



# City of Rosemead

## PLANNING APPLICATION FORM

APPLICATION TYPE	FEE	CASE NUMBER
___ GENERAL PLAN AMENDMENT	\$2,000.00+ \$50/parcel	GPA
___ CONDITIONAL USE PERMIT	\$1,320.00	CUP
___ ADMINISTRATIVE USE PERMIT	\$500.00	AUP
___ MUNICIPAL CODE AMENDMENT	\$2,750.00	MCA
___ TENTATIVE PARCEL MAP (paid)	\$1,385.00 + \$100/lot	TPM
___ TENTATIVE TRACT MAP	\$1,385.00 + \$100/lot	TTM
___ VARIANCE (Residential)	\$975.00	ZV
___ VARIANCE (All Other)	\$1,375.00	ME
___ MINOR EXCEPTION	\$300.00	ZC
___ ZONE CHANGE	\$1,700.00+ \$50/parcel	SP
___ PLANNED DEVELOPMENT REVIEW	\$1,200.00	PDR
___ DESIGN REVIEW		MOD
___ MODIFICATION OF ENTITLEMENTS	\$800.00	PCN
___ SPECIFIC PLAN (In-house)	\$700.00 (per review)	
___ SPECIFIC PLAN (Outsource)	Cost+ 10%	
___ ADMINISTRATIVE DETERMINATION	\$450.00	
___ PUBLIC CONVENIENCE OR NECESSITY	\$980.00	
___ CEQA EXEMPTION (if applicable)	\$90.00	
___ LA COUNTY CLERK RECORDING FEE	\$75.00	
___ PUBLICATION	\$500.00	
___ OTHER (See Fee Schedule for Development Agreement, Density Bonus, Joint/Off-Site Parking Agreement, Reasonable Accommodation, Time Extension)		
	<b>TOTAL</b>	

### APPLICANT TO COMPLETE

APPLICANT NAME \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

## APPLICANT REPRESENTATIVE

REPRESENTATIVE NAME \_\_\_\_\_

PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

## PROPERTY OWNER

PROPERTY OWNER NAME \_\_\_\_\_

PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

SEND CORRESPONDENCE TO (Circle all that apply):

\_\_\_\_\_ APPLICANT    \_\_\_\_\_ PROPERTY OWNER    \_\_\_\_\_ APPLICANT REPRESENTATIVE

## PROJECT DESCRIPTION

PROPOSED PROJECT \_\_\_\_\_

PROJECT ADDRESS/LOCATION \_\_\_\_\_

APN \_\_\_\_\_

GENERAL PLAN AND ZONE DESIGNATION \_\_\_\_\_

REQUEST (SPECIFY PROPOSED SQ FT., LOT SIZE, USE, AND BLDG. SQ FT) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## **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 DIVISION**

**AFFIDAVIT – PROPERTY OWNER**

Site Address: \_\_\_\_\_

Request: \_\_\_\_\_

**AFFIDAVIT**

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(s): \_\_\_\_\_

Print Name(s): \_\_\_\_\_

Mailing Address:

Address Number \_\_\_\_\_ Street \_\_\_\_\_ Apt./Suite # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Date: \_\_\_\_\_

**ACKNOWLEDGMENT**

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 and title of the officer)

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 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.

Signature \_\_\_\_\_ (Seal)



**CITY OF ROSEMEAD  
PLANNING DIVISION**

**AFFIDAVIT – APPLICANT**

Site Address: \_\_\_\_\_

Request: \_\_\_\_\_

**AFFIDAVIT**

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(s): \_\_\_\_\_

Print Name(s): \_\_\_\_\_

Mailing Address:

Address Number                      Street                      Apt./Suite #                      City                      State                      Zip Code

Phone: (\_\_\_\_\_) \_\_\_\_\_ Date: \_\_\_\_\_

**ACKNOWLEDGMENT**

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 and title of the officer)

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 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.

Signature \_\_\_\_\_ (Seal)





CITY OF ROSEMEAD  
[www.cityofrosemead.org](http://www.cityofrosemead.org)

## ENVIRONMENTAL INFORMATION FORM

Date Filed: \_\_\_\_\_

### GENERAL INFORMATION

1. Name and address of developer or project sponsor: \_\_\_\_\_  
\_\_\_\_\_
2. Address of project: \_\_\_\_\_  
\_\_\_\_\_  
Assessors Block and Lot Number: \_\_\_\_\_  
\_\_\_\_\_
3. Name, address and telephone number of person to be contacted concerning this project:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Indicate number of the permit application for the project to which this form pertains: \_\_\_\_\_  
\_\_\_\_\_
5. List and describe any other related permits and other public approvals required for this project, including those required by city, regional and federal agencies: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Existing Zoning district: \_\_\_\_\_
7. Proposed use of site (Project for which this form is filed): \_\_\_\_\_  
\_\_\_\_\_

### EXISTING PROPERTY INFORMATION

This section of the Environmental Assessment is for information regarding the Existing property only. \*Your application is complete when all attached supplemental applications are completed and submitted. The project planner will notify you if any additional items or reviews are necessary.

Square Footage of Property: \_\_\_\_\_ Average slope of land if over 15% \_\_\_\_\_

#### Surrounding Land Uses:

North: \_\_\_\_\_

South: \_\_\_\_\_

East: \_\_\_\_\_

West: \_\_\_\_\_

EXISTING BUILDING(S)	BUILDING A	BUILDING B	BUILDING C	BUILDING D
Total gross square footage				
Total commercial gross square footage				
Total residential gross square footage				
Year built				
Building footprint in square feet				
Open space / landscaping square footage				
Paving square footage				
Number of parking spaces				
Height of building in feet				
Number of stories				
Number of housing units				
Square feet to be demolished				
Number of covenanted affordable units demolished				
Number of housing units demolished				
Number of hotel / motel rooms to be demolished				
To be altered? ( yes / no )				
To be relocated? ( yes / no )				
Un reinforced masonry? ( yes / no )				
Type of use (i.e. residential, commercial, mixed uses,				

\* Continue to Proposed Information Section

#### ADDRESS OF LOCATIONS OF EXISTING BUILDINGS:

Building A: \_\_\_\_\_

Building B: \_\_\_\_\_

Building C: \_\_\_\_\_

Building D: \_\_\_\_\_

## PROPOSED PROJECT INFORMATION

This section of the Environmental Assessment is for information regarding the Proposed project only.

1. Estimated Valuation: \_\_\_\_\_

2. Explain if the project is located in a geological hazard area (i.e. hillside area, Seismic fault, erosive soils): \_\_\_\_\_

(For more information, please review the City's Geotechnical and Engineering Geology Consultation and Review Process Handout for projects that are required to submit these special studies.)

3. Amount of grading proposed: Cut: \_\_\_\_\_ Fill: \_\_\_\_\_ Balance: \_\_\_\_\_  
Imported: \_\_\_\_\_ Exported: \_\_\_\_\_

4. Type of development (single family residence, apartments, condominiums, commercial, industrial, institutional): \_\_\_\_\_

PROPOSED BUILDING(S)      BUILDING A      BUILDING B      BUILDING C      BUILDING D

Total gross square footage				
Total commercial gross square footage				
Total residential gross square footage				
Building footprint in square feet				
Open space square footage				
Landscaping square footage				
Height of building in feet				
Number of stories				
Number of parking spaces				
Number of housing units				
Number of bedrooms				
Hotel / motel number of rooms				
Hours of operation				
Number of employees				
Square feet of restaurant seating area				
Number of fixed seats (restaurant)				
Number of hotel / motel rooms to be				
UBC occupancy group				
UBC construction type				
Fire sprinklers? yes / no				
Type of use (i.e. residential, commercial,				

\* If there are additional buildings on the site, please attach a separate sheet with the above information for each building.

5. If residential, include the number of units, schedule of unit sizes, range of sales prices or rents, and type of household size expected.

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6. If commercial, indicate the type, whether neighborhood, city or regionally orientated, square footage of sales area, and loading facilities.

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7. If industrial, indicate type, estimated employment per shift, and loading facilities.

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8. If institutional, indicate the major function, estimated employment per shift, estimated occupancy, loading facilities, and community benefits to be derived from the project.

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9. Total housing units: \_\_\_\_\_

10. Is this an affordable Housing Project? Yes ☐ No ☐ # of affordable units: \_\_\_\_\_

**ATTACH AN EXPLANATION of any questions answered with yes.**

11. Is this a phased project? Yes ☐ No ☐

12. Will there be demolition or removal of any structure of any age? Yes ☐ No ☐

13. Will there be any alteration of any existing structure? Yes ☐ No ☐

14. Are the following items applicable to the project or its effects? Discuss below all items checked yes (attach additional sheets as necessary).

	Yes	No
1. Change in existing features of any bays, tidelands, beaches, or hills, or substantial alteration of ground contours.	<input type="checkbox"/>	<input type="checkbox"/>
2. Change in scenic vistas from existing residential areas or public lands or roads.	<input type="checkbox"/>	<input type="checkbox"/>
3. Change in patten, scale or character of general area of project.	<input type="checkbox"/>	<input type="checkbox"/>



	Yes	No
4. Significant amounts of solid waste or litter.	<input type="checkbox"/>	<input type="checkbox"/>
5. Change in dust, ash, smoke, fumes or odors in vicinity.	<input type="checkbox"/>	<input type="checkbox"/>
6. Change in ocean, bay, lake, stream or ground water quality or quantity, or alternation of existing drainage patterns.	<input type="checkbox"/>	<input type="checkbox"/>
7. Substantial change in existing noise or vibration levels in the vicinity.	<input type="checkbox"/>	<input type="checkbox"/>
8. Site on filled land or on slope of 10 percent or more.	<input type="checkbox"/>	<input type="checkbox"/>
9. Use of disposal of potential hazardous materials, such as toxic substances, flammables or explosives.	<input type="checkbox"/>	<input type="checkbox"/>
10. Substantial change in demand for municipal services (police, fire, water, sewage, etc.).	<input type="checkbox"/>	<input type="checkbox"/>
11. Substantially increase fossil fuel consumption (electricity, oil, natural gas, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
12. Relationship to a larger project or series of projects.	<input type="checkbox"/>	<input type="checkbox"/>

## ENVIRONMENTAL SETTING

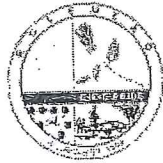
1. Describe the project site as it exists before the project, including information on topography, soil stability, plants and animals, and any cultural, historical or scenic aspects. Describe any existing structures on the site, and the use of the structures. Attach photographs of the site. Snapshot or polaroid photos will be accepted.
2. Describe the surroundings properties, including information on plant and animals and any cultural, historical or scenic aspects. Indicate the type of land use (residential, commercial, etc.), intensity of land use (one-family, apartment houses, shops, department stores, etc.), and scale of development (height, frontage, set-back, rear yard, etc.). Attach photographs of the vicinity. Snapshot or polaroid photos will be accepted.

## CERTIFICATION

I hereby certify that the statements furnished above and in the attached exhibits present the data and information required for this initial evaluation 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.

Date \_\_\_\_\_ Signature \_\_\_\_\_

For \_\_\_\_\_



## 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: \_\_\_\_\_

## **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

### **LA 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

### **TMG SOLUTIONS, INC.**

Attn: Lanny Kusada  
19401 So. Vermont Blvd., Unit  
B201H  
Torrance, CA 90502  
(310) 532-0446 Office  
(310) 480-5407 Cell  
lanny@tmgsolutions.net

### **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](mailto: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](mailto: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.