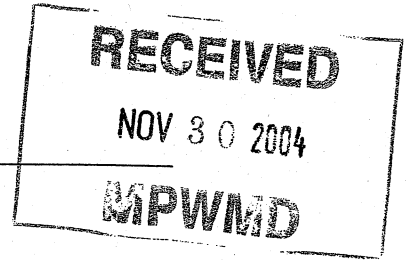




EXHIBIT 12-A



MONTEREY PENINSULA WATER MANAGEMENT DISTRICT

5 HARRIS COURT, BLDG. G
POST OFFICE BOX 85
MONTEREY, CA 93942-0085 • (831) 658-5601
FAX (831) 644-9558 • http://www/mpwmd.dst.ca.us

Please PRINT OR TYPE all information. Applications must be received within twenty-one (21) days after an appealable decision has been made pursuant to District Rule 70. To be considered for an appeal hearing, please submit a completed application and include a non-refundable processing fee (\$250 for less than half acre-foot of water, \$500 for half - one acre-foot of water, and \$750 for more than one acre-foot of water); other information as necessary which may include 5 years of water records from purveyor. The Board will support or deny your appeal based on the pertinent information you have provided. Submission of an incomplete application may constitute grounds for denial of your request.

APPLICATION FOR APPEAL

APPLICANT INFORMATION

- 1. Applicant's Full Name: SUZAN KELLY
Mailing Address: 509 CONGRESS AVE
City: PACIFIC GROVE State: CA Zip: 93950
Phone Number(s): Work (831) 626 0540 Home (831) 521 7737
2. Name of Agent(s) to Represent Applicant: KEITH PATERSON
Mailing Address: PO Box 2547
City: CARMEL State: CA Zip: 93921
Phone Number(s): Work (831) 622 7802 Home ()

PROPERTY INFORMATION

- 1. Full Name of Property Owner: SUZAN KELLY
Mailing Address: 509 CONGRESS AVE
City: PACIFIC GROVE State: CA Zip: 93950
Phone Number(s): Work (831) 626 0540 Home (831) 521 7737
2. Property Address: 167 LAUREL AVE
City: PACIFIC GROVE State: CA Zip: 93950
3. Assessor's Parcel Number: 006 - 247 - 005
4. Property Area: Acres: Square Feet: 8546 Other:
5. Past Land Use: RESIDENCE
6. Present Land Use: RESIDENCE
7. Proposed Land Use: RESIDENCE
Existing buildings? Yes [checked] No
Types of uses and square footage: RESIDENCE

PROJECT INFORMATION

*If additional space is needed for response to any questions, please continue on a separate piece of paper and attach it to the back of this application.

- 1. Type of Project: New Construction Remodel/Addition
- 2. Proposed New Use: (Please refer to the District's current Fixture Unit/Use Category sheet for assistance with this question.)

Residential No. Dwellings 2 Total No. Fixture Units (Residential Only) 20.2

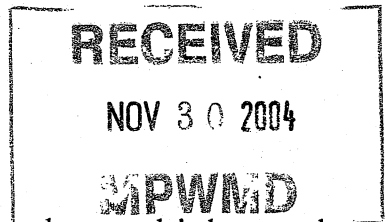
Commercial/Industrial/Governmental

Type of Use: Residential Square Footage: 4561 (Both units)

Other (Specify): _____

3. Current Zoning Classification:

4. Name of the water company which services the property: CAL-AM



5. Do you feel this project will use less water than that calculated by the District? If so, please explain how much you believe the project will use, and the basis on which you make this assumption.

6. Has this project been approved by the local jurisdiction? If so, please list or attach a copy of all conditions which have been imposed on the project. (Attach a copy of these conditions and approvals received.)

In process with PG Planning Dept. Awaiting water permit only

7. Does the applicant intend to obtain a municipal or county building permit for the project within ninety (90) days following the granting of a water connection permit? If not, when will water be needed at the site?

Yes.

I declare under penalty of perjury that the information in the application and on accompanying attachments is correct to the best of my knowledge and belief.

[Signature]
Signature of Applicant

11-30-04 CARRIED, CA
Date/Location

NOTE TO APPLICANT: You may attach written findings for the Board to review and consider in support of the action you have requested.

Official Use Only

Fee Received 11/30/2004 Receipt No. 17257

Check No. 3810 Bank Routing No. 121042882

Received by [Signature]

STATEMENT OF APPEAL REQUEST

*If additional space is needed for response to any question, please continue on a separate piece of paper and attach it to the back of this application.

1. From which rule(s) or staff's decision(s) are you requesting an appeal?

RULE 24-C (ORD #98)

2. Do you feel the rule or staff's decision is applicable in most cases, or do you believe it should be revoked or changed?

N/A

3. What were the circumstances surrounding your decision to appeal?

The decision re the permit appears inconsistent. The applicant was told that she need not use Ord. #98 to add a second bathroom to the existing property but could wait until the full project was approved & built.

4. Please state the special circumstances that distinguish your application from all others which are subject to enforcement of this process.

The application for a building permit was with Pacific Grove Planning Dept prior to 31 Dec 2002. The applicant was told that she would qualify for ORD #98 & proceeded with design accordingly.

5. What difficulties or hardships would result if your appeal request is denied?

The project will be delayed: a re-design & re-submittal to P.G. Planning Dept will be necessary. Costs will exceed original estimates. The project will have to eliminate the 2nd unit.

6. What specific action are you requesting that the Board take?

Allow Ord # 98.

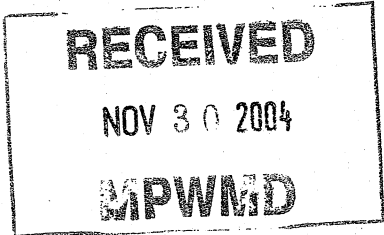
7. Please indicate if you intend to make a statement at the appeal hearing, and list the names of any other individuals who may speak on your behalf.

The applicant intends to make a statement.
 Also Keith Paterson
 + Attorney (?)



Monterey Peninsula Water Management District

DISCLOSURE STATEMENT
(EX PARTE COMMUNICATIONS)



Name or description of project, action, etc.: Appeal - Water Permit

Names and addresses of all persons authorized to communicate with the Board of Directors on this matter:

Name	Address
<u>SUZAN KELLY</u>	<u>509 Congress Ave, Pacific Grove CA 93950</u>
<u>KEITH PATERSON</u>	<u>PO Box 2547, Carmel CA 93921</u>

This *Disclosure Statement* is completed in my capacity as the Applicant for matter referenced in the first line, or as an authorized Agent of the Applicant. My signature evidences I am duly authorized to act on behalf of all individuals and/or entities that have an ownership interest in this matter (exceptions shall be noted by checking this box and providing a complete explanation as an attachment to this *Disclosure Statement*).

I understand this *Disclosure Statement* is required to list the names and addresses of all persons authorized to communicate with the Directors of the Water Management District on this matter. I further understand and agree to revise and amend this *Disclosure Statement* whenever any other person is authorized to communicate regarding this matter. Oral disclosure of agents shall not satisfy this requirement.

I understand and agree that failure to disclose the name of individuals who shall communicate with the District Board Members on behalf of the applicant shall subject the matter referenced above to immediate review and denial. Further, I understand that if denial is based on failure of either the applicant or of an authorized agent of the applicant to comply with these disclosure requirements, no request for approval of an identical or similar matter shall be granted for a period of twenty-four (24) months from the date this matter is denied.

I declare the foregoing to be true and correct of my own personal knowledge. I have signed this form this 30 day of November, 2004. This form is signed in the City of Carmel, State of CA.

SUZAN KELLY
Name (print)

Suzan Kelly
Signature

SUBMITTED BY APPLICANT