

City of San Diego Development Services 1222 First Ave., MS 302 San Diego, CA 92101 (619) 446-5000

Ownership Disclosure Statement

FORM

DS-318

October 2017

Approval Type: Check appropriate box for type of approval(s) requested: ☐ Neighborhood Use Permit ☐ Coastal Development Permit ☐ Neighborhood Development Permit ☐ Site Development Permit ☐ Planned Development Permit ☐ Coastal Development Permit ☐ Variance ☐ Tentative Map ☐ Vesting Tentative Map ☐ Map Waiver ☐ Land Use Plan Amendment • ☑ Other Amendment	
Project Title: Balboa Collective CUP Amendment	Project No. For City Use Only:
Project Address: 8863 Balboa Ave. Suite E. San Diego, CA	700
Specify Form of Ownership/Legal Status (please check): Corporation Climited Liability -or- General - What State? Corporate Identification No.	
☐ Partnership ☐ Individual	
By signing the Ownership Disclosure Statement, the owner(s) acknowledge that an applic with the City of San Diego on the subject property with the intent to record an encum owner(s), applicant(s), and other financially interested persons of the above referenced pindividual, firm, co-partnership, joint venture, association, social club, fraternal organization at his interest in the application. If the applicant includes a corporation or par individuals owning more than 10% of the shares. If a publicly-owned corporation, includ officers. (A separate page may be attached if necessary.) If any person is a nonprofit organization or as trust a signature is required of at least one of the property owners. Attach additional pages notifying the Project Manager of any changes in ownership during the time the application ownership are to be given to the Project Manager at least thirty days prior to any public accurate and current ownership information could result in a delay in the hearing process.	brance against the property. Please list below the property. A financially interested party includes any ion, corporation, estate, trust, receiver or syndicate thership, include the names, titles, addresses of all let the names, titles, and addresses of the corporate anization or a trust, list the names and addresses of tee or beneficiary of the nonprofit organization. Is if needed. Note: The applicant is responsible for tion is being processed or considered. Changes in hearing on the subject property. Failure to provide
Property Owner	
Name of Individual: Michael Essary, Court Apprinted Receiver	Downer Tenant/Lessee Successor Agency
Street Address: 5304 (G) remon + Theen Blut. #207	
city: San 1/jeso	State: 721/1
Phone No.: 619-886-4116 Fax No.: 658-560-1178	Email: (a/Sur @AOL, COM
Signature:	Date: 3-6-2020
Additional pages Attached:	
Applicant (n) of 1 feet (n) of 1 feet (n)	
Name of Individual: Michael Essary (out Deplined Recover) Street Address: 6304 Clasremat Nesa 1207	Øf-Owner ☐ Tenant/Lessee ☐ Successor Agency Religion
City: San Die(1)	CA- 62111
Phone No.: 6/9-886-4416 Fax No.: 858-560-6707	Email: Calsur a AOL, com
Signature:	Date: 7 - 6 -2020
Additional pages Attached:	Date
Other Financially Interested Persons	
Name of Individual:	□ Owner □ Tenant/Lessee □ Successor Agency
Street Address:	
City:	State: Zip:
Phone No.: Fax No.:	Email:
Signature:	Date:
Additional pages Attached:	