

RECEIVED

14 MAY 27 AM 11: 23

ST.

Phone: (415) 554-5827 Fax: (415) 554-5324

http://www.sfdpw.com ubdivision.mapping@sfdpw.org

Department of Public Works
Office of the City and County Surveyor

1155 Market Street, 3rd Floor San Francisco, CA 94103

Bruce R. Storrs, City and County Surveyor

Edwin M. Lee, Mayor Mohammed Nuru, Director

Fuad S. Sweiss, PE, PLS,
City Engineer & Deputy Director of Engineering

TENTATIVE MAP DECISION

Date: October 22, 2013

Department of City Planning 1650 Mission Street, Suite 400 San Francisco, CA 94103 Project ID:7844

Project Type:5 Units Condo Conversion

Address# StreetName Block Lot

2715 - 2719 SACRAMENTO ST 0633 015

Tentative Map Referral

Attention: Mr. Scott F. Sanchez

The subject Tentative Map has been reviewed by the Planning Department and does comply with applicable provisions of the Planning Code. On balance, the Tentative Map is consistent with the General Plan and the Priority Policies of Planning Code Section 101.1 based on the attached findings. The subject referral is exempt from environmental review per Class 1 California Environmental Quality Act Guidelines.

 $\sqrt{}$

The subject Tentative Map has been reviewed by the Planning Department and does comply with applicable provisions of the Planning Code subject to the following conditions (Any requested documents should be sent in with a copy of this letter to Scott F. Sanchez at the above address):

The subject Tentative Map has been reviewed by the Planning Department and does not comply with applicable provisions of the Planning Code. Due to the following reasons (Any requested documents should be sent in with a copy of this letter to Scott F. Sanchez at the above address):

Enclosures:

X Application

X Print of Tentative Map

Sincerely.

Bruce R. Storrs, P.L.S.

City and County Surveyor

5/20/2014

PLANNING DEPARTMENT

Mr. Scott F. Sanchez, Zoning Administrator

NOTICE OF SPECIAL RESTRICTIONS UNDER THE PLANNING CODE

RECORDING REQUESTED BY:)
Goldstein, Gellman, Melbostad, Harris & McSparran, LLP)
And When Recorded Mail To:	CONFORMED COPY of document recorded
Name: R. Boyd McSparran, Esq.	05/13/2014, 2014/879367 with document no the document no the document has not been compared with the original the document has not been compared with the document has not be
Address: 1388 Sutter Street, Ste. #1000	This document has not been compared when the compared the same state of the compared that the compared the compared that
City: San Francisco,))
State: California 94109) Space Above this Line For Recorder's Use

Timothy Miller, Suzan A. Miller, Trustee, Mary E. Whitney,
I (We) John W. Vandoorn aka John W. Van Doorn, Richard Sloan, Barry Gnekow, the owner(s) of that certain real property situated in the City and County of San Francisco, State of California more particularly described as follows:

(PLEASE ATTACH THE LEGAL DESCRIPTION AS ON DEED) BEING ASSESSOR'S BLOCK: 0633; LOT: 015, COMMONLY KNOWN AS: 2715-2719 SACRAMENTO STREET

hereby give notice that there are special restrictions on the use of said property under Part II, Chapter II of the San Francisco Municipal Code (Planning Code).

Said Restrictions consist of conditions attached to the approval of Condominium Conversion Application No. 2013.1567Q by the Planning Department as a referral from the Department of Public Works, Bureau of Street-Use and Mapping, Project ID: 7844.

The tentative map filed with the present application indicates that the subject building at 2715-2719 Sacramento Street is a five-unit building located in a RH-2 (Residential, Housing, Two Family) Zoning District. Within the RH-2 Zoning District, a maximum of four dwelling units can be considered legal and conforming to the Planning Code. The remaining one unit must be considered a legal, nonconforming dwelling unit.

The restrictions and conditions of which notice is hereby given are:

1. That one (1) of the dwelling units shall be designated as the nonconforming dwelling unit if and when any future expansion occurs. Section 181 of the Planning Code provides that a nonconforming use, and any structure occupied by such a use shall not

NOTICE OF SPECIAL RESTRICTIONS UNDER THE PLANNING CODE

be enlarged, intensified, extended or moved to another location, unless the result will be the elimination of the non-conforming use with exceptions outlined under Section 181(b) of the Code.

- 2. That the remaining four (4) dwelling units shall remain legal and conforming, subject to all of the restrictions of the Code, and any other applicable City Codes. In case of conflict, the more restrictive City Code shall apply.
- 3. Minor modifications as determined by the Zoning Administrator may be permitted.
- 4. The property owner(s) shall record a copy of these conditions with the Office of the Recorder of the City and County of San Francisco as part of the property records for the block and lot identified above.

The use of said property contrary to these special restrictions shall constitute a violation of the Planning Code, and no release, modification or elimination of these restrictions shall be valid unless notice thereof is recorded on the Land Records by the Zoning Administrator of the City and County of San Francisco.

Dated:	at San Francisco, California.	
John W. Vandoorn aka John W. Van Doorn	TOANW MMWW (Owner's Signature)	MAY 12, 2014 Date
Richard Sloan		4/29/2014 Parts
Barry Gnekow	(Owner's Signature) (Owner's Signature)	4/29/2014 Date
Timothy Miller	(Owner's Signature)	5/10/14 Date
Suzan A. Miller, Trustee	(Owner's Signature)	5/10/14 Date
Mary E. Whitney	(Owner's Signature) (Owner's Signature) N/A	4/30/20/4 Date
	(Agent's Signature)	•

NOTICE OF SPECIAL RESTRICTIONS UNDER THE PLANNING CODE

This signature(s) must be acknowledged by a notary public before recordation; add Notary Public Certification and Official Notarial Seal.

EXHIBIT A

The land referred to is situated in the County of San Francisco, City of San Francisco, State of California, and is described as follows:

Commencing at a point on the Southerly line of Sacramento Street, distant thereon 156 feet, 3 inches Easterly from the Easterly line of Scott Street; running thence Easterly along the Southerly line of Sacramento Street 50 feet; thence at a right angle Southerly 132 feet, 7-1/8 inches; thence at a right angle Westerly 50 feet and thence at a right angle Northerly 132 feet, 7-1/8 inches to the Southerly line of Sacramento Street and the point of commencement.

Being portion of Western Addition Block No. 425.

APN: Lot 015; Block 0633

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California
County of SAN FRANCISCO
On 05/12/2014 before me, ALLEN BEARD, NOTARY PUBLIC ,
personally appeared TOHN W. VANDORN—
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 ne/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. ALLEN BEARD COMM. 2017884 Notary Public * California San Francisco County Comm. Expires Aor 6, 2017 Signature of Notary Public (Notary Seal)
ADDITIONAL OPTIONAL INFORMATION
INSTRUCTIONS FOR COMPLETING THIS FORM Any acknowledgment completed in California must contain verbiage exactly a 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 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.

	DESCRIPTION OF THE ATTACHED DOCUMENT			
	NOTICE OF SPECIAL RESTRICTIONS (Title or description of attached document)			
	(Tille of description of allegated descalled)			
	(Title or description of attached document continued)			
	Number of Pages Document Date			
	(Additional information)			
	CAPACITY CLAIMED BY THE SIGNER			
ĺ	☐ Individual (s)			
	☐ Corporate Officer			
	(Title)			
	☐ Partner(s)			
	☐ Attorney-in-Fact			
	☐ Trustee(s)			
	Other			
-				

- 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

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

CERTIFICATE OF MCRETO WEED GIVIETY				
State of California				
County of Rushes				
On MAY 10 CO14 before me, DAVE E	3EITISHOFF - NOT SITE PUBLIC , (Here insert name and title of the officer)			
personally appeared				
the within instrument and acknowledged to me that h	e to be the person(s) whose name(s) is/are subscribed to e/she/they executed the same in his/her/their authorized the instrument the person(s), or the entity upon behalf of			
I certify under PENALTY OF PERJURY under the lais true and correct.	ws of the State of California that the foregoing paragraph			
WITNESS my hand and official seal. Signature of Notary Public	DAVE BERGHOFF Comm. #2013684 Notary Public-California A Riverside County My Commission Expires March 21, 2017 (Notary Seal)			
ADDITIONAL OPTIONAL INFORMATION				
DESCRIPTION OF THE ATTACHED DOCUMENT Was care and a stacked document)	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			

CAPACITY CLAIMED BY THE SIGNER ☐ Individual (s) ☐ Corporate Officer (Title) \square Partner(s) ☐ Attorney-in-Fact ☐ Trustee(s) Other ____

(Additional information)

- 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
 - 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

State of California)
Shalfman =====	FUIN TABB WOLDHAN, NOTARY PUBLICAN AND BARRY GNEKOW Name(s) of Signer(s)
County of SHO HEADOSCO	
On APRIL 29 2019 before me, Ke	EVIN TABB WOLOHAN, NOTARY PUBL
Date RICHARD S	Here Insert Name and Title of the Officer CLOSA A AND RAPPY GARGES
personally appeared	Name(s) of Signer(s)
KEVIN TABB WOLOHAN Commission # 1959463 Notary Public - California	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.
San Francisco County My Comm. Expires Dec 3, 2015	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: Signature of Notary Public TIONAL Jaw, it may prove valuable to persons relying on the document
and could prevent fraudulent remova	I and reattachment of this form to another document.
Description of Attached Document Title or Type of Document:	E A SPECIAL RESTAUCTIONS
Decument Date:	E PLANNING CODE Number of Pages: 3
Signar(a) Other Then Named Above.	Number of Fages. 4 Ext./. 4
Canacity(ies) Claimed by Signer(s)	
Signer's Name:	Signer's Name:
□ Corporate Officer — Title(s):	□ Corporate Officer — Title(s):
☐ Individual	☐ Individual
☐ Partner — ☐ Limited ☐ General	☐ Partner — ☐ Limited ☐ General
☐ Attorney in Fact	☐ Attorney in Fact
□ Trustee	☐ Trustee
☐ Guardian or Conservator	☐ Guardian or Conservator
☐ Other:	Other:
Signer Is Representing:	Signer's Name: Corporate Officer — Title(s): Individual Partner — Limited General Attorney in Fact Trustee Guardian or Conservator Other: Signer Is Representing:

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

CERTIFICATE OF	TOTAL O WEED GIVEN VI
State of California	
County of San Francisco	
On 4/30/14 before me, Any	(Here insert name and title of the officer)
personally appeared MANY WHITTIEY	
the within instrument and acknowledged to me that	ence to be the person(s) whose name(s) is/are subscribed to at he/she/they executed the same in his/her/their authorized on the instrument the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJURY under the is true and correct.	laws of the State of California that the foregoing paragraph
WITNESS my hand and official seal.	AMY FORSETH COMM. # 1946375 NOTARY PUBLIC CALIFORNIA O ALAMEDA COUNTY My Commission Expires
Signature of Notary Public	(Notary Seal)
ADDITIONAL OP	TIONAL INFORMATION
DESCRIPTION OF THE ATTACHED DOCUMENT Notice of Special Assimulary (Title or description of attached document) Mod The Assimular Cost (Title or description of attached document continued)	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.
Number of Pages Document Date4/50(14	 State and County information must be the State and County where the documen signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which

CAPACITY CLAIMED BY THE SIGNER Individual (s) ☐ Corporate Officer (Title) ☐ Partner(s) ☐ Attorney-in-Fact Trustee(s) ☐ Other

(Additional information)

- 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
- 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