



Kassab Travel Center Project

Appendix L

Service Planning Letter #3069-0



Elsinore Valley Municipal Water District

Service Planning Letter # 3069-0

March 23, 2018
P.O. Box 3000 ~ 31315 Chaney St ~ Lake Elsinore, CA 92530
Phone: (951) 674-3146 ~ Fax: (951) 641-7554

Description: Commercial Travel Center (WO# 17-007)	Zoning: Commercial
Address: 0 Riverside Drive	# of Lots: 2
City: Lake Elsinore State: CA Zip: 92530	Acreage: +-2.39
APN: 378-007-	Tract Map:
Phone: (714) 695-9300	Pressure Zone: 1434
Email: jkaraki@westernsec.com	

Kassab Travel Center
4887 E. La Palma Avenue, Suite 707
Anaheim, CA 92807
Attn: Joseph Karaki

Will Serve Fees Paid: \$340.00
Paid Date: 03/22/2018
Check / Receipt #: 402791

DEVELOPER

Kassab Travel Center
4887 E. La Palma Avenue, Suite 707
Anaheim, CA 92807
Attn: Joseph Karaki

ENGINEERING

Western States Engineering, Inc.
4887 E. La Palma Avenue, Suite 707
Anaheim, CA 92807
Attn: Joseph Karaki

Elsinore Valley Municipal Water District (“EVMWD”) has determined that water is available to serve the above referenced project based on the information provided. Sewer will require a line extension on Collier Ave. This determination of water & sewer availability shall remain valid for two years from the date of this letter. If the construction of the project has not commenced within this two year time frame, EVMWD will be under no further obligation to serve the project unless the developer receives an updated letter from EVMWD reconfirming water and sewer availability. EVMWD reserves the right to re-evaluate, revise, and update the Service Planning Letter at any time. EVMWD considers the conditions to have expired, automatically, two years from the date of issuance of the Letter, (Section 3903. C EVMWD Administrative Code).

EVMWD will provide such potable water at such pressure as may be available from time to time as a result of its normal operations. Installation of facilities through developer funding shall be made in accordance with the current EVMWD Standards and Administration Code. In order for us to provide adequate water for domestic use as well as fire service protection, it may be necessary for the developer to fund the cost of special facilities, such as, but not limited to booster pumps, in addition to the cost of mainlines and services. EVMWD will provide more specific information regarding special facilities and fees after submittal of your improvement plans, fire department requirements, and engineering fees for this project.

An estimate of fees will be quoted during the plan check process. Once plans have been accepted by the District and mylars have been submitted a formal invoice of fees will be prepared.

For all Commercial Development, please contact Keith Martinez at (951) 674-3146, extension 8326 regarding District requirements, Industrial Waste application, fees and inspection.

This letter shall at all times be subject to such changes or modifications by EVMWD.
If you have any questions regarding the above, please contact me at (951) 674-3146 Ext. 8427

Authorized by: Christina Bachinski **Date:** 3/23/18



RECEIVED

MAR 22 2018

COMMERCIAL/INDUSTRIAL
ELSINORE VALLEY MUNICIPAL WATER DISTRICT
WILL SERVE & CONNECTION FEE APPLICATION

EVMWD
ENGINEERING DEPARTMENT
BY: HS

GENERAL INFORMATION

Date of Application: Mar 22, 2018

Agency Requesting Letter: PLANNING DEPT./BUILDING & SAFETY

Preferred Delivery Method of Completed Will Serve (Check One): Pickup at District Offices
 Email to (Circle one): Owner/Developer Representative
 Mail to (Circle one): Owner/Developer Representative

CONTACT INFORMATION

Owner/Developer
 Contact Name: RON KASSAB/JOSEPH KARAKI
 Business Name: KASSAB TRAVEL CENTER
 Mailing Address: C/O 4887 E. LA PALMA AVE., SUITE 707 City: ANAHEIM State: CA Zip: 92807
 Email: jkaraki@westernsec.com Telephone: (714) 695-9300 Ext. 100

Representative for Owner/Developer (or) Engineering Firm, if applicable
 Contact Name: JOSEPH KARAKI
 Business Name: WESTERN STATES ENGINEERING INC. Business Type: DESIGN & BUILD
 Mailing Address: 4887 E. LA PALMA AVE., SUITE 707 City: ANAHEIM State: CA Zip: 92807
 Email: jkaraki@westernsec.com; rayojeda@westernsec.com Telephone: (714) 695-9300 Ext. 100

PROJECT INFORMATION

Property Address: 29301 RIVERSIDE DRIVE City: LAKE ELSINORE State: CA Zip: 92530

Assessor's Parcel Number(s): 378-030-07 & 378-030-09

Total Acres: + 2.39 ACRES

Nearest Cross Streets: COLLIER AVE.

Type of Construction: New Construction** Tenant Improvement New Tenant Change in Ownership

Will Serve Request for: Water & Sewer Water Only Sewer Only Irrigation Meters

** FOR NEW COMMERCIAL/INDUSTRIAL BUILDINGS:
 Attach a Site Map (8.5" x 11") identifying building/suite numbers, associated square footage(s), and intended uses (i.e. office, warehouse, retail, restaurant, etc.).
 Provide Engineer's domestic & irrigation water demand calculations.



SERVICES REQUESTED

Building/Suite #	SEWER	WATER				Backflow Required? Yes / No / Not applicable	
	No. of Units	Meter Type Domestic / Irrigation	Meter Size 3/4" 1" 1-1/2" 2" 3" 4"				
BUILDING "A"	2	Domestic and Irrigation	2				Yes
Building "B"	1	Domestic	2				Yes
Canopy 1	N/A	N/A	N/A				N/A
canopy 2	N/A	N/A	N/A				N/A

NOT SURE
YES

If you require more information please contact Engineering at (951) 674-3146 Ext. 8427

ENGINEERING FEES (EVMWD Administrative Code, Section 2600)

SERVICE AVAILABILITY LETTERS

Tract & Commercial Development \$340.00

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

FOR EVMWD USE ONLY	Fees Due: _____	Reviewed by: _____
	Reimbursements: <input type="checkbox"/> Yes <input type="checkbox"/> No	Reimbursement #(s) _____
	Date Payment Received: _____	Receipt No.: _____ CK: _____
	Date Received by Engineering: _____	Division: _____
	Will Serve #: _____	WO#: _____ <input type="checkbox"/> GIS <input type="checkbox"/> Log <input type="checkbox"/> CIPAce
	Previous Account#: _____	Meter Size: _____ Pressure Zone: _____

Mail application form with appropriate fee to: EVMWD, P.O. Box 3000, Lake Elsinore, CA 92531-3000.

For questions, please contact Engineering at (951) 674-3146 Ext. 8427 or email Development@evmwd.net.

Please allow up to 10 working days for processing once the completed application has been accepted by the District.



PROJECT INFORMATION (continued)

Duplicate this page for each building/suite.

Building/Suite # BUILDING "A"

Square Footage +/- 8,360 S.F.

OPERATION(S) (Check all that apply.)

- | | | |
|---|--|--|
| <input type="checkbox"/> Animal Kennel | <input type="checkbox"/> Financial Institutions | <input type="checkbox"/> Restaurant, # Fixtures _____ |
| <input type="checkbox"/> Auditorium/Amusement | <input type="checkbox"/> Golf Course/Camp/Park | <input checked="" type="checkbox"/> Retail Sales/Store/Unknown |
| <input type="checkbox"/> Auto Detail/Wash, Type _____ | <input type="checkbox"/> Health Spa | <input type="checkbox"/> RV Camp With Sewer Hookups,
Sites _____ |
| <input type="checkbox"/> Auto Sales/Repair | <input type="checkbox"/> Hospital | <input type="checkbox"/> School |
| <input type="checkbox"/> Auto Service/Repair | <input type="checkbox"/> With Showers, # Rooms _____ | <input type="checkbox"/> With Cafeteria and Showers,
Students _____ |
| <input type="checkbox"/> Bar, # Seats _____ | <input type="checkbox"/> Without Showers, # Rooms _____ | <input type="checkbox"/> Cafeteria without Showers,
Students _____ |
| <input type="checkbox"/> Beauty/Barber Shop, # Seats _____ | <input type="checkbox"/> Hotel/Motel/Rooming House,
Rooms _____ | <input type="checkbox"/> No Cafeteria, No Showers,
Students _____ |
| <input type="checkbox"/> Bowling/Skating | <input type="checkbox"/> Indoor Theater | <input type="checkbox"/> Service Shop |
| <input type="checkbox"/> Campsite (Developed) # Sites _____ | <input type="checkbox"/> Laundromat, # Machines _____ | <input type="checkbox"/> Service Station |
| <input type="checkbox"/> Car Wash-Tunnel Type | <input type="checkbox"/> Lumber Yard | <input type="checkbox"/> Shopping Center |
| <input type="checkbox"/> Car Wash-Wand Type | <input type="checkbox"/> Mobile Home Park, # Spaces _____ | <input type="checkbox"/> Special Events Center,
Attendance _____ |
| <input type="checkbox"/> Church | <input type="checkbox"/> Mortuary/Cemetery | <input type="checkbox"/> Supermarket |
| <input type="checkbox"/> Club | <input type="checkbox"/> Night Club | <input type="checkbox"/> Veterinarian |
| <input type="checkbox"/> Dentist Office | <input type="checkbox"/> Nurseries/Greeneries | <input type="checkbox"/> Warehousing |
| <input type="checkbox"/> Doctor Office | <input type="checkbox"/> Nursing Home, # Beds _____ | <input type="checkbox"/> Wholesale Outlet |
| <input type="checkbox"/> Drive-In Theater | <input type="checkbox"/> Office Building | |
| <input type="checkbox"/> Dry Cleaning | <input type="checkbox"/> Open Storage | |
| <input type="checkbox"/> Office Only, # Employees _____ | <input type="checkbox"/> Pre-School, # Students _____ | |
| <input type="checkbox"/> Plant, # Employees _____ | <input type="checkbox"/> Professional Building | |
| <input type="checkbox"/> Dry Manufacturing | | |
| <input type="checkbox"/> Other _____ | | |

Provide a detailed description of the type of manufacturing, business processes, production, or service activities proposed for this site. This information will be used to determine whether the proposed project will require pre-treatment of wastewater. If the project requires a Pre-Treatment Program, you will be required to contact Industrial Waste at (951) 674-3146 Ext. 8326, before a Will Serve will be issued.

Building "A" is a proposed convenience store that caters for both transients and the neighborhood.



PROJECT INFORMATION (continued)

Duplicate this page for each building/suite.

Building/Suite # Building "B" (QSR with drive thru window) **Square Footage** 2,543 S.F.

OPERATION(S) (Check all that apply.)

- | | | |
|---|--|--|
| <input type="checkbox"/> Animal Kennel | <input type="checkbox"/> Financial Institutions | <input checked="" type="checkbox"/> Restaurant, # Fixtures <u>10</u> |
| <input type="checkbox"/> Auditorium/Amusement | <input type="checkbox"/> Golf Course/Camp/Park | <input type="checkbox"/> Retail Sales/Store/Unknown |
| <input type="checkbox"/> Auto Detail/Wash, Type _____ | <input type="checkbox"/> Health Spa | <input type="checkbox"/> RV Camp With Sewer Hookups,
Sites _____ |
| <input type="checkbox"/> Auto Sales/Repair | <input type="checkbox"/> Hospital | <input type="checkbox"/> School |
| <input type="checkbox"/> Auto Service/Repair | <input type="checkbox"/> With Showers, # Rooms _____ | <input type="checkbox"/> With Cafeteria and Showers,
Students _____ |
| <input type="checkbox"/> Bar, # Seats _____ | <input type="checkbox"/> Without Showers, # Rooms _____ | <input type="checkbox"/> Cafeteria without Showers,
Students _____ |
| <input type="checkbox"/> Beauty/Barber Shop, # Seats _____ | <input type="checkbox"/> Hotel/Motel/Rooming House,
Rooms _____ | <input type="checkbox"/> No Cafeteria, No Showers,
Students _____ |
| <input type="checkbox"/> Bowling/Skating | <input type="checkbox"/> Indoor Theater | <input type="checkbox"/> Service Shop |
| <input type="checkbox"/> Campsite (Developed) # Sites _____ | <input type="checkbox"/> Laundromat, # Machines _____ | <input type="checkbox"/> Service Station |
| <input type="checkbox"/> Car Wash-Tunnel Type | <input type="checkbox"/> Lumber Yard | <input type="checkbox"/> Shopping Center |
| <input type="checkbox"/> Car Wash-Wand Type | <input type="checkbox"/> Mobile Home Park, # Spaces _____ | <input type="checkbox"/> Special Events Center,
Attendance _____ |
| <input type="checkbox"/> Church | <input type="checkbox"/> Mortuary/Cemetery | <input type="checkbox"/> Supermarket |
| <input type="checkbox"/> Club | <input type="checkbox"/> Night Club | <input type="checkbox"/> Veterinarian |
| <input type="checkbox"/> Dentist Office | <input type="checkbox"/> Nurseries/Greeneries | <input type="checkbox"/> Warehousing |
| <input type="checkbox"/> Doctor Office | <input type="checkbox"/> Nursing Home, # Beds _____ | <input type="checkbox"/> Wholesale Outlet |
| <input type="checkbox"/> Drive-In Theater | <input type="checkbox"/> Office Building | |
| <input type="checkbox"/> Dry Cleaning | <input type="checkbox"/> Open Storage | |
| <input type="checkbox"/> Office Only, # Employees _____ | <input type="checkbox"/> Pre-School, # Students _____ | |
| <input type="checkbox"/> Plant, # Employees _____ | <input type="checkbox"/> Professional Building | |
| <input type="checkbox"/> Dry Manufacturing | | |
| <input type="checkbox"/> Other _____ | | |

Provide a detailed description of the type of manufacturing, business processes, production, or service activities proposed for this site. This information will be used to determine whether the proposed project will require pre-treatment of wastewater. If the project requires a Pre-Treatment Program, you will be required to contact Industrial Waste at (951) 674-3146 Ext. 8326, before a Will Serve will be issued.

Building "B" is a Quick Service Restaurant (QSR) with a drive through pick-up window.



PROJECT INFORMATION (continued)

Duplicate this page for each building/suite.

Building/Suite # Canopy 1

Square Footage 4,392 S.F.

OPERATION(S) (Check all that apply.)

- | | | |
|---|--|--|
| <input type="checkbox"/> Animal Kennel | <input type="checkbox"/> Financial Institutions | <input type="checkbox"/> Restaurant, # Fixtures _____ |
| <input type="checkbox"/> Auditorium/Amusement | <input type="checkbox"/> Golf Course/Camp/Park | <input type="checkbox"/> Retail Sales/Store/Unknown |
| <input type="checkbox"/> Auto Detail/Wash, Type _____ | <input type="checkbox"/> Health Spa | <input type="checkbox"/> RV Camp With Sewer Hookups,
Sites _____ |
| <input type="checkbox"/> Auto Sales/Repair | <input type="checkbox"/> Hospital | <input type="checkbox"/> School |
| <input type="checkbox"/> Auto Service/Repair | <input type="checkbox"/> With Showers, # Rooms _____ | <input type="checkbox"/> With Cafeteria and Showers,
Students _____ |
| <input type="checkbox"/> Bar, # Seats _____ | <input type="checkbox"/> Without Showers, # Rooms _____ | <input type="checkbox"/> Cafeteria without Showers,
Students _____ |
| <input type="checkbox"/> Beauty/Barber Shop, # Seats _____ | <input type="checkbox"/> Hotel/Motel/Rooming House,
Rooms _____ | <input type="checkbox"/> No Cafeteria, No Showers,
Students _____ |
| <input type="checkbox"/> Bowling/Skating | <input type="checkbox"/> Indoor Theater | <input type="checkbox"/> Service Shop |
| <input type="checkbox"/> Campsite (Developed) # Sites _____ | <input type="checkbox"/> Laundromat, # Machines _____ | <input checked="" type="checkbox"/> Service Station |
| <input type="checkbox"/> Car Wash-Tunnel Type | <input type="checkbox"/> Lumber Yard | <input type="checkbox"/> Shopping Center |
| <input type="checkbox"/> Car Wash-Wand Type | <input type="checkbox"/> Mobile Home Park, # Spaces _____ | <input type="checkbox"/> Special Events Center,
Attendance _____ |
| <input type="checkbox"/> Church | <input type="checkbox"/> Mortuary/Cemetery | <input type="checkbox"/> Supermarket |
| <input type="checkbox"/> Club | <input type="checkbox"/> Night Club | <input type="checkbox"/> Veterinarian |
| <input type="checkbox"/> Dentist Office | <input type="checkbox"/> Nurseries/Greeneries | <input type="checkbox"/> Warehousing |
| <input type="checkbox"/> Doctor Office | <input type="checkbox"/> Nursing Home, # Beds _____ | <input type="checkbox"/> Wholesale Outlet |
| <input type="checkbox"/> Drive-In Theater | <input type="checkbox"/> Office Building | |
| <input type="checkbox"/> Dry Cleaning | <input type="checkbox"/> Open Storage | |
| <input type="checkbox"/> Office Only, # Employees _____ | <input type="checkbox"/> Pre-School, # Students _____ | |
| <input type="checkbox"/> Plant, # Employees _____ | <input type="checkbox"/> Professional Building | |
| <input type="checkbox"/> Dry Manufacturing | | |
| <input type="checkbox"/> Other _____ | | |

Provide a detailed description of the type of manufacturing, business processes, production, or service activities proposed for this site. This information will be used to determine whether the proposed project will require pre-treatment of wastewater. If the project requires a Pre-Treatment Program, you will be required to contact Industrial Waste at (951) 674-3146 Ext. 8326, before a Will Serve will be issued.



PROJECT INFORMATION (continued)

Duplicate this page for each building/suite.

Building/Suite # Canopy 2

Square Footage 1,700 S.F.

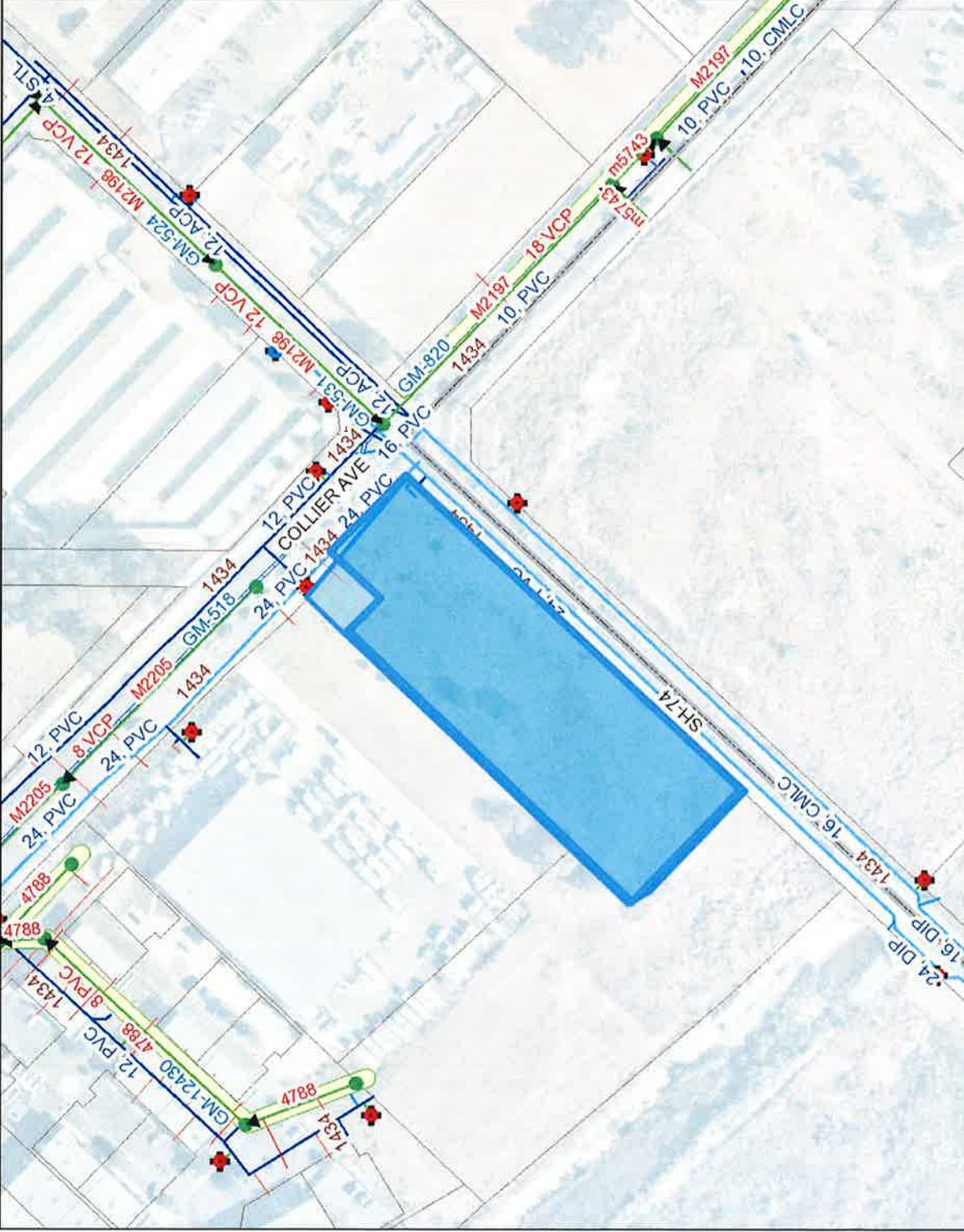
OPERATION(S) (Check all that apply.)

- | | | |
|---|--|--|
| <input type="checkbox"/> Animal Kennel | <input type="checkbox"/> Financial Institutions | <input type="checkbox"/> Restaurant, # Fixtures _____ |
| <input type="checkbox"/> Auditorium/Amusement | <input type="checkbox"/> Golf Course/Camp/Park | <input type="checkbox"/> Retail Sales/Store/Unknown |
| <input type="checkbox"/> Auto Detail/Wash, Type _____ | <input type="checkbox"/> Health Spa | <input type="checkbox"/> RV Camp With Sewer Hookups,
Sites _____ |
| <input type="checkbox"/> Auto Sales/Repair | <input type="checkbox"/> Hospital | <input type="checkbox"/> School |
| <input type="checkbox"/> Auto Service/Repair | <input type="checkbox"/> With Showers, # Rooms _____ | <input type="checkbox"/> With Cafeteria and Showers,
Students _____ |
| <input type="checkbox"/> Bar, # Seats _____ | <input type="checkbox"/> Without Showers, # Rooms _____ | <input type="checkbox"/> Cafeteria without Showers,
Students _____ |
| <input type="checkbox"/> Beauty/Barber Shop, # Seats _____ | <input type="checkbox"/> Hotel/Motel/Rooming House,
Rooms _____ | <input type="checkbox"/> No Cafeteria, No Showers,
Students _____ |
| <input type="checkbox"/> Bowling/Skating | <input type="checkbox"/> Indoor Theater | <input type="checkbox"/> Service Shop |
| <input type="checkbox"/> Campsite (Developed) # Sites _____ | <input type="checkbox"/> Laundromat, # Machines _____ | <input checked="" type="checkbox"/> Service Station (GAS/FUELLING) |
| <input type="checkbox"/> Car Wash-Tunnel Type | <input type="checkbox"/> Lumber Yard | <input type="checkbox"/> Shopping Center |
| <input type="checkbox"/> Car Wash-Wand Type | <input type="checkbox"/> Mobile Home Park, # Spaces _____ | <input type="checkbox"/> Special Events Center,
Attendance _____ |
| <input type="checkbox"/> Church | <input type="checkbox"/> Mortuary/Cemetery | <input type="checkbox"/> Supermarket |
| <input type="checkbox"/> Club | <input type="checkbox"/> Night Club | <input type="checkbox"/> Veterinarian |
| <input type="checkbox"/> Dentist Office | <input type="checkbox"/> Nurseries/Greeneries | <input type="checkbox"/> Warehousing |
| <input type="checkbox"/> Doctor Office | <input type="checkbox"/> Nursing Home, # Beds _____ | <input type="checkbox"/> Wholesale Outlet |
| <input type="checkbox"/> Drive-In Theater | <input type="checkbox"/> Office Building | |
| <input type="checkbox"/> Dry Cleaning | <input type="checkbox"/> Open Storage | |
| <input type="checkbox"/> Office Only, # Employees _____ | <input type="checkbox"/> Pre-School, # Students _____ | |
| <input type="checkbox"/> Plant, # Employees _____ | <input type="checkbox"/> Professional Building | |
| <input type="checkbox"/> Dry Manufacturing | | |
| <input type="checkbox"/> Other _____ | | |

Provide a detailed description of the type of manufacturing, business processes, production, or service activities proposed for this site. This information will be used to determine whether the proposed project will require pre-treatment of wastewater. If the project requires a Pre-Treatment Program, you will be required to contact Industrial Waste at (951) 674-3146 Ext. 8326, before a Will Serve will be issued.

CANOPY 2 is a Gas Fuelling Station for RV.

378-030-007 & 378-030-009




Legend

- EVMWD Boundary
- Highways
- Street Centerlines
- Parcels
- Waterbodies
- Force Main
- Gravity Mains
- Label Gravity Mains
- Label Gravity Mains Diameter
- Label Gravity Mains ID
- Manhole
- Service Laterals
- Sewer Easements
- Fire Hydrants
- Fire Hydrant
- Wharthead
- Label Pressure Main
- Label Pressure Zone
- Pressure Main
- Distribution Main
- Transmission Main
- Air Release
- Blowoff
- Hydrant Lateral
- Unknown
- Sampling Point
- Pump Station

1:1,968

Notes

328.0 163.98 328.0 Feet



This application has been provided to give a visual display of District facilities and related geographic information. To be sure of complete accuracy, please check with Engineering staff for the most up to date information.

Data Sources: EVMWD, County of Riverside

3/23/2018 10:34:36 AM



31315 Chaney St
PO Box 3000
Lake Elsinore, CA 92531
Office: (951) 674-3146
Fax: (951) 346-3352
March 22, 2018 10:41

Staff ID: SMUN
Receipt No. 402791
Account:
Customer:
Service:

Tender Methods
Visa (\$340.00)
Total (\$340.00)
Change \$0.00
Beginning Balance \$340.00
Payments applied (\$340.00)

THANK YOU FOR YOUR PAYMENT !

Did you know you can make payments 24/7 using your credit/debit card by calling our main number or accessing your account at www.evmwd.com?

Visit our website at www.evmwd.com to access your account and make payments 24/7 or get valuable conservation information.

USE WATER WISELY !