) FILE

**EFFECTIVE DATE: MARCH 17, 2017**

**ZI NO. 2462  
MODIFICATIONS TO SINGLE-FAMILY ZONES AND SINGLE-FAMILY ZONE  
HILLSIDE AREA REGULATIONS**

**COUNCIL DISTRICT: ALL**

**BACKGROUND:**

On March 17, 2017, pursuant to Ordinance No. 184,802, the provisions governing the development of single-family (RA, RE, RS, R1) zoned properties citywide were modified to establish new regulations regarding the size and bulk of new and enlarged homes, and to further regulate grading and earth import/export in designated Hillside Areas.

**COMMENTS:**

The modified single-family zone regulations include changes to several definitions in LAMC Section 12.03, including the definition of “Floor Area, Residential.” Other modifications pertain to Residential Floor Area bonus options, the allowable Residential Floor Area Ratio in the R1 Zone, other Area regulations in the R1 Zone, and grading and hauling regulations in designated Hillside Areas. In addition, the modifications include a number of technical edits and corrections. Key modifications to single-family regulations are summarized below. In addition to this summary, please review LAMC Sections 12.03, 12.07, 12.07.01, 12.07.1, 12.08, 12.21, 12.23, and 12.28 for all modifications.

**In all single-family zones (RA, RE, RS, R1), except Coastal Zone properties located outside of designated Hillside Areas:**

- Eliminates the existing Residential Floor Area (RFA) exemption for the first 100 square feet of over-in-height (over 14 feet in height) ceilings.
- Eliminates the 250 sf RFA exemption for covered porches, patios, and breezeways.
- Retains the full RFA exemption for rear garages (up to 400 square feet). Reduces the exemption for front garages to 200 square feet.
- Eliminates the 20% RFA bonus option for green buildings.
- Clarifies that the definition of RFA applies to both residential and non-residential buildings, such as conditionally-permitted uses (decision-maker can override such provisions as part of conditions of approval).

**In the R1 Zone, except Coastal Zone properties located outside of designated Hillside Areas:**

- Outside of designated Hillside Areas, establishes a maximum RFA of 45%, regardless of lot size.
- Within designated Hillside Areas, establishes a maximum RFA of 45% for the lowest slope band (0-15%).
- Eliminates all of the 20% RFA bonus options.

**In the R1 Zone:**

- Establishes an Encroachment Plane, a 45° angled plane above a height of 20 feet that the house cannot intersect.
- Requires articulation of side walls more than 45 feet in length and 14 feet in height.
- Requires roof decks to be set back at least 3 feet from the minimum side yard.
- Limits driveway width to 25% of lot width (but not less than 9 feet) or the width of the existing driveway (non-Hillside Areas only).

**In all single-family zones in designated Hillside Areas (RA, RE, RS, R1)**

- Reduces the guaranteed minimum RFA from 1,000 to 800 square feet.
- Eliminates the grading exemption for cut and fill underneath a structure, with exceptions:
  - Allows grading exemption for piles and caissons.
  - Allows grading exemption of the fill resulting from one half of the cut underneath a main building.
- In conjunction with counting previously exempted grading,
  - Adjusts the formula for allowable grading quantity:
    - **Existing:** 500 cubic yards plus the numeric value equal to 5% of the lot size in cubic yards.
    - **Proposed:** 1,000 cubic yards plus the numeric value equal to 10% of the lot size in cubic yards.
  - Adjusts maximum by-right grading quantities:

Zone	PREVIOUS Maximum “By-Right” Grading Quantity (cubic yards) <i>CUT &amp; FILL UNDER STRUCTURE <u>IS EXEMPT</u></i>	NEW Maximum “By-Right” Grading Quantity (cubic yards) <i>CUT &amp; FILL UNDER STRUCTURE <u>IS NOT EXEMPT</u></i>
R1	1,000	1,000
RS	1,100	2,200
RE9	1,200	2,400
RE11	1,400	2,800
RE15	1,600	3,200
RE20	2,000	4,000

RE40	3,300	6,600
RA	1,800	3,600

- In conjunction with counting previously exempted grading, modifies allowed import/export quantities:
  - Standard Hillside Limited Streets and larger – up to the maximum “by-right” grading quantities.
  - Substandard Hillside Limited Streets – up to 75 percent of the maximum “by-right” grading quantities.
- Restricts import/export activities to 9 a.m. – 3 p.m., Monday-Friday.

The modified provisions also include a number of technical edits and clarifications.

**INSTRUCTIONS:**

No building permit shall be issued by the Department of Building and Safety (LADBS) for a Project unless the proposed structure complies with the regulations set forth in the Los Angeles Municipal Code. For regulations affected by the modifications to single-family zone regulations, refer to LAMC Sections 12.03, 12.07, 12.07.01, 12.07.1, 12.08, 12.21, 12.23, and 12.28.

**Exception:** Projects with entitlement applications filed before the effective date are subject to the rules in effect on the date of fee receipt.

**ORDINANCE:**

Please click the link below for a copy of the ordinance.

- Modifications to Single-Family Zones and Single-Family Zone Hillside Area Regulations, [Ordinance No. 184,802](#)



APPLICATIONS:

DEPARTMENT OF CITY PLANNING APPLICATION

THIS BOX FOR CITY PLANNING STAFF USE ONLY

Case Number
Env. Case Number
Application Type
Case Filed With (Print Name) Date Filed

Application includes letter requesting:
Waived hearing Concurrent hearing Hearing not be scheduled on a specific date (e.g., vacation hold)
Related Case Number(s):

Provide all information requested. Missing, incomplete or inconsistent information will cause delays.

All terms in this document are applicable to the singular as well as the plural forms of such terms.

Refer to the Department of City Planning Application Filing Instructions (CP-7810) for more information.

1. PROJECT LOCATION

Street Address1 5536 TYRONE AVE., SHERMAN OAKS CA 91401 Unit/Space Number
Legal Description2 (Lot, Block, Tract) FR 347, NONE, TR 1000
Assessor Parcel Number 2245023004 Total Lot Area 9,495 SF

2. PROJECT DESCRIPTION

Present Use RESIDENTIAL CARE FACILITY
Proposed Use RESIDENTIAL CARE FACILITY
Project Name (if applicable)
Describe in detail the characteristics, scope and/or operation of the proposed project
[E] 6 BED RESIDENTIAL CARE FACILITY. CUP FOR AN ADDITIONAL 6 BEDS FOR A TOTAL OF 12 BEDS

Additional information attached YES NO

Complete and check all that apply:

Existing Site Conditions

Site is undeveloped or unimproved (i.e., vacant)
Site has existing buildings (provide copies of building permits)
Site is/was developed with uses that could release hazardous materials on soil and/or groundwater (e.g., dry cleaning, gas station, auto repair, industrial)
Site is located within 500 feet of a freeway or railroad
Site is located within 500 feet of a sensitive use (e.g., school, park)
Site has special designation (e.g., National Historic Register, Survey LA)

1 Street Addresses must include all addresses on the subject/application site (as identified in ZIMAS—http://zimas.lacity.org)

2 Legal Description must include all contiguously owned properties (even if they are not a part of the proposed project site)

**Proposed Project Information**

(Check all that apply or could apply)

- Demolition of existing buildings/structures
- Relocation of existing buildings/structures
- Removal of any on-site tree
- Removal of any street tree
- Removal of protected trees onsite / public right-of-way
- Grading
- Haul Route
- New construction: \_\_\_\_\_ square feet
- Additions to existing buildings
- Interior tenant improvement
- Exterior renovation or alteration
- Change of use and/or hours of operation
- Uses or structures in public right-of-way
- Phased project

**Housing Component Information**

Number of Residential Units: Existing \_\_\_\_\_ – Demolish(ed)<sup>3</sup> \_\_\_\_\_ + Adding \_\_\_\_\_ = Total \_\_\_\_\_

Number of Affordable Units<sup>4</sup> Existing \_\_\_\_\_ – Demolish(ed) \_\_\_\_\_ + Adding \_\_\_\_\_ = Total \_\_\_\_\_

Number of Market Rate Units Existing \_\_\_\_\_ – Demolish(ed) \_\_\_\_\_ + Adding \_\_\_\_\_ = Total \_\_\_\_\_

Mixed Use Projects, Amount of Non-Residential Floor Area: \_\_\_\_\_ square feet

**Public Right-of-Way Information**

Have you submitted the Planning Case Referral Form to BOE? (required)  YES  NO

Is your project required to dedicate land to the public right-of-way?  YES  NO

If so, what is/are your dedication requirement(s)? \_\_\_\_\_ ft.

If you have dedication requirements on multiple streets, please indicate: \_\_\_\_\_

**3. ACTION(S) REQUESTED**

Provide the Los Angeles Municipal Code (LAMC) Section that authorizes the request and (if applicable) the LAMC Section or the Specific Plan/Overlay Section from which relief is sought; follow with a description of the requested action.

Does the project include Multiple Approval Requests per LAMC 12.36?  YES  NO

**Authorizing Code Section** \_\_\_\_\_

**Code Section from which relief is requested (if any):** \_\_\_\_\_

**Action Requested, Narrative:** \_\_\_\_\_

**Authorizing Code Section** \_\_\_\_\_

**Code Section from which relief is requested (if any):** \_\_\_\_\_

**Action Requested, Narrative:** \_\_\_\_\_

Additional Requests Attached  YES  NO

**4. RELATED DEPARTMENT OF CITY PLANNING CASES**

Are there previous or pending cases/decisions/environmental clearances on the project site?  YES  NO

If YES, list all case number(s) \_\_\_\_\_

<sup>3</sup> Number of units to be demolished and/or which have been demolished within the last five (5) years.

<sup>4</sup> As determined by the Housing and Community Investment Department

If the application/project is directly related to one of the above cases, list the pertinent case numbers below and complete/check all that apply (provide copy).

Case No. \_\_\_\_\_

Ordinance No.: \_\_\_\_\_

- Condition Compliance Review
- Modification of Conditions
- Revision of Approved Plans
- Renewal of Entitlement
- Plan Approval subsequent to Main Conditional Use

- Clarification of Q (Qualified) Condition
- Clarification of D (Development) Limitation
- Amendment to T (Tentative) Classification

For purposes of environmental (CEQA) analysis, is there intent to develop a larger project?  YES  NO

Have you filed, or is there intent to file, a Subdivision with this project?  YES  NO

If YES, to either of the above, describe the other parts of the projects or the larger project below, whether or not currently filed with the City: \_\_\_\_\_

**5. RELATED DOCUMENTS / REFERRALS**

To help assigned staff coordinate with other Departments that may have a role in the proposed project, please provide a copy of any applicable form and reference number if known.

Specialized Requirement Form \_\_\_\_\_

Geographic Project Planning Referral \_\_\_\_\_

Case Consultation Referral Form \_\_\_\_\_

Redevelopment Project Area – Administrative Review and Referral Form \_\_\_\_\_

HPOZ Authorization Form \_\_\_\_\_

Affordable Housing Referral Form \_\_\_\_\_

Transit Oriented Communities Referral Form \_\_\_\_\_

Preliminary Zoning Assessment Referral Form (Plan Check #) \_\_\_\_\_

Housing Development Project determination (PZA Sec. II) \_\_\_\_\_

Optional HCA Vesting Preliminary Application \_\_\_\_\_

Unpermitted Dwelling Unit (UDU) Inter-Agency Referral Form \_\_\_\_\_

Mello Form \_\_\_\_\_

Citywide Design Guidelines Compliance Review Form \_\_\_\_\_

GPA Initiation Request Form \_\_\_\_\_

Expedite Fee Agreement \_\_\_\_\_

Department of Transportation (DOT) Referral Form \_\_\_\_\_

Bureau of Engineering (BOE) Planning Case Referral Form (PCRF) \_\_\_\_\_

Hillside Referral Form (BOE) \_\_\_\_\_

Building Permits and Certificates of Occupancy \_\_\_\_\_

Order to Comply \_\_\_\_\_

Low Impact Development (LID) Referral Form (Stormwater Mitigation) \_\_\_\_\_

Replacement Unit Determination (LAHD) \_\_\_\_\_

Are there any recorded Covenants, affidavits or easements on this property?  YES (provide copy)  NO



**PROJECT TEAM INFORMATION** (Complete all applicable fields)

**Applicant<sup>5</sup> name** RAMON BAGUIO  
Company/Firm RAMON BAGUIO CAS LLC  
Address: 4273 CANOGA AVE., WOODLAND HILLS Unit/Space Number \_\_\_\_\_  
City LA State CA Zip Code: 91364  
Telephone 818 716 1142 E-mail: statusplandesign@gmail.com  
Are you in escrow to purchase the subject property?  YES  NO

**Property Owner of Record**  Same as applicant  Different from applicant  
Name (if different from applicant) \_\_\_\_\_  
Address \_\_\_\_\_ Unit/Space Number \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail: \_\_\_\_\_

**Agent/Representative name** \_\_\_\_\_  
Company/Firm \_\_\_\_\_  
Address: \_\_\_\_\_ Unit/Space Number \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail: \_\_\_\_\_

**Other** (Specify Architect, Engineer, CEQA Consultant etc.) \_\_\_\_\_  
Name Gegam Burnazyan  
Company/Firm MLB Consulting and Engineering  
Address: 7918 Foothill Blvd, Sunland, CA Unit/Space Number \_\_\_\_\_  
City LA State CA Zip Code: 91040  
Telephone (818)-521-6342 E-mail: gegam@mlbengineering.org

**Primary Contact for Project Information**  Owner  Applicant  
(*select only one*)  Agent/Representative  Other

To ensure notification of any public hearing as well as decisions on the project, make sure to include an individual mailing label for each member of the project team in both the Property Owners List and the Abutting Property Owners List.

<sup>5</sup> An applicant is a person with a lasting interest in the completed project such as the property owner or a lessee/user of a project. An applicant is not someone filing the case on behalf of a client (i.e. usually not the agent/representative).

**PROPERTY OWNER**

7. **PROPERTY OWNER AFFIDAVIT.** Before the application can be accepted, the owner of each property involved must provide a notarized signature to verify the application is being filed with their knowledge. Staff will confirm ownership based on the records of the City Engineer or County Assessor. In the case of partnerships, corporations, LLCs or trusts an officer of the ownership entity so authorized may sign as stipulated below.

- **Ownership Disclosure.** If the property is owned by a partnership, corporation, LLC, or trust, a disclosure identifying an officer of the ownership entity must be submitted. The disclosure must list the names and addresses of the principal owners (25% interest or greater). The signatory must appear in this list of names. A letter of authorization, as described below, may be submitted provided the signatory of the letter is included in the Ownership Disclosure. Include a copy of the current partnership agreement, corporate articles, or trust document as applicable.
- **Letter of Authorization (LOA).** A LOA from a property owner granting someone else permission to sign the application form may be provided if the property is owned by a partnership, corporation, LLC, or trust or in rare circumstances when an individual property owner is unable to sign the application form. To be considered for acceptance, the LOA must indicate the name of the person being authorized the file, their relationship to the owner or project, the site address, a general description of the type of application being filed and must also include the language in items A-D below. In the case of partnerships, corporations, LLCs or trusts the LOA must be signed and notarized by the authorized signatory as shown on the Ownership Disclosure or in the case of private ownership by the property owner. Proof of Ownership for the signatory of the LOA must be submitted with said letter.
- **Grant Deed.** Provide a Copy of the Grant Deed If the ownership of the property does not match City Records and/or if the application is for a Coastal Development Permit. The Deed must correspond exactly with the ownership listed on the application.
- **Multiple Owners.** If the property is owned by more than one individual (e.g., John and Jane Doe or Mary Smith and Mark Jones) notarized signatures are required of all owners.

- a. I hereby certify that I am the owner of record of the herein previously described property located in the City of Los Angeles which is involved in this application or have been empowered to sign as the owner on behalf of a partnership, corporation, LLC, or trust as evidenced by the documents attached hereto.
- b. I hereby consent to the filing of this application on my property for processing by the Department of City Planning.
- c. I understand if the application is approved, as a part of the process the City will apply conditions of approval which may be my responsibility to satisfy including, but not limited to, recording the decision and all conditions in the County Deed Records for the property.
- d. By my signature below, I declare under penalty of perjury under the laws of the State of California that the foregoing statements are true and correct.

*Property Owner's signatures must be signed/notarized in the presence of a Notary Public.  
The City requires an original signature from the property owner with the "wet" notary stamp.  
A Notary Acknowledgement is available for your convenience on following page.*

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

**Space Below for Notary's Use**

**California All-Purpose Acknowledgement**

**Civil Code ' 1189**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document, to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of \_\_\_\_\_

On \_\_\_\_\_ before me, \_\_\_\_\_  
(Insert Name of Notary Public and Title)

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 on 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 (Seal)

**APPLICANT**

- 8. APPLICANT DECLARATION.** A separate signature from the applicant, whether they are the property owner or not, attesting to the following, is required before the application can be accepted.
- a. I hereby certify that the information provided in this application, including plans and other attachments, is accurate and correct to the best of my knowledge. Furthermore, should the stated information be found false or insufficient to fulfill the requirements of the Department of City Planning, I agree to revise the information as appropriate.
  - b. I hereby certify that I have fully informed the City of the nature of the project for purposes of the California Environmental Quality Act (CEQA) and have not submitted this application with the intention of segmenting a larger project in violation of CEQA. I understand that should the City determine that the project is part of a larger project for purposes of CEQA, the City may revoke any approvals and/or stay any subsequent entitlements or permits (including certificates of occupancy) until a full and complete CEQA analysis is reviewed and appropriate CEQA clearance is adopted or certified.
  - c. I understand that the environmental review associated with this application is preliminary, and that after further evaluation, additional reports, studies, applications and/or fees may be required.
  - d. I understand and agree that any report, study, map or other information submitted to the City in furtherance of this application will be treated by the City as public records which may be reviewed by any person and if requested, that a copy will be provided by the City to any person upon the payment of its direct costs of duplication.
  - e. I understand that the burden of proof to substantiate the request is the responsibility of the applicant. Additionally, I understand that planning staff are not permitted to assist the applicant or opponents of the project in preparing arguments for or against a request.
  - f. I understand that there is no guarantee, expressed or implied, that any permit or application will be granted. I understand that each matter must be carefully evaluated and that the resulting recommendation or decision may be contrary to a position taken or implied in any preliminary discussions.
  - g. I understand that if this application is denied, there is no refund of fees paid.
  - i. I understand and agree to defend, indemnify, and hold harmless, the City, its officers, agents, employees, and volunteers (collectively "City"), from any and all legal actions, claims, or proceedings (including administrative or alternative dispute resolution (collectively "actions"), arising out of any City process or approval prompted by this Action, either in whole or in part. Such actions include but are not limited to: actions to attack, set aside, void, or otherwise modify, an entitlement approval, environmental review, or subsequent permit decision; actions for personal or property damage; actions based on an allegation of an unlawful pattern and practice; inverse condemnation actions; and civil rights or an action based on the protected status of the petitioner or claimant under state or federal law (e.g. ADA or Unruh Act). I understand and agree to reimburse the City for any and all costs incurred in defense of such actions. This includes, but it not limited to, the payment of all court costs and attorneys' fees, all judgments or awards, damages, and settlement costs. The indemnity language in this paragraph is intended to be interpreted to the broadest extent permitted by law and shall be in addition to any other indemnification language agreed to by the applicant.
  - i. By my signature below, I declare under penalty of perjury, under the laws of the State of California, that all statements contained in this application and any accompanying documents are true and correct, with full knowledge that all statements made in this application are subject to investigation and that any false or dishonest answer to any question may be grounds for denial or subsequent revocation of license or permit.

*The City requires an original signature from the applicant. The applicant's signature below does not need to be notarized.*

Signature: \_\_\_\_\_  
Print Name: RAMON BAGUO

Date: NOV. 01, 2022

**OPTIONAL**  
**NEIGHBORHOOD CONTACT SHEET**

**9. SIGNATURES** of adjoining or neighboring property owners in support of the request are not required but are helpful, especially for projects in single-family residential areas. Signatures may be provided below (attach additional sheets if necessary).

NAME (PRINT)	SIGNATURE	ADDRESS	KEY # ON MAP

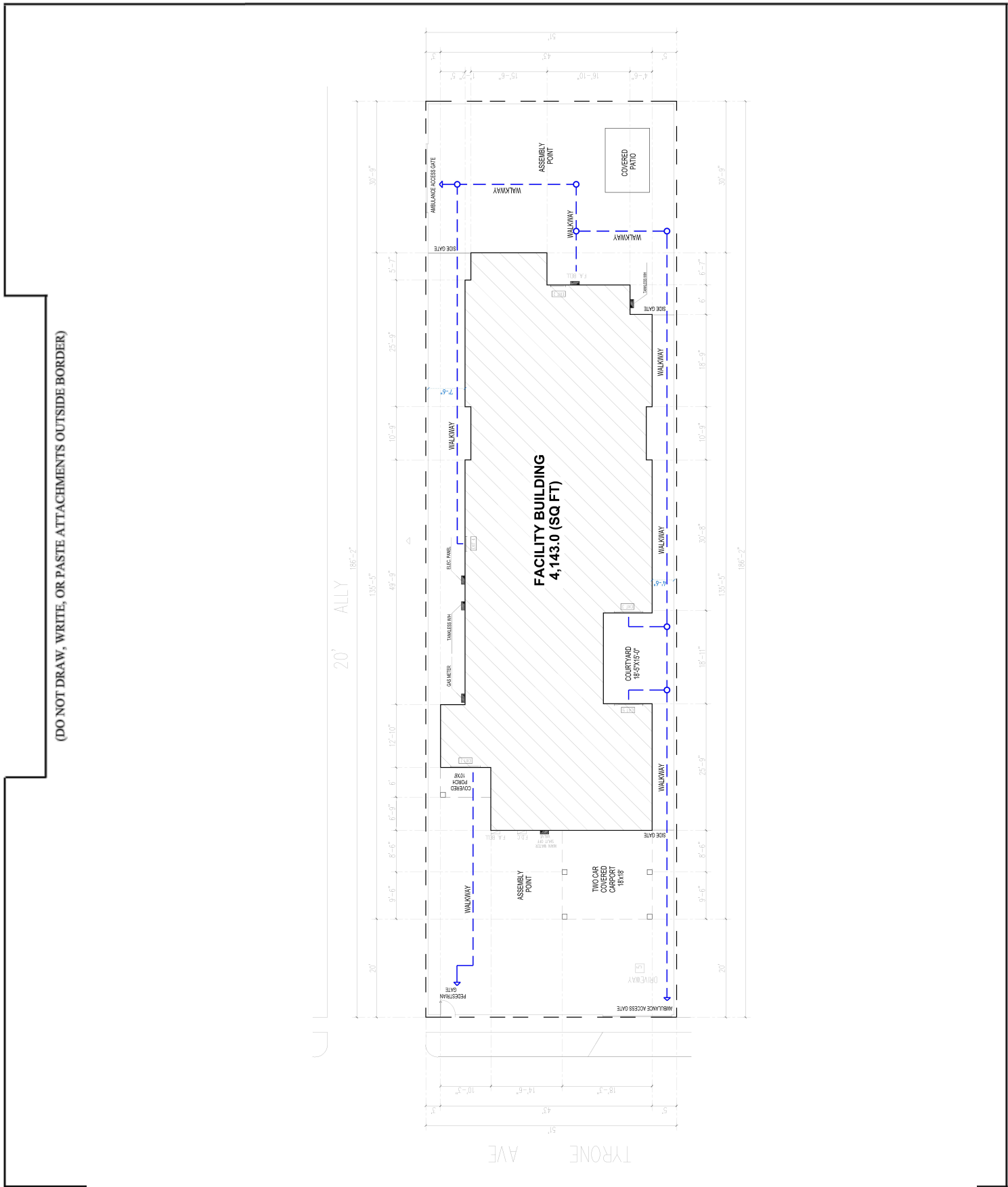
**REVIEW** of the project by the applicable Neighborhood Council is not required but is helpful. If applicable, describe, below or separately, any contact you have had with the Neighborhood Council or other community groups, business associations and/or officials in the area surrounding the project site (attach additional sheets if necessary).

Bldg-Alter/Repair  
Commercial  
Plan Check

City of Los Angeles - Department of Building and Safety

Plan Check #:  
Initiating Office:  
Printed on:

### PLOT PLAN ATTACHMENT



(DO NOT DRAW, WRITE, OR PASTE ATTACHMENTS OUTSIDE BORDER)

ABBREVIATIONS

Table of abbreviations for construction terms, including ANCHOR BOLT, AREA DRAIN, AIR CONDITIONING, etc.

GENERAL NOTES

DIVISION 1 general requirements

Work performed shall comply with the following: These general notes unless otherwise noted on plans or specifications...

GENERAL NOTES

- 1. GENERAL CONTRACTOR (G.C.) TO REVIEW AND VERIFY ALL JOB CONDITIONS, DIMENSIONS, AND DETAILS PRIOR TO BIDDING... 2. ALL WORK SHOWN OR IMPLIED, UNLESS SPECIFICALLY QUESTIONED...

PROJECT DESCRIPTION:

(E) 6 BED RESIDENTIAL CARE FACILITY CUP FOR AN ADDITIONAL 6 BEDS FOR A TOTAL OF 12 BEDS

EXTERIOR: NO EXTERIOR CONSTRUCTION PROPOSED
INTERIOR: NO INTERIOR CONSTRUCTION PROPOSED

SHEET INDEX

Table with columns for SHEET, DESCRIPTION, and DATE.

CODE SUMMARY:

PROJECT SHALL COMPLY WITH: 2019 CALIFORNIA BUILDING CODE, 2019 CALIFORNIA MECHANICAL CODE, 2019 CALIFORNIA PLUMBING CODE, etc.

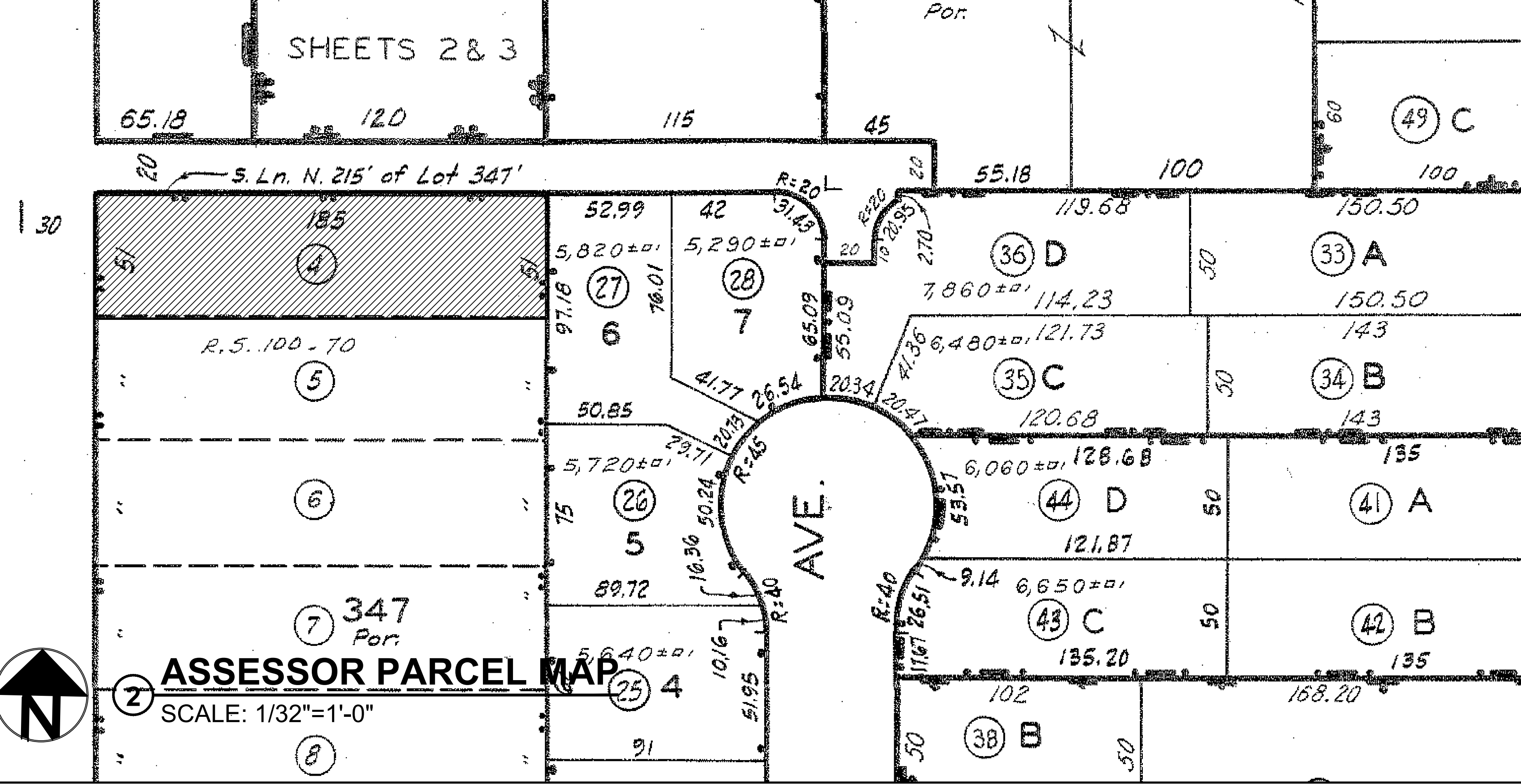
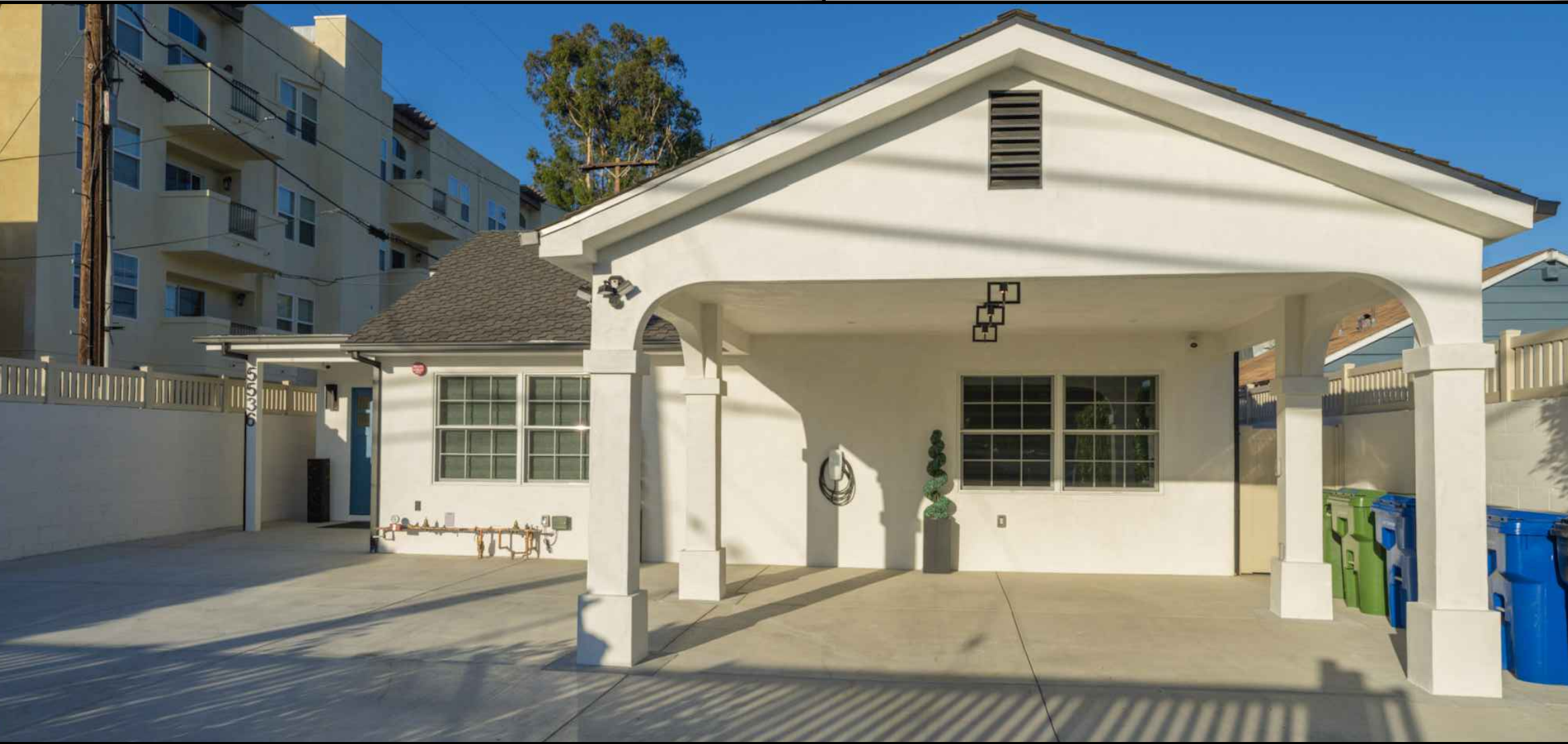
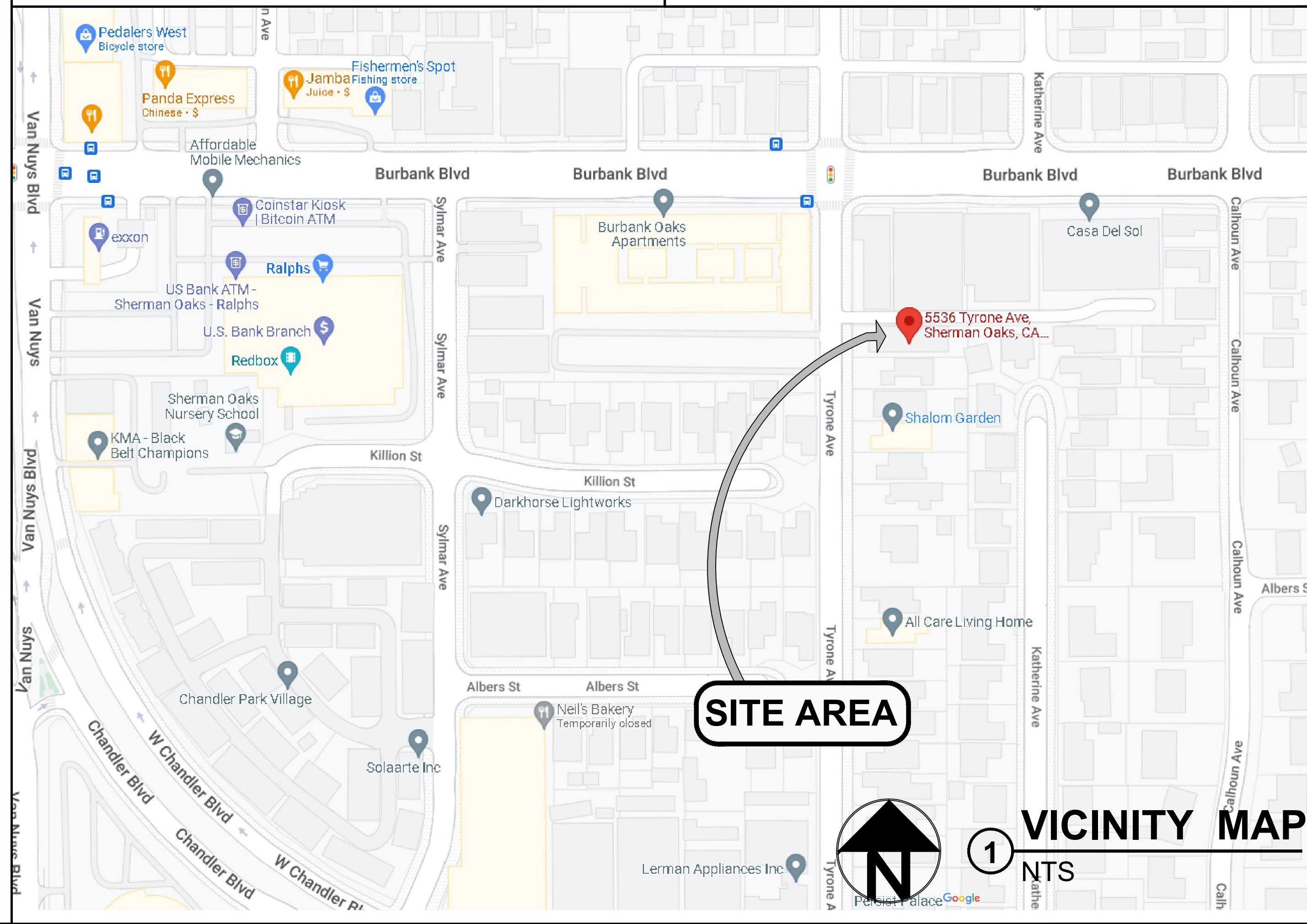
PROJECT SUMMARY:

ASSESSOR PARCEL NUMBER: 2245023004
LEGAL LOT DESCRIPTION: NONE
TRACT: TR 10000

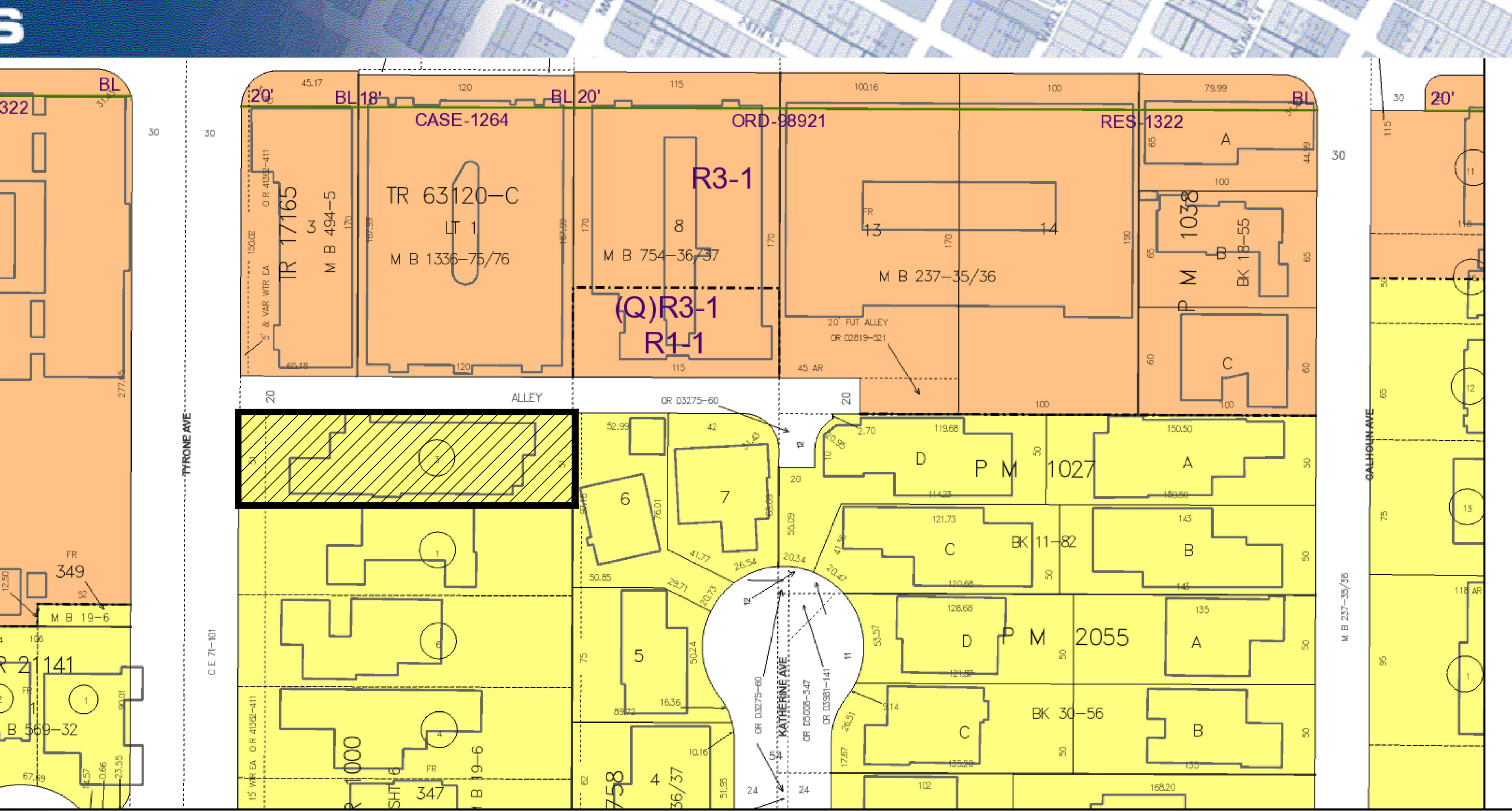
PROJECT DIRECTORY:

PROJECT OWNER: OGRAN H TIRATSUYAN
DESIGNER/EXPIEDITOR: RBCAS, LLC

PARKING MATRIX:



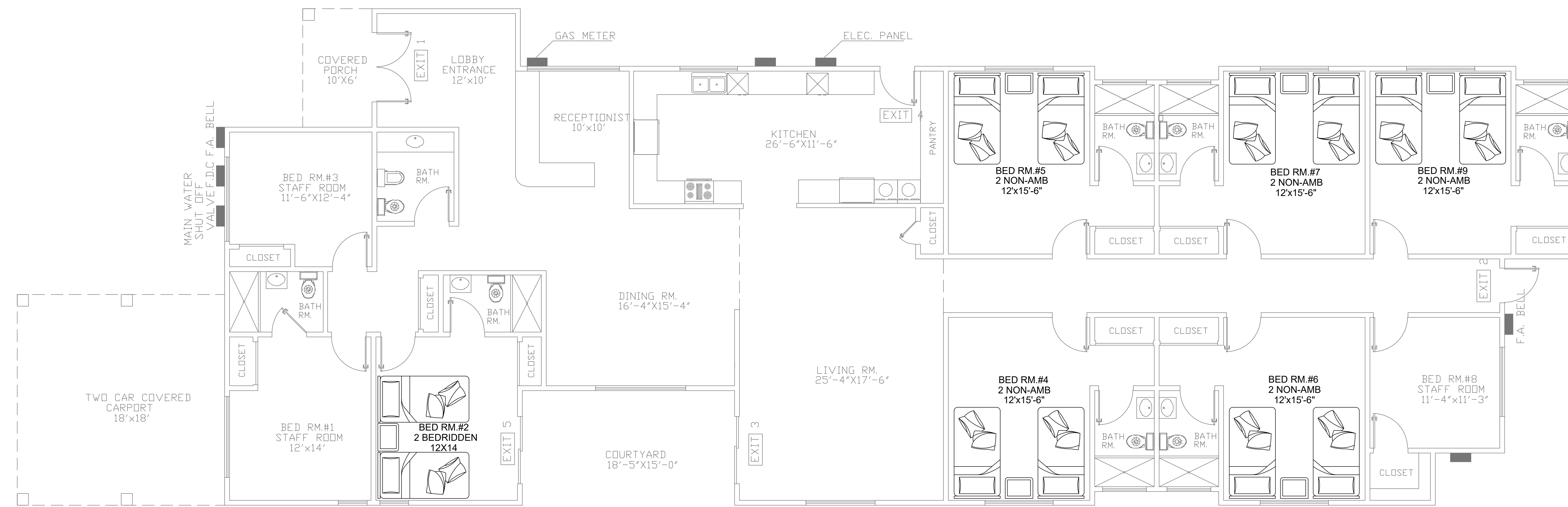
ZIMAS data table with columns for Site Address, File Number, Assessed Land Val, etc.



Project contact information, sheet title (COVER SHEET), date (10-31-22), and drawing by (KEN).







1 (N) PROPOSED FLOOR PLAN  
Scale: 1/4"=1'-0"



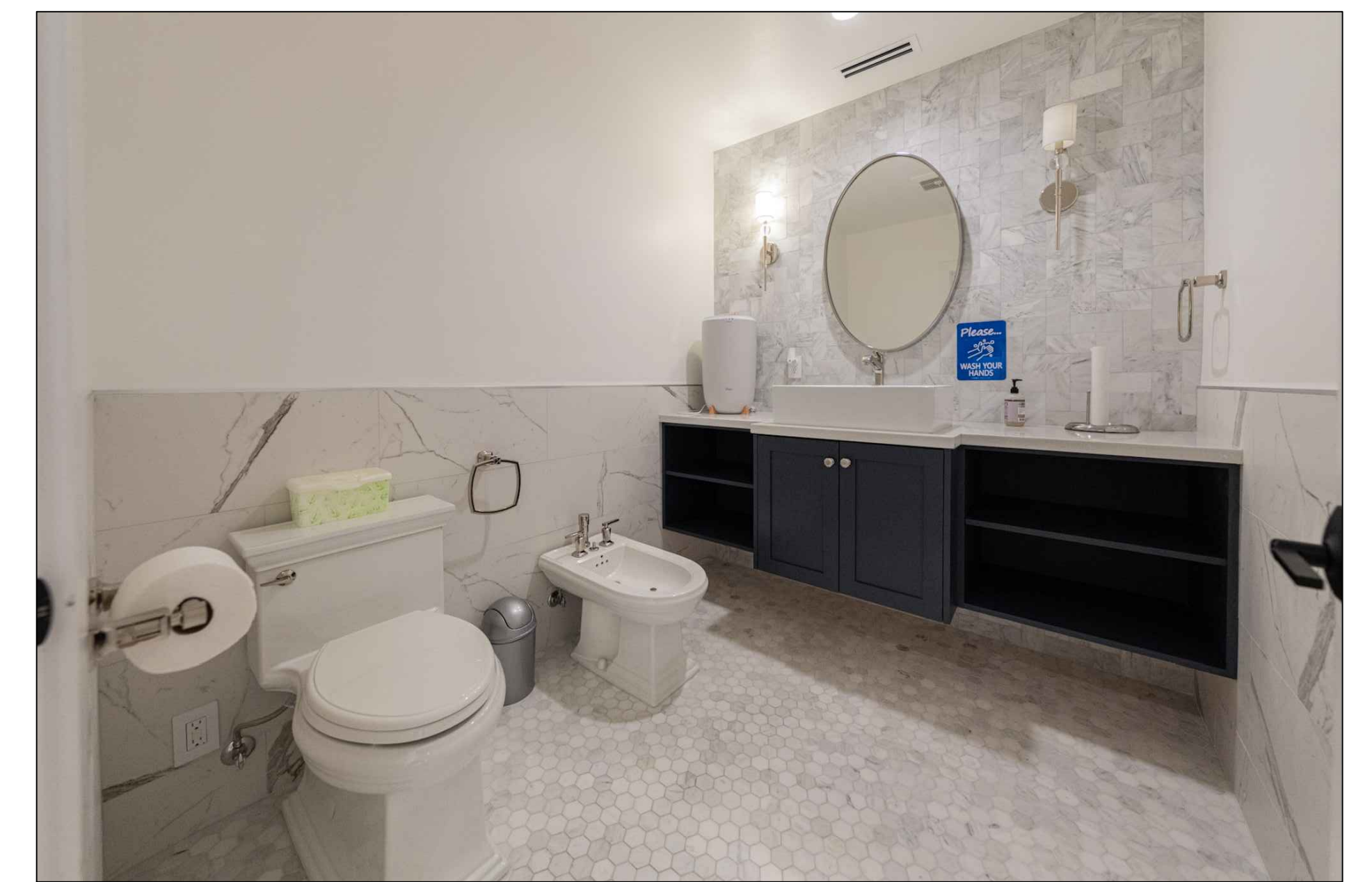
1 AERIAL VIEW



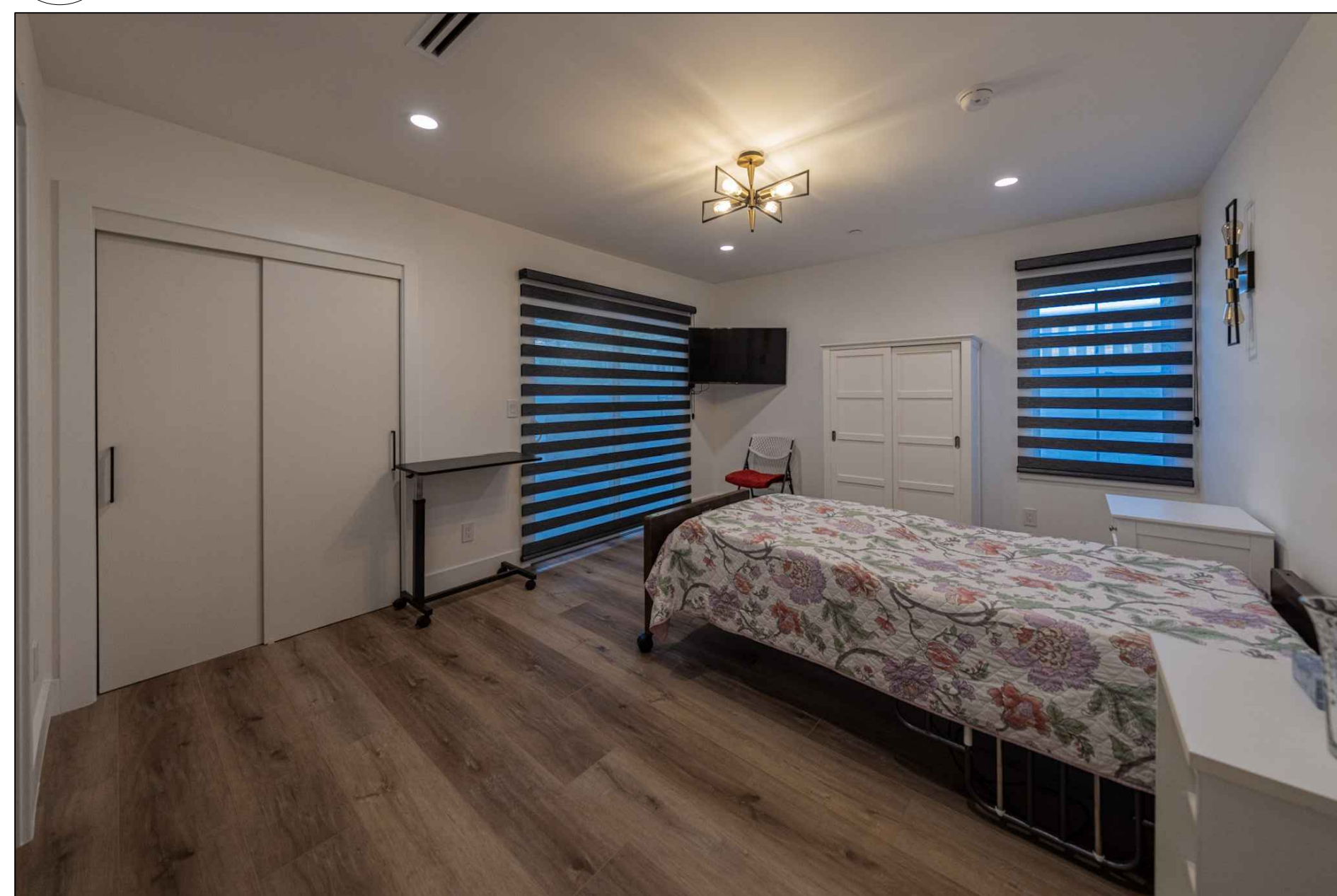
2 ENTRY



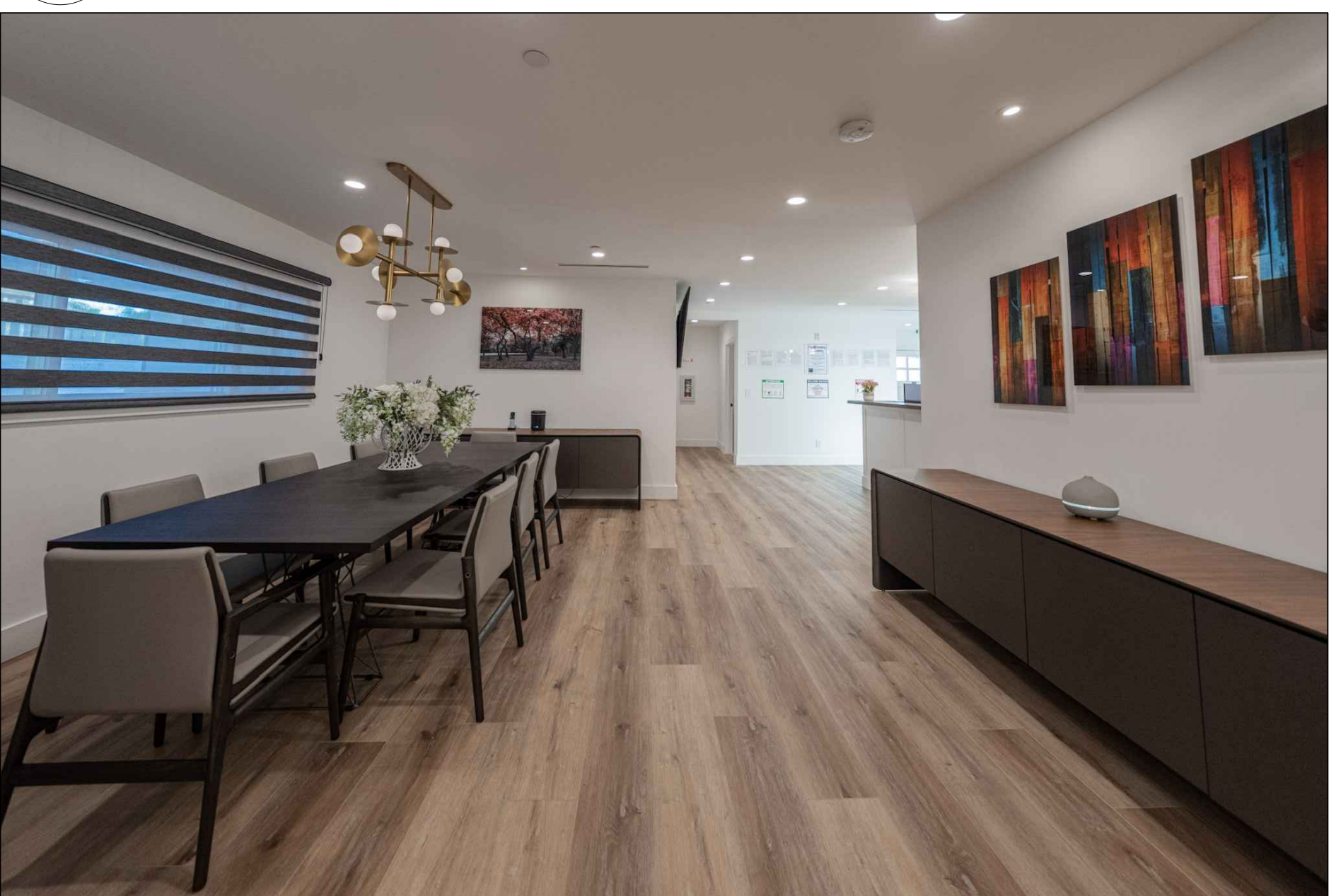
3 LOBBY & RECEPTION AREA



4 BATHROOM @ LOBBY



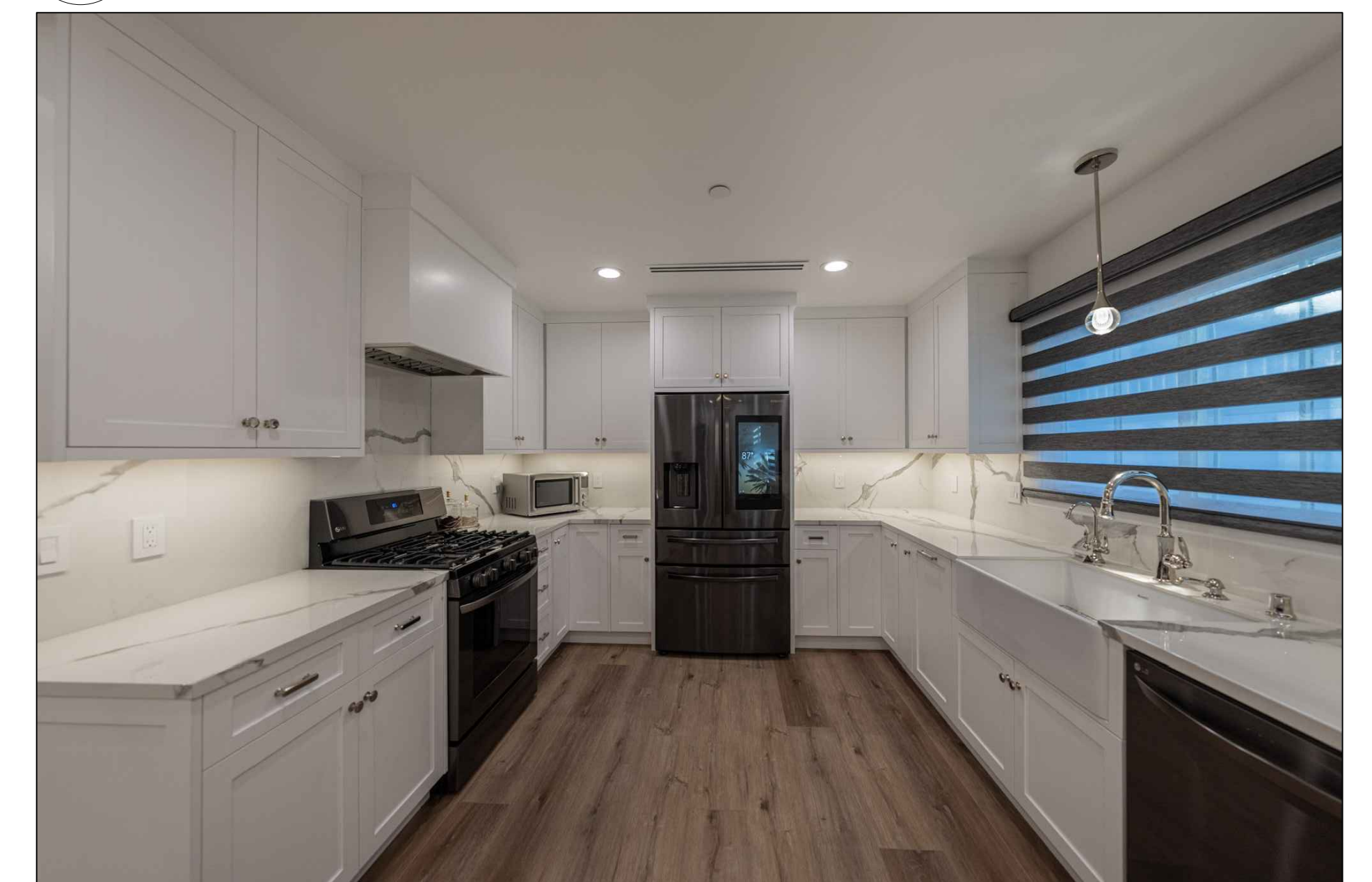
5 STAFF ROOM



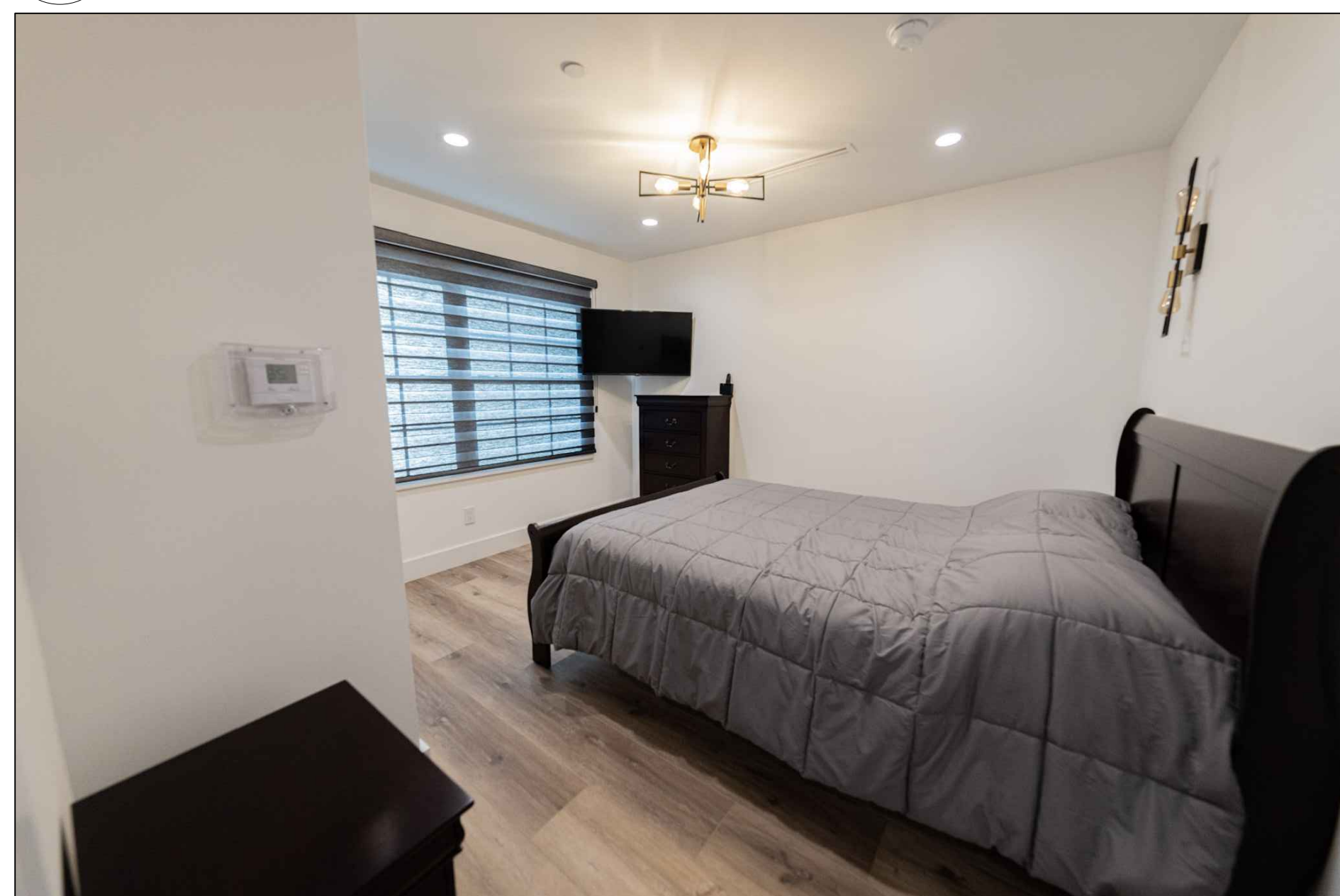
6 DINING AREA



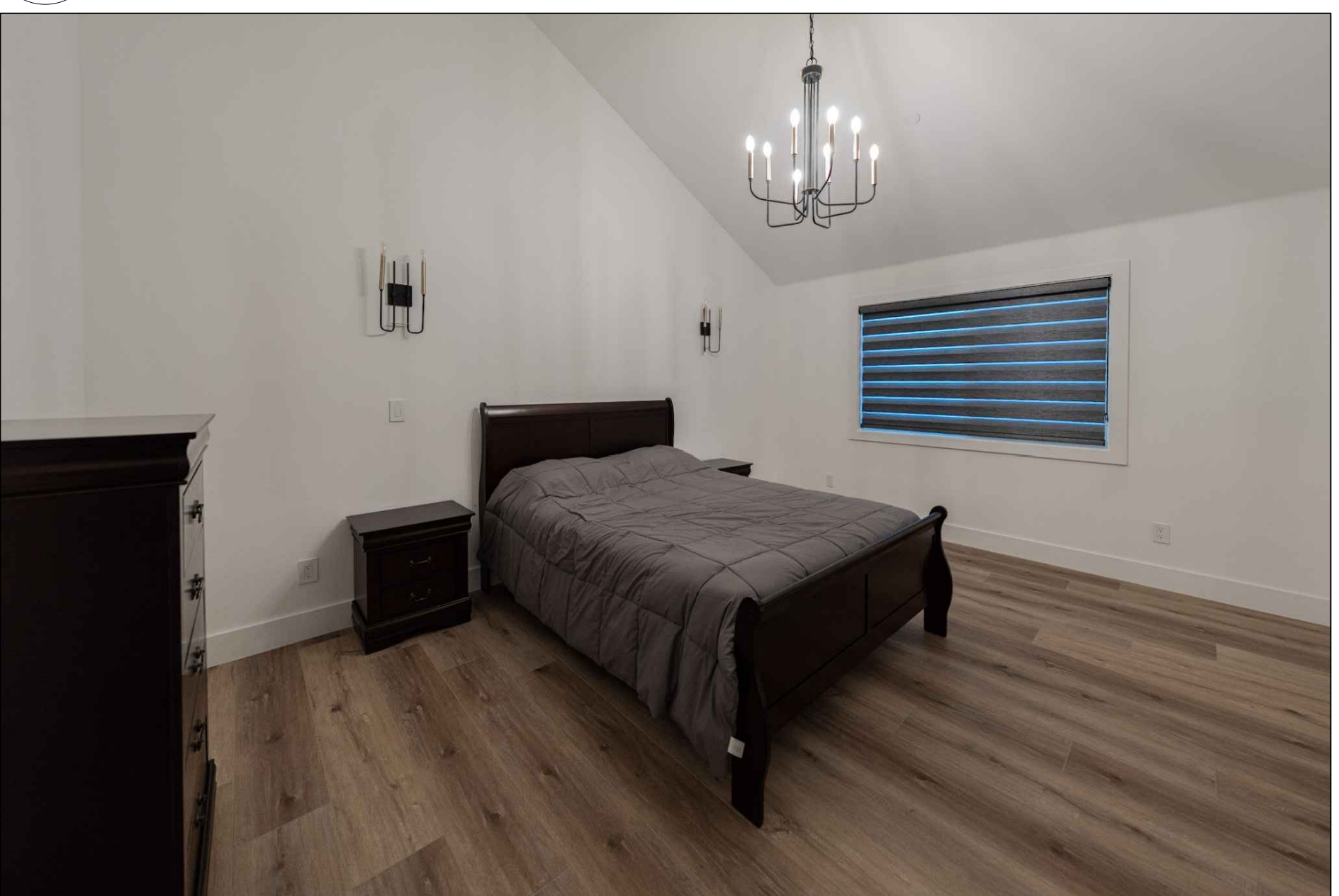
7 LIVING ROOM



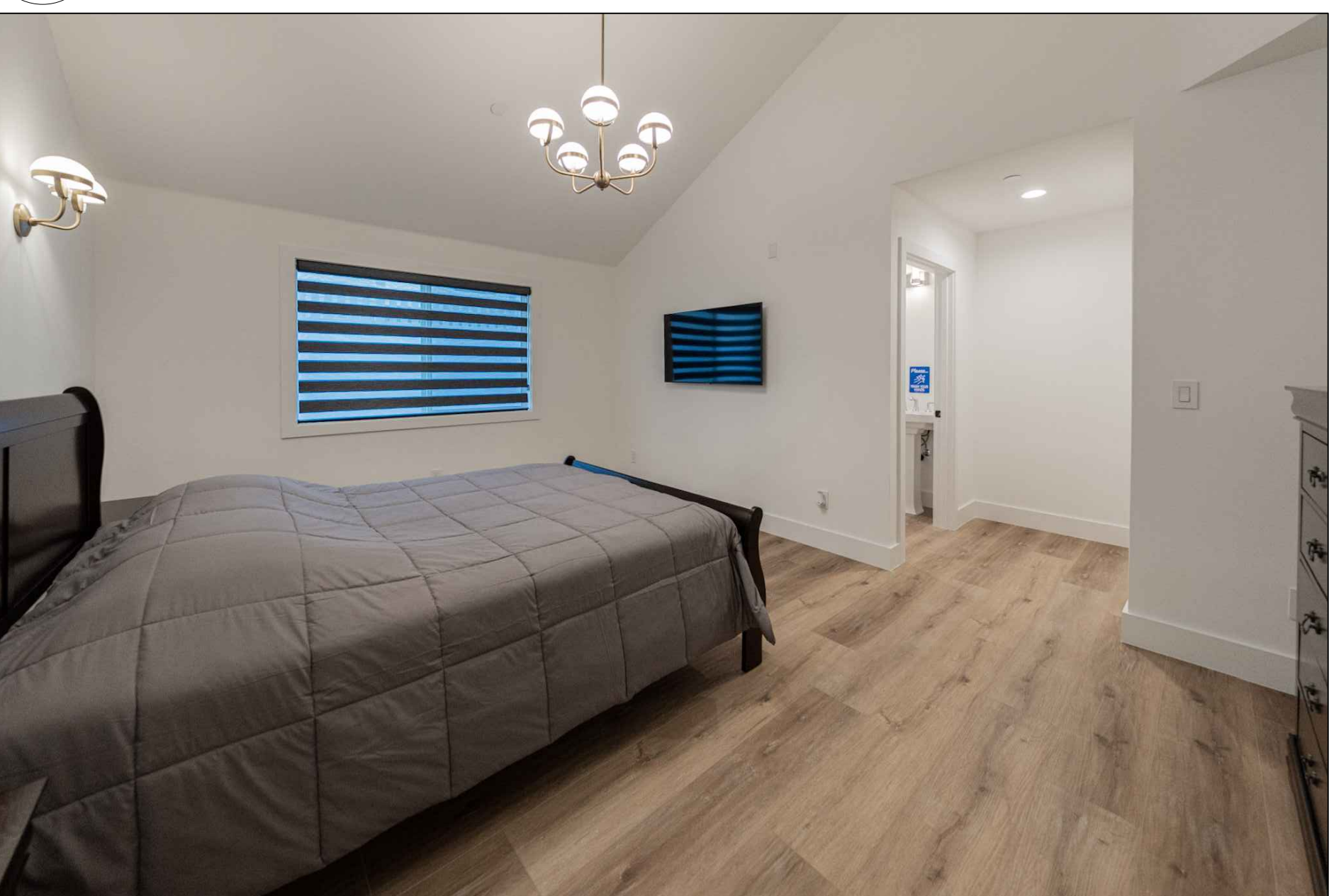
8 KITCHEN



9 BEDROOM 4



10 BEDROOM 5



11 BEDROOM 6



12 REAR/COVER PATIO

PROJECT CONTACT:  
CLIENT / APPLICANT:  
OGAN H TIRATSUYAN  
5536 TYRONE AVE.  
805-705-2409  
DESIGNER / EXPEDITOR:  
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RBLPLANDSIGN@GMAIL.COM  
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PROJECT ADDRESS:

(N) 12 BEDS RESIDENTIAL CARE FACILITY  
5536 TYRONE AVE.  
SHERMAN OAKS, CA 91401



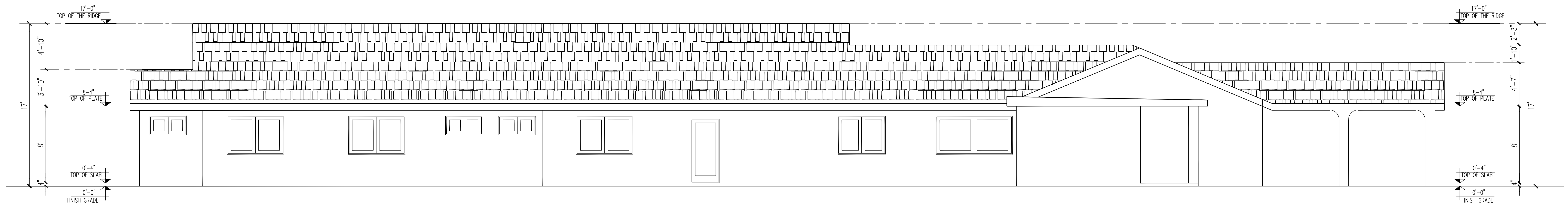
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12 BEDS  
RESIDENTIAL CARE  
FACILITY

PROJECT DESCRIPTION:

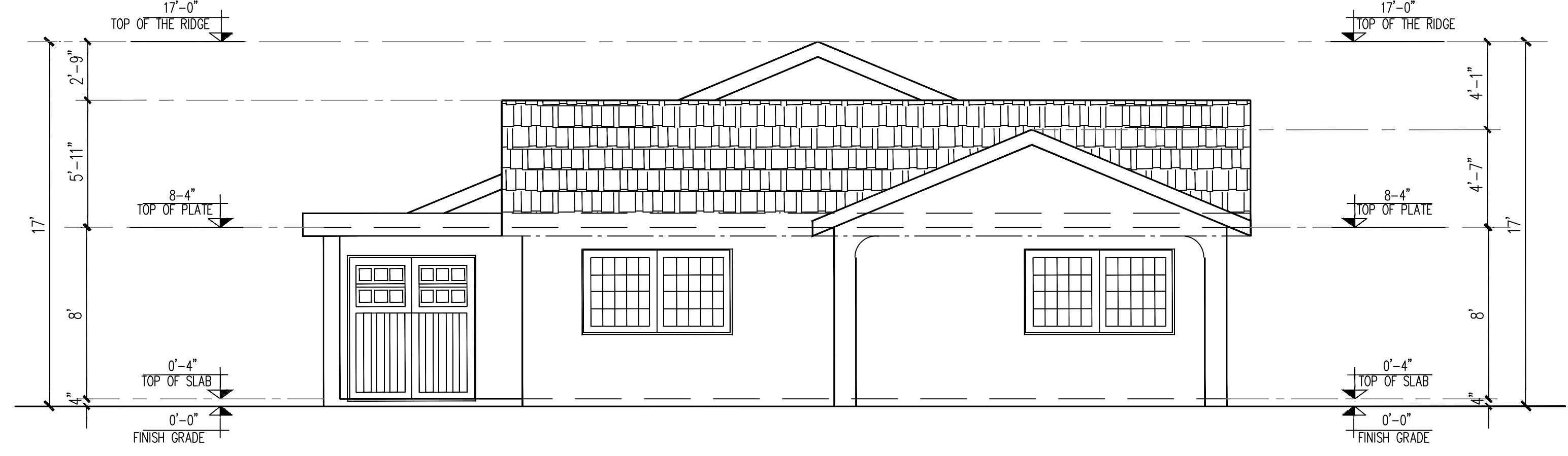
SHEET TITLE:  
PROPOSED  
FLOOR PLAN

DATE:  
10-31-22  
DRAWN BY: KEN

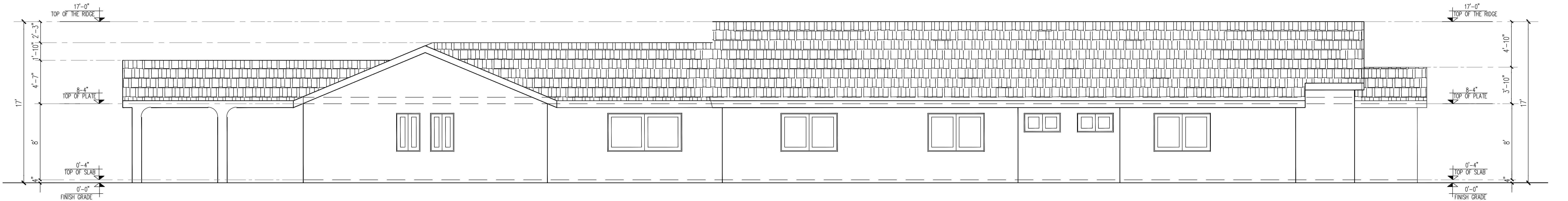
A1.1



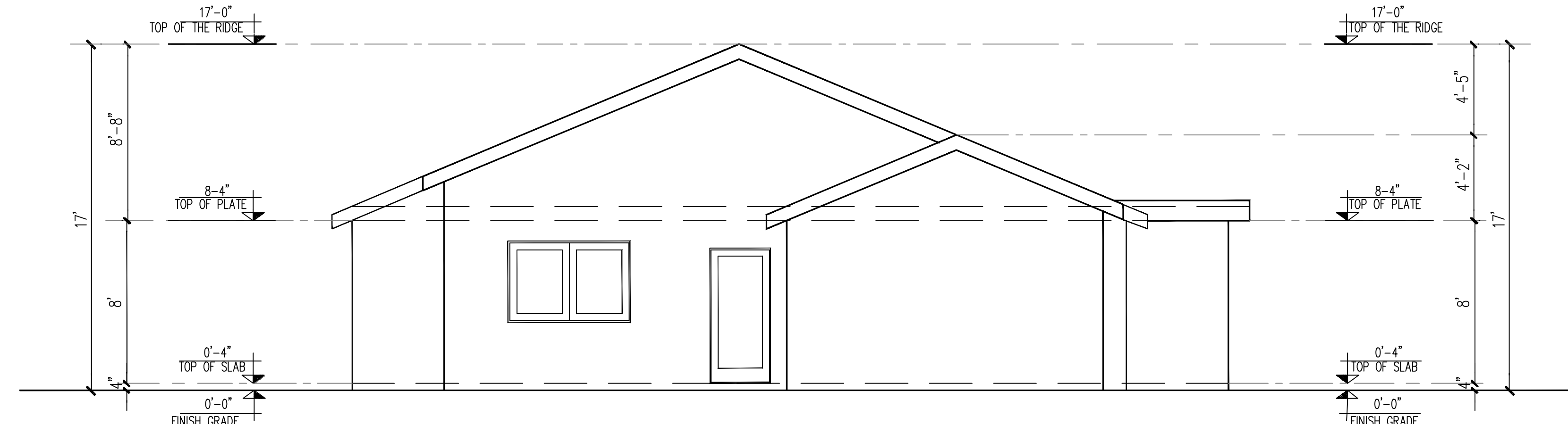
1 (E) NORTH ELEVATION  
Scale: 1/4":1'-0"



2 (E) WEST ELEVATION  
Scale: 1/4":1'-0"



3 (E) SOUTH ELEVATION  
Scale: 1/4":1'-0"



4 (E) EAST ELEVATION  
Scale: 1/4":1'-0"

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PROJECT TITLE:  
12 BEDS  
RESIDENTIAL CARE  
FACILITY

PROJECT DESCRIPTION:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SHEET TITLE:  
ELEVATION

DATE:  
10-31-22  
DRAWN BY: KEN

A2