

# APPLICATION FOR General Pian Referral

### PART 1. PROJECT LOCATION & APPLICANT INFORMATION

A Project Location			
STREET ADDRESS OF PROJECT:			
Sidewalk in front of 835-845 Jackson Street, north lin	ne of Jackson St between Jar	mes Alley & Stone Street	
ASSESSOR'S BLOCK/LOT NO(S) If project is in public right-of-way, provide block	ck/lot nos. of fronting property.	. The second residence and the second	
Block 192 Lot 41			
er and the artist of the state	remained a service of the second service descriptions (pagingles of the last depth of the second service of pa		
The Prince (Marie and American	en ere 10 tolk in 1 tolken 1, 1 tolken med erekkenne i enterlande kant filmer i steret dag. I steps kan best bes		
44 Project Information			
PROJECT TITLE / DESCRIPTION: - Please Summarize and describe the project.			
Install 1 - fuel oil storage tank, 4 - PG&E transforme	•		
on Jackson St an. Install 2 water storage tanks, 1 n	ain water storage tank, and 1	pump station vault partially on	
James Alley. (See Attached Comment #2	and the second block and red determined. It amounts the resident by the second and the second red in the second	- Proof 1496 to the 17 companies - Tomos of the same and the same of the same and the following same of the same and the following same of the same of	
		######################################	
PRESENT OR PREVIOUS USE: Sidewalk	PROPOSED USE:		
Sidewalk			
<ul> <li>Applicant Agent Information:</li> </ul>			
APPLICANT'S NAME:	APPLICANT'S SIGNATURE		
Linda Schumacher, COO, Chinese Hospital			
APPLICANTS ADDRESS.	PHONE:	FAX:	
Chinese Hospital	415-677-2477		
845 Jackson Street	EMAIL:		
San Francisco, CA 94133	lindas@chasf.org		
AGENT'S NAME ( CONTACT FOR INFORMATION ):			
David Lem	COMPANY NAME: Stahl Lem Inc., Constru	iction Manager	
AGENT'S ADDRESS:			
Stahl Lem Inc	PHONE: 415-677-2474	FAX:	
900 Kearny St, Suite 500			
San Francisco, CA 94108	EMAIL: david@stahllem.com		
	david@stamenr.com		
The Department with Jurisdiction (submit ad	Iditional sheets if necessa	ary)	
DEPARTMENT WITH JURISDICTION:			
Bureau of Street Use & Mapping, DPW		Check here if same as above	
NAME OF DEPARTMENT CONTACT:	SIGNATURE OF DEPARTMENT CONT	TACT:	
Rassendyll Dennis			
ADDRESS: Bureau Street Use & Mapping, DPW	PHONE:	FAX:	
875 Stevenson Street, Room 460	415-554-4683		
San Francisco, CA 94103	EMAIL:		
	rassendyll.dennis@sfdpw.org		
I more than one department has jurisdiction, attach additional sheets.			

# PART 2. PROJECT INFORMATION CHECKLIST

 $\Delta = \text{Cropect} \text{ (SNBOKI)SE} \text{ PROJECT & PROPOSED ACTION (Please check all that apply)}$ 

Property or Open Space	Sidewalk, Street, Transportation Route	Publicly Assisted Private Housing		
. Acquisition, Lease	·	New Construction		
Sale / Lease	Widening less than 1 block*	[] Major Change		
Change in Use	Widening	Other (Specify below)		
Other( Specify below )	Narrowing	•		
	Extension			
	Encroachment Permit	Capital Improvement Plan		
Public Building or Structure	Street Vacation	•		
New Construction	Abandonment	Annual Capital Expenditure Plan		
Alteration	Other (Specify below)	Six Year Capital Improvement Program		
		Capital Improvement Project		
Demolition		Other (Specify below)		
Change in Use	Subdivision	×.		
Acquisition / Lease	☐ New			
Sale Lease		Long Term Financing Proposal		
Other (Specify below)	Replat	General Obligation Bond		
	Lot Line Adjustment	General Revenue Bond		
	Other (Specify below)	Non-Profit Corporation Proposal		
Redevelopment Area / Project		· · · · · · · · · · · · · · · · · · ·		
New		Other (Specify below)		
. Major Change	Public Housing			
Other (Specify below)	New Construction			
Content (Specify below)	Major Change			
	Other (Specify below)			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
I Other Land Control of the Control	* Limited to bulb-outs, comer bulbs and sidewa	ilk widening.		
If Other, please specify ( attach addition	onal sheets if necessary ):			
Chinese Hospital is seeking the	annroval for the construction a	nd installation of underground tanks		
and vaults:	application the construction a	ina histaliation of anacigiouna tanks		
	I storage tank honeath the side	walk on lackson Street		
1. One (1) 5,000 gallon fuel oil storage tank beneath the sidewalk on Jackson Street.				
2. Four (4) PG&E electrical transformer vaults beneath the sidewalk on Jackson Street.				
3. Sewer lines from the new hospital, parallel to the property line, but beneath the sidewalk on				
Jackson Street.				
4. Two (2)Enmc 6,000 gallon water storage tanks on James Alley. One-half of James Alley is				
owned by Chinese Hospital. The other one-half is owned by the City. The storage tanks will be				
installed on Chinese Hospital property but will extend partially into the public alley.				
5. A rain water storage tank on James Alley. The tank will be installed on Chinese Hospital				
property but will extend partially into the public alley.				
6. A pump station vault on James Alley. The vault will be installed on Chinese Hospital property				
but will extend partially into the public alley.				
l L				

5. That a diverse econduc to commercial these sectors be enl	omic base be maintained by protecting our industrial and service sectors from displacement office development, and that future opportunities for resident employment and ownership in anced;
There will not displa pump vault and sew	cement of industrial and services sectors as the storage tanks, transformer vaults, er lines will be located beneath the sidewalk.
6. That the City achiev	ve the greatest possible preparedness to protect against injury and loss of life in an earthquak
The storage tanks, tr	Il improve the health care for the community and emergency health services against injury inquake. The New Hospital will be built to current building code seismic requirements. ansformer vaults, pump vault and sewer line are critical to the operation of the New Hospit tion for emergency health care services required during an earthquake.
7 That landmarks and	l historic buildings be preserved; and
The installation of store or historic buildings.	rage tanks, transformer vaults, pump vault and sewer line will not impact any landmark
9. That our marks and	
	open space and their access to sunlight and vistas be protected from development.
The installation of the the sidewalk and will	e storage tanks, transformer vaults, pump vault and sewer line will be beneath not impact parks and open space and their access to sunlight and vistas.

# PART 4. APPLICATION CHECKLIST & APPLICANT AFFIDAVIT

### A Application Submittal Checklist

Applications must be accompanied by this checklist and required materials. The checklist is to be completed and signed by the applicant or authorized agent and the City Department with jurisdiction.

	HEQUIRED MATERIALS ( Check if provided )	IF NOT PROVIDED, PLEASE EXPLAIN
	Two copies of the completed application, with all blanks filled in, signed by applicant and 2 copies of the following application materials:	
	Name and signature of City Department with jurisdiction over the project	
	Letter from Applicant, authorizing agent to represent applicant	
	Set of project drawings	remaining programme and the companion of
	Location Map (showing adjacent properties)	Community of Magazine and Community and the Community of
	Site Plan	e name kan semberanganga binarangga pina semi-angad and membaga dan pina dibaggapata - memangan per mendebagan
	8.5"x11" or 11"x17" Reduction of Site Plan	n mar man all hairman albaid. Anns albain shifte an man a f-hairman aid lighteagan a diff-albaid sama a ma s
	Architectural floors plans and elevations	
	Photographs of Project Site and its immediate vicinity, with viewpoints labeled	and the second and th
	Planning Code Section 101.1 Prop. M Findings	
	Check payable to Planning Dept.	provinces transaction (1975) and configuration (i.e. a) a community of management (1975) as a
	explicant's "Affidavit	
1 00	, , , , , , , , , , , , , , , , , , , ,	
	<ul> <li>a. The undersigned is the owner or authorized agent of the owner of this proper</li> <li>b. The information presented is true and correct to the best of my knowledge.</li> <li>c. I understand that other applications and information may be required.</li> </ul>	tty.
	- Tinda Scheimachie	10-17-12
	Signature or Applicant Date	
	Linda Schumacher, COO, Chinese Hospital  Name of Applicant or Authorized Agent (Type or Print)	
	Table O. Applicant O. Admonted Agent (1998 d. Fills)	
	Signature of City Department Representative (If City-sponsored Project)  Date	
	Name of City Department Representative ( Type or Print )	

After your case is assigned to a planner, you may be contacted and asked to provide an electronic version of this application including associated photos and drawings.