

ORIGINAL - (No copies or faxes)

PROJECT LOCATION AND DESCRIPTION:

- 14 SEP 11 AM 10:33

PETITIONER / APPLICANT:

- (6) Petitioner(s): Juan Gonzaga - MTA/Metro
Print Name(s) of Petitioner(s) in full - Name or Company Name
- Signature(s): _____
If Company, Name and Title
- (7) Mailing Address: ONE Gateway Plaza, Mail Stop 99-16-7
(Address, City, State, Zip Code)
- (8) Daytime phone number of petitioner is: (213) 922-2492
FAX number: (213) 922-7392
E-mail number: _____
- (9) Petitioner is: (check appropriately) () Owner **OR** (☒) Representative of Owner

OWNERSHIPS:

- (10) Name(s) and address of the Owner(s) applying for vacation is/are:
Same as Above

Print Name(s) and Address of Owner(s) in Full
(If Owner is Petitioner, Indicate "Same as above")
- Signature(s) _____
- (11) Petitioner is owner or representative of owner of: (check appropriately)
- () The property described in attached copy of Grant Deed **OR**
- (☒) 5147-035-004, 5147-035-008, 5147-035-007

(Lot, Tract No.) (Parcel, Parcel Map L.A. No.) (Other)