



CITY OF AGOURA HILLS PLANNING AND COMMUNITY DEVELOPMENT DEPARTMENT

ENVIRONMENTAL QUESTIONNAIRE

The following questionnaire should be filled out by a person familiar with the project and physical aspects of the site.

General Project Information

Applicant's Name and Title: _____

Applicant's Contact Telephone: _____

Applicant's Contact Address: _____

APN: _____

Project Address: _____

Site Size (square feet and acres): _____

Site Information

Would the project result in the following, either onsite or offsite? If so, please explain how.

- 1 Change in dust, ash, smoke, fumes or odors in the vicinity?

- 2 Change in any natural features, including drainages, creeks, lakes, hillsides?

- 3 Change in scenic views or vistas from existing residential areas or public lands or roads?

- 4 Alteration or removal of oak trees, or other biological feature or habitat community?

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- 5 Alteration of existing drainage patterns?
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- 6 Change in groundwater quality or quantity?
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- 7 Change in absorption rates, or the rate and amount of surface water runoff?
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- 8 Discharge into surface waters, or in any alteration of surface water quality?
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- 9 Alterations to the course or flow of floodwaters, or exposure of people or property to water related hazards, such as flooding?
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- 10 Change in existing noise or vibration levels? Exposure of people to severe noise or vibration levels?
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- 11 Site located on filled land or on slope of 10% or greater? Provide % slope.
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- 12 Unstable earth conditions or changes in geologic substructure?
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- 13 Disruptions, displacements, compaction or overcovering of the soil?
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14 Exposure of people or property to geologic hazards, such as earthquakes, landslides, mudslides, ground failure, or similar hazards?

15 Will the project produce new light and glare?

16 Risk of explosion or release of hazardous substances (including, but not limited to, oil, pesticides, chemicals or radiation) in the event of an accident or upset conditions?

17 Creation of any other health hazard or potential health hazard?

18 Alteration of or destruction of prehistoric or historic archaeological site?

19 Adverse physical or aesthetic effects to a prehistoric or historic building, structure or object?

Name and Title of Authorized Individual Completing This Form:

Signature: _____

Date: _____

Hazardous Waste and Substances Statement

Before the City of Agoura Hills can accept this application as complete, the applicant must consult the lists prepared pursuant to Section 65962.5 of the Government Code and submit a signed statement indicating whether the project and any alternatives are located on any such list. The lists are available online at www.calepa.ca.gov/sitecleanup/corteselist. This site is sponsored by the Dept. of Toxic Substances of the California Environmental Protection Agency.

If the site is NOT on such a list, please sign below the following statement.

I have consulted the lists compiled pursuant to Section 65962.5 of the Government Code and hereby certify that the project and any alternatives proposed in this application are NOT contained on these lists.

Name and Title of Applicant: _____

Signature of Applicant: _____

Date: _____

If the site IS on such a list, please provide a copy of the Cal EPA report for the site, and if available, the EPA identification number, and sign below.

Name and Title of Applicant: _____

Signature of Applicant: _____

Date: _____

CERTIFICATION: I hereby certify that the statements furnished above in this questionnaire and in the attached exhibits present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements, and information presented are true and correct to the best of my knowledge and belief.

Name and Title of Authorized Individual Completing This Form:

Signature of Applicant: _____

Date: _____