



CITY OF ROSEMEAD

TENTATIVE PARCEL MAP INFORMATION SHEET

DESCRIPTION:

A **Tentative Parcel Map** is required by state law to divide property into four (4) legal lots or less. The map will be conditioned to provide for basic services and improvements prior to any construction. The map must record within two (2) years of the date approval. A Time Extension to record the map may be requested from Planning Commission prior to the expiration of the map.

PROCESS:

1. **Pre-Application meeting (s):** A meeting with the Planning Department is strongly encouraged PRIOR to submitting an application. Such a meeting will help provide you with information in terms of requirements, standards, and fees and will help you in preparing your application.
2. **Development Review Committee (DRC):** The DRC is an advisory committee composed of City Staff and other agencies which review projects for compliance with existing codes and standards. The DRC does not have formal decision making authority. Prior to the public hearing, a DRC meeting is scheduled. After the DRC meeting, you will be advised of the conditions of approval and the City staff's recommendation on your project. There is an opportunity at this stage of the process to discuss areas of concern or differences and resolve them prior to Planning Commission and City Council Action.
3. **Planning Commission:** A public hearing before the Planning Commission is conducted. At the hearing, City staff will present a report on your application. The conditions of approval and recommendations to the Planning Commission will be those discussed with you previously. Members of the public will be invited to make comments on your project. The decision of the Planning Commission is final unless appealed to the City Council.

**CITY OF ROSEMEAD
TENTATIVE PARCEL MAP
SUBMITTAL REQUIREMENTS:**

- 1. APPLICATION FORM, WITH OWNER & APPLICANT'S SIGNATURE.
- 2. ENVIRONMENTAL APPLICATION FORM.
- 3. PRELIMINARY TITLE REPORT (must be prepared within past 6 months).
- 4. 20 COPIES OF MAP (folded to 8 ½' X 11' see attached Parcel Map Checklist for details).
- 5. 1 (8 ½' X 11') COPY OF PROPERTY OWNER'S MAP AND TWO (2) SETS OF GUMMED LABELS (Per mailing list submittal requirements).
- 6. APPLICATION FEES (See Fee Schedule).
- 7. WATER AND SEWER WILL SERVE LETTER(S)
- 8. HAZARDOUS WASTE SITE DECLARATION SHEET.
- 9. OTHER INFORMATION THAT MAY INCLUDE BIOLOGICAL SURVEYS, DELINEATIONS STUDY, CULTURAL RESOURCE ASSESSMENT OR OTHER ITEMS.
- 10. 8.5" X 11" REDUCTION OF ALL PLANS.
- 11. AN INITIAL TRAFFIC ASSESMENT REPORT SHALL BE SUBMITTED TO THE CITY (SEE ATTACHED TAFFIC IMPACT STUDY REQUIREMENTS).
- 12. COMPLETED "CHECKLIST FOR IDENTIFYING PROJECTS REQUIRING A PROJECT- SPECIFIC WATER QUALITY MANAGEMENT PLAN (WQMP) WITHIN THE LOS ANGELES COUNTY."
- 13. COMPLETED "SUMMARY OF PROJECT-SPECIFIC WQMP REQUIREMENTS" AND A PRELIMINARY PROJECT-SPECIFIC WQMP.

CITY OF ROSEMEAD TENTATIVE PARCEL MAP CHECKLIST

The following information is to be shown on all maps submitted as part of an application for a Tentative Parcel Map:

- 1. Tentative Parcel number with letters and numerals not less than one-half (½) inch in height, in bold face type.
- 2. Name, address, and telephone number of the record owner and subdivider of the land.
- 3. Name, address, and telephone number, and license number of the Registered Civil Engineer or Surveyor who prepared the map.
- 4. A revision box to indicate revisions made to maps previously submitted.
- 5. Sufficient legal description to define the boundary of the subdivision.
- 6. Boundaries of the subdivision with suitable descriptions to readily locate the property.
- 7. Date of preparation, north arrow, and scale of the map.
- 8. Tract numbers of adjacent subdivisions including approved tentative maps, and information sufficient to show their relationship to the proposed subdivision (i.e. lot pattern, improvements, streets, buildings, etc).
- 9. Existing and proposed land uses within a 100' radius of the subject property.
- 10. Existing topography of the site and within a 100' radius. Existing contours at 2 foot intervals if the existing ground is less than 10% and 5 foot intervals if the ground slope is 10% or greater. Existing contour lines should be shown as dashed or screened lines.
- 11. Methods for accommodating storm water and drainage. Setbacks from flood control facilities as designated by Los Angeles County Flood Control. If adequate information cannot be provided on the map, the map shall be accompanied by supplemental information as required by the City to clearly describe the accommodation of storm water and drainage.
- 12. Location, width, and purpose of all existing and proposed easements for utilities, drainage, and other purposes shown by dashed lines.
- 13. Location and outline to scale of all existing buildings. Identify buildings to be removed.
- 14. Location (including distances from centerline to property) width and grade of all existing and proposed streets or highways or other right- of-way; ultimate right-of-way dimensions; and cross section of each.

- 15. The location and size of existing and proposed sanitary sewer, water mains and storm drains. Provide elevations and slopes of proposed sewer and storm drains and the distance and direction to existing facilities if they are not adjacent to subject property.
- 16. Lot information, including : dimensions; finished pad elevation, net square feet of each lot. Each lot shall be numbered.
- 17. Boundaries of existing or proposed public areas (i.e. parks, trails, open space areas, etc.) within or adjacent to the subdivision. Each area shall be labeled and show the approximate acreage to the nearest one-tenth acre.
- 18. Location and extent of proposed grading with pad elevation and size of usable pad area. Shade all slopes 3:1 or steeper. Delineate all retaining walls.
- 19. Geological fault lines and hazardous zones as designated by any applicable geotechnical report for the subject property.
- 20. Type and location of existing trees with a trunk diameter of 9.5 inches or greater. Oak trees of four (4) inches or greater in diameter shall in all cases be shown.
- 21. Location of all existing fire hydrants within 500 feet of the front property line.
- 22. A statement of the proposals for sewage disposal, water supply, electric service, gas service, telephone, cable television, and other utilities and services including school district(s) which serve the property.
- 23. If the project is to be phased, show the proposed phases and their sequence of development and timing.
- 24. A vicinity map showing the location of the subdivision.



City of Rosemead

PLANNING APPLICATION FORM

DEPARTMENT USE ONLY

APPLICATION TYPE	\$FEE/DEPOSIT	CASE NUMBER
<input type="checkbox"/> GENERAL PLAN AMENDMENT	\$2,000.00	GPA _____
<input type="checkbox"/> CONDITIONAL USE PERMIT	\$1,200.00	CUP _____
<input type="checkbox"/> MUNICIPAL CODE AMENDMENT	\$2,500.00	MCA _____
<input type="checkbox"/> TENTATIVE PARCEL MAP	\$1,385.00 + \$100 /Lot +	TPM _____
<input type="checkbox"/> TENTATIVE TRACT MAP	\$1,385.00 + \$100/Lot +	TTM _____
<input type="checkbox"/> VARIANCE (See Fee Schedule)	\$ _____	ZV _____
<input type="checkbox"/> ZONE CHANGE	\$1,7000.00	ZC _____
<input type="checkbox"/> PLANNED DEVELOPMENT REVIEW	\$1,200.00	PD-R _____
<input type="checkbox"/> DESIGN REVIEW (See Fee Schedule)	\$ _____	DR _____
<input type="checkbox"/> MODIFICATION	\$890.00	MOD _____
<input type="checkbox"/> PUBLIC CONVENIENCE OR NECESSITY	\$300.00	PCN _____
<input type="checkbox"/> NON RESIDENTIAL CEQA EXEMPTION	\$90.00	
<input type="checkbox"/> OTHER (LA County Clerk Recording Fee)	\$75.00	

APPLICANT TO COMPLETE

APPLICANT _____ PHONE (____) _____ CELL (____) _____
 ADDRESS _____ FAX (____) _____
 CITY _____ STATE _____ ZIP _____

CONTACT PERSON _____ PHONE (____) _____
 First Last
 ADDRESS _____ FAX (____) _____
 CITY _____ STATE _____ ZIP _____
 EMAIL ADDRESS _____

PROPERTY OWNER _____ PHONE (____) _____
 First Last
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 SEND CORRESPONDENCE TO: _____

PROJECT DESCRIPTION

PROPOSED PROJECT _____

PROJECT ADDRESS/LOCATION _____
 APN _____
 GENERAL PLAN DESIGNATION / ZONE _____
 REQUEST (SPECIFY PROPOSED SQ FT., LOT SIZE, USE, AND BLDG. SQ FT.) _____



City of Rosemead

ENVIRONMENTAL APPLICATION

THE PROJECT APPLICANT IS TO COMPLETE THIS APPLICATION SO THE CITY MAY REVIEW THE PROPOSED PROJECT PURSUANT TO THE CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA). FORMAL PROCESSING OF THE PROJECT APPLICATION WILL NOT BEGIN UNTIL THIS ENVIRONMENTAL APPLICATION IS ACCEPTED AS COMPLETE. CALL US AT (626) 569-2140 IF YOU HAVE ANY QUESTIONS.

PROJECT TITLE/NAME _____

APPLICANT _____

CONTACT PERSON _____

ADDRESS _____

ADDRESS _____

TELEPHONE _____

TELEPHONE _____

PROJECT LOCATION _____

APN NUMBER _____

PROJECT DESCRIPTION (PRECISELY DESCRIBE THE PROPOSED PROJECT FOR WHICH APPROVAL IS BEING SOUGHT AND THE APPLICATION BEING SUBMITTED. USE ADDITIONAL SHEETS AND ATTACH TO APPLICATION IF NECESSARY).

ENVIRONMENTAL SETTING

1. SITE SIZE (ALSO ATTACH AN 8-1/2"X11" VICINITY MAP AND SITE PLAN)

2. EXISTING SITE ZONING

3. PRECISELY DESCRIBE THE EXISTING USE AND CONDITION OF THE SITE

4. EXISTING ZONING OF ADJACENT PARCELS

5. PRECISELY DESCRIBE EXISTING USES ADJACENT TO THE SITE

6. DESCRIBE THE PLANT COVER FOUND ON THE SITE, INCLUDING THE NUMBER AND TYPE OF ALL TREES

NOTE: EXPLAIN ANY "YES" OR "MAYBE" RESPONSES IN ATTACHMENTS.

	YES	MAYBE	NO
7. IS THE SITE ON FILLED LAND, SLOPES IN EXCESS OF 10%? IF YES, A GEOLOGICAL AND/OR SOILS INVESTIGATION IS TO ACCOMPANY THIS APPLICATION.	_____	_____	_____
8. HAS THE SITE BEEN SURVEYED FOR HISTORICAL, PALEONTOLOGICAL, OR ARCHAEOLOGICAL RESOURCES? IF YES, A COPY OF THE SURVEY IS TO ACCOMPANY THIS APPLICATION.	_____	_____	_____
9. DOES THE SITE CONTAIN ANY UNIQUE NATURAL, ECOLOGICAL OR SCENIC RESOURCES?	_____	_____	_____
10. DO ANY DRAINAGE SWALES OR CHANNELS BORDER OR CROSS THE SITE?	_____	_____	_____
11. HAS A TRAFFIC STUDY BEEN PREPARED? IF YES, A COPY OF THE STUDY IS TO ACCOMPANY THIS APPLICATION.	_____	_____	_____
12. IS THE SITE IN AN ALQUIST PRIOLO SPECIAL STUDIES FAULT ZONE?	_____	_____	_____
13. ARE THERE ANY OAK TREES ON SITE? IF YES, PLEASE IMMEDIATELY CONTACT THE PLANNING DEPARTMENT.	_____	_____	_____
14. HAS THE PROJECT SITE EVER BEEN USED TO STORE WASTE MATERIALS AND/OR TOXIC SUBSTANCES? IF YES, PLEASE SUBMIT A SITE CLEAN-UP REPORT PER DTSC (DEPARTMENT OF TOXIC SUBSTANCES CONTROL) REGULATIONS TO THE PLANNING DEPARTMENT.	_____	_____	_____

PROJECT DESCRIPTION

COMPLETE THE ITEMS AS THEY PERTAIN TO YOUR PROJECT. ATTACH A COPY OF ANY PLANS SUBMITTED AS PART OF THE PROJECT APPLICATION AND ANY OTHER SUPPLEMENTAL INFORMATION WHICH WILL ASSIST IN THE REVIEW OF THE PROPOSED PROJECT PURSUANT TO CEQA.

1. RESIDENTIAL PROJECTS:

A. NUMBER AND TYPE OF DWELLING UNITS PROPOSED _____

B. GROSS DENSITY OF THE PROPOSED PROJECT _____

C. TYPE AND SIZE OF HOUSEHOLDS EXPECTED _____

D. WILL ANY MULTI-STORY UNITS BE LOCATED ADJACENT TO A HIGHWAY OR FREEWAY?

2. COMMERCIAL, INDUSTRIAL, AND INSTITUTIONAL PROJECTS:

A. INDICATE SPECIFIC TYPE OF USE PROPOSED _____

B. LIST THE GROSS SQUARE FOOTAGE BY EACH TYPE OF USE _____

C. LIST THE GROSS SQUARE FOOTAGE AND NUMBER OF FLOORS FOR EACH BUILDING

D. ESTIMATED NUMBER OF EMPLOYEES ON LARGEST SHIFT _____

E. IDENTIFY ANY PLANNED OUTDOOR ACTIVITIES _____

3. WHAT PERCENTAGE OF THE PROJECT SITE WILL BE COVERED BY: PAVING _____ %
BUILDING _____ % LANDSCAPING _____ %

4. THE MAXIMUM HEIGHT OF STRUCTURES _____

5. DESCRIBE THE AMOUNT AND TYPE OF OFFSTREET PARKING PROPOSED _____

6. DESCRIBE HOW DRAINAGE WILL BE ACCOMMODATED _____

7. IDENTIFY ANY OFF-SITE CONSTRUCTION (PUBLIC OR PRIVATE) REQUIRED TO SUPPORT THIS PROJECT _____

8. PRELIMINARY GRADING PLANS ESTIMATE _____ CUBIC YARDS OF CUT AND _____ YARDS OF FILL.

9. GIVE TIME ESTIMATED DATES FOR THE FOLLOWING:

A. ROUGH GRADING _____

B. FINAL GRADING _____

C. START CONSTRUCTION _____

D. COMPLETE CONSTRUCTION _____

E. DESCRIBE ANY PROJECT PHASING _____

10. LIST ALL OTHER PERMITS OR PUBLIC AGENCY APPROVALS REQUIRED OF THIS PROJECT

11. IS THIS PROJECT PART OF A LARGER PROJECT PREVIOUSLY REVIEWED BY THE CITY? IF YES, IDENTIFY THE REVIEW PROCESS AND ASSOCIATED PROJECT TITLE(S). _____

NOTE: EXPLAIN ANY "YES" OR "MAYBE" RESPONSES IN ATTACHMENTS

	YES	MAYBE	NO
12. DURING CONSTRUCTION, WILL THE PROJECT:			
A. EMIT DUST, ASH, SMOKE, FUMES OR ODORS?	_____	_____	_____
B. ALTER EXISTING DRAINAGE PATTERN	_____	_____	_____
C. CREATE A SUBSTANTIAL DEMAND FOR ENERGY OR WATER?	_____	_____	_____
D. DISCHARGE WATER OR VIOLATE OR DEGRADE WATER QUALITY?	_____	_____	_____
E. INCREASE NOISE LEVELS ON SITE OR FOR ADJOINING AREAS?	_____	_____	_____
F. GENERATE ABNORMALLY LARGE AMOUNTS OF SOLID WASTE OR LITTER?	_____	_____	_____
G. USE, PRODUCE, STORE, OR DISPOSE OF POTENTIALLY HAZARDOUS MATERIALS SUCH AS TOXIC OR RADIOACTIVE SUBSTANCES, FLAMMABLES OR EXPLOSIVES?	_____	_____	_____
H. REQUIRE UNUSUALLY HIGH DEMANDS FOR SERVICES AS POLICE, FIRE, SEWER, SCHOOLS, WATER, PUBLIC RECREATION, ETC.?	_____	_____	_____
I. DISPLACE ANY RESIDENTIAL OCCUPANTS?	_____	_____	_____

CERTIFICATION

I HEREBY CERTIFY THAT THE INFORMATION FURNISHED ABOVE AND IN THE ATTACHED EXHIBITS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

 SIGNATURE

 DATE

 NAME (PRINT)

 REPRESENTING



**CITY OF ROSEMEAD
HAZARDOUS WASTE SITE
DECLARATION SHEET**

I certify that I have reviewed the Hazardous Waste and Substance Sites List on file with the State of California Department of Toxic Substances Control in conformance with the requirements of Government Code Section 65962.5. There are no Hazardous Waste and Substances Sites listed for the subject property or nearby the property. This statement is true and correct to the best of my knowledge.

Signature of Owner/Representative: _____
Printed Name of Owner/Representative: _____
Date: _____

URBAN STORM WATER MITIGATION PLAN (USWMP)

Developer Information for Project Planning, Design & Construction of Priority Projects

USWMP REQUIREMENTS

1. Submit a plan that will implement treatment control Best Management Practices (BMPs) designed to:
 - A. mitigate (infiltrate, filter or treat) storm water from either;
 - a)Volumetric Treatment Control BMP
 - (1) the 85th percentile 24-hour event determined as the maximized capture storm water volume for the area, from the formula recommended in Urban Runoff Quality Management, WEF Manual of Practice No. 23/ASCE Manual of Practice No. 87,(1998) or
 - (2) the volume of annual runoff based on unit basin storage water quality volume, to achieve 80 percent of more volume treatment by the method recommended in California Stormwater Best Management Practices Handbook- Industrial/Commercial,(1993, or
 - (3) the volume of runoff produced from a 0.75 storm event, prior to the discharge to a storm water conveyance system, or
 - (4) the volume of runoff produced from a historical-record based reference 24 hour rainfall criterion for "treatment" (0.75 inch average for the Los Angeles County area) that achieves approximately the same reduction in pollutant loads achieved by the 85th percentile 24-hour runoff event
 - b)Flow Based Treatment Control BMP
 - (1) the flow of runoff produced from a rain event equal to at least 0.2 inches per hour intensity, or
 - (2) the flow of runoff produced from rain event equal to at least two times the 85th percentile hourly rainfall intensity for Los Angeles County, or
 - (3) the flow of rainfall produced from a rain event that will result in treatment of the same portion of runoff as treated using volumetric standards above.
2. Submit a Covenant and Restriction (attached), agreeing to maintain the structural BMPs in "perpetuity".

PLEASE RETURN THIS SHEET WITH YOUR USWMP PLANS

Applicant Name _____ Phone No. _____

Project Address _____

USWMP plans submitted _____ Date Submitted _____

URBAN STORM WATER MITIGATION PLAN (USWMP)

Developer Information for Project Planning, Design & Construction of Priority Projects

Checklist for Categorizing Development Planning Projects as Priority or Exempt

Project Name: _____
 Project Location: _____
 Description of Project: _____

Part A. Proposed Discretionary Project Is:	Yes	No
1. A single-family hillside residence		
2. A 43,560+ square-foot commercial development		
3. An automotive service facilities (SIC codes 5013, 5014, 5541, 7532-7534, and 7536-7539)		
4. A retail gasoline outlet		
5. A restaurant (SIC code 5812)		
6. Housing developments (includes single family homes, multifamily homes, condominiums, and apartments) of ten units or more		
7. Projects located in, adjacent to or discharging directly to an ESA that meet threshold condition identified in this Program		
8. Parking lot 5,000 square feet or more or with 25 or more parking spaces, and potentially exposed to storm water runoff		

If all answers to Part A are No, continue to Part B.

Part B. Proposed Discretionary Project Characteristics ¹ :	Yes	No
1. Vehicle or equipment fueling areas?		
2. Vehicle or equipment maintenance areas, including washing?		
3. Commercial or industrial waste handling or storage, excluding typical office or household waste?		
4. Outdoor handling or storage of hazardous materials or waste?		
5. Outdoor manufacturing areas?		
6. Outdoor food handling or processing?		
7. Outdoor animal care, confinement, or slaughter?		
8. Outdoor horticulture activities?		

EXEMPT PROJECT: Every question in Part A and Part B is answered "NO."

PRIORITY PROJECT: Any question in Part A or Part B is answered "YES."

The Urban Storm Water Mitigation Plan (USWMP) was developed as part of the municipal storm water program to address storm water pollution from new development and redevelopment by the private sector. The USWMP can be considered storm water Best Management Practices (BMPs) and these post-construction BMPs are meant to be a permanent part of the new development or redevelopment for the life of the project. If the above listed development is a Priority Project a USWMP must be submitted to the City for approval.

¹ Activities or materials potentially exposed to storm water and not protected by storm-resistant sheltering. Activities include industrial and commercial facilities operations and construction work. Materials include material handling equipment, industrial machinery, raw materials, intermediate products, byproducts, and waste products however packaged.



**CITY OF ROSEMEAD
APPLICANT'S AFFIDAVIT**

Site Address: _____ Date: _____

Proposed Use: _____

AFFIDAVIT

City of Rosemead
County of Los Angeles
State of California

I/We, _____, hereby certify that I/We am/are the applicant(s) involved in this request, and that the foregoing statements and answers herein contained, and the information herewith submitted are in all respects true and correct to the best of my/our knowledge and belief.

Signature: _____

Print Name(s): _____

Mailing Address:

Address Number Street Apt. # City State Zip Code

Phone: () _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20 _____.

NOTARY PUBLIC



**CITY OF ROSEMEAD
PROPERTY OWNER'S AFFIDAVIT**

Site Address: _____ Date: _____

Proposed Use: _____

AFFIDAVIT

City of Rosemead
County of Los Angeles
State of California

I/We, _____, hereby certify that I/We am/are the property owner(s) involved in this request, and that the foregoing statements and answers herein contained, and the information herewith submitted are in all respects true and correct to the best of my/our knowledge and belief.

Signature: _____

Print Name(s): _____

Mailing Address:

Address Number Street Apt. # City State Zip Code

Phone: () _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20_____.

NOTARY PUBLIC



**CITY OF ROSEMEAD
PROPERTY OWNER'S LIST AFFIDAVIT**

Site Address: _____ Date: _____

Proposed Use: _____

AFFIDAVIT

City of Rosemead
County of Los Angeles
State of California

I/We, _____, hereby certify that I/We am/are the applicant(s) involved in this request, and that the foregoing statements and answers herein contained, and the information herewith submitted are in all respects true and correct to the best of my/our knowledge and belief.

Signature: _____

Print Name(s): _____

Mailing Address:

Address Number Street Apt. # City State Zip Code

Phone: () _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20_____.

NOTARY PUBLIC

RADIUS MAPS*

PROPERTY OWNER LISTS
FOR LOS ANGELES COUNTY

ARMSS (Architecture & Radius Map Services)

Attn: Lucy Polo Garcia
160 No. Holliston Avenue, #5
Pasadena, CA 91106
(818) 968-5843
Evenings: (626) 449-4830

G.C. MAPPING SERVICE

3055 W. Valley Blvd.
Alhambra, CA 91803
(626) 441-1080
FAX: (626) 441-8850
Email:
gcmapping@radiusmaps.com

OWNERSHIP LISTING SERVICE

Attn: Catherine McDermott
PO Box 890684
Temecula, CA 92589
(909) 699-8064 or (800) 499-8064

L.A. MAPPING SERVICE

Attn: Robert Castro
8062 Whitmore Street
Rosemead, CA 91770
(626) 280-8382

KIMBERLY WENDELL

PO Box 264
Los Alamitos, CA 90720
(562) 431-9634

SUSAN W. CASE

917 Glenneyre Street, Suite 7
Laguna Beach, CA 92651
(949) 494-7418

SUE MORENO

More Services
12106 Lambert Avenue
El Monte, CA 91732
(626) 350-5944

T-SQUARE MAPPING SVC.

969 South Raymond Avenue
Pasadena, CA 91105
(626) 403-1803
FAX: (626) 403-2972

FOOTHILL PROJECT MGMT

Attn: Sandra Gunn
117½ 28th Street
Newport Beach, CA 92663
(714) 434-9228
FAX: (714) 434-9228

RADIUS MAP SERVICES

PO Box 3757
South Pasadena, CA 91031
(626) 688-4876
FAX: (626) 284-4931

A.M. MAPPING SERVICES

8001-B Archibald Avenue
PO Box 4710
Rancho Cucamonga, CA 91730
(909) 466-7596
(626) 274-1141
FAX: (909) 466-7595

THE MOREY GROUP

Attn: Lanny Kusada, Vice President
6167 Bristol Parkway, Suite 320
Culver City, CA 90230
(310) 337-7290
FAX: (310) 337-7294

SZETO & ASSOCIATES

Attn: Stan Szeto
2714 Stingle Avenue
Rosemead, CA 91770
(626) 512-5050
FAX: (323) 838-0515

EZ MAPPING SERVICES

Po Box 661464
Arcadia, CA 91066
(626) 241-5151
Email: ezmapping@yahoo.com

BOONE'S QUALITY MAPS

263 W. Olive Ave., Suite 161
Burbank, CA 91502
(310) 930-0239

NOTIFICATION MAPS.COM

23412 Moulton Parkway, Suite 140
Laguna Hills, CA 92653
(866) 752-6266

Angelus Planning Group

225 South Lake Ave., Suite #300
Pasadena, CA 91101
(323) 341-3961

Radius Maps Etc

Attn: Yvette Cuellar
3544 Portola Avenue
Los Angeles, CA 90032
(323) 221-4555
FAX: (323) 226-9492
Email:
radiusmapsetc@sbcglobal.net

* The above references are only an aid to provide you with information about available services. This does *not* constitute a recommendation from the City of Rosemead.