



COUNTY OF LAKE
Community Development Department
PLANNING DIVISION
 Courthouse - 255 N. Forbes Street
 Lakeport, California 95453
 Phone (707) 263-2221 FAX (707) 263-2225

FILED
 With The Board of Supervisors
 Of The County of Lake
 Date: 12/18/24

Planning Division Application
 (Please type or print)

Project name: Nina Star Farms

Assessors Parcel # : 014 - 006 - 16

BY [Signature]

INITIAL FEES:

AB 24-05 \$1,643.00

Sub Total: \$1,643.00

Technology recovery 2% Cost \$20.00

General Plan Maintenance Fee \$62.50

Total: \$1,725.50

Zoning: RL, A

General Plan: RL, RC, A

Receipt # 75268

Initial: [Signature]

APPELLANT INFORMATION

NAME: NinaStar LLC

MAILING ADDRESS: 23180 Shady Grove Rd **CITY:** Middletown

STATE: CA **ZIP:** 95461

PRIMARY PHONE: () 707-276-6020 **SECONDARY PHONE:** () _____

EMAIL: Ninastarllc@yahoo.com

PROJECT LOCATION

ADDRESS: 21380 Shady Grove Rd. Middletown CA

PRESENT USE OF LAND:

Residential

DESCRIPTION OF PROJECT APPEALED:

two (2) A-Type 3B licenses

A-Type 13 Self-Distribution, transport only license

SURROUNDING LAND USES:

North: RL

South: RL

East: RL

West: APZ

PARCEL SIZE(S):

Existing: 44 acres

Proposed: 44 acres

Existing/Proposed Water Supply: Well

Existing/Proposed Sewage Disposal: Septic

Fire Protection District: South Lake County FPD

School District: Middletown Unified

At-Cost Project Reimbursement

I, NinaStar LLC, the undersigned, hereby authorize the County of Lake to process the above referenced appeal request in accordance with the County of Lake Code. I am paying an initial fee of \$ 1,725.50 as an estimated cost for County staff review, coordination and processing costs related to my appeal according to the master fee schedule. **In making this initial fee, I acknowledge and understand that the initial fee may only cover a portion of the total processing costs. Actual costs for staff time are based on hourly rates adopted by the Board of Supervisors in the most current County fee schedule. I also understand and agree that I am responsible for paying these costs even if the appeal is withdrawn or not approved.**

I understand and agree to the following terms and conditions of this Reimbursement Agreement:

1. Time spent by County of Lake staff in processing my appeal and any direct costs will be billed against the available initial fee. **"Staff time" includes, but is not limited to, time spent reviewing application materials, site visits, responding by phone or correspondence to inquiries from the appellant, the appellant's representatives, neighbors and/or interested parties, attendance and participation at meetings and public hearings, preparation of staff reports and other correspondence, responding to public records act requests or responding to any legal challenges related to the application. "Staff" includes any employee of the Community Development Department.**
2. If processing costs exceed the available initial fee, I will receive invoices payable within 30 days of billing.
3. I may, in writing, request a further breakdown or itemization of invoices, but such a request does not alter my obligation to pay any invoices in accordance with the terms of this agreement.

The signature(s) below signifies legal authority and consent to file an application in accordance with the information above. The signature also signifies that the submitted information and accompanying documents are true and accurate, and that the items initialed above have been read and agreed to.

Note: This agreement does not include other agency review fees or the County Clerk Environmental Document filing fees.

Name of Appellant or Appointed Designee for Payment of all At-Cost Appeal Fees:

NinaStar LLC

(Please Print)

Name of Company or Corporation (if applicable):

NinaStar LLC

(Please Print)

Mailing Address of the Appellant or Party responsible for paying processing fees:

(If a Corporation, please attach a list of the names and titles of Corporate officers authorized to act on behalf of the Corporation)

Name: * Nevelina Bogdanova

Date: 12/16/2024

Email address: Ninastarllc@yahoo.com

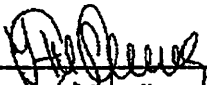
Phone Number: 707-276-6020



Signature of Appellant/ Agent Name*

12/16/2024

Date



Signature of Appellant

12/16/2024

Date



COUNTY OF LAKE
COMMUNITY DEVELOPMENT DEPARTMENT
Planning Division
Courthouse - 255 N. Forbes Street
Lakeport, California 95453
Telephone 707/263-2221 FAX 707/263-2225

APPEAL TO BOARD OF SUPERVISORS

Date: 12/16/2024

Project Name (if applicable): Nina Star Farms

Appellant's Name: NinaStar LLC

Appellant's Mailing Address: 23180 Shady Grove Rd, Middletown Ca, 95461

Ninastarllc@yahoo.com
Phone #: 707-276-602

Appellant's Representative _____

Phone #: _____

Location of Project: 23180 Shady Grove Rd, Middletown Ca, 95461

Assessor's Parcel Number: 014-006-16

Previous Action Taken: Major Use Permit submitted in 2020, recommended approval by planning department

but denied by planning commission on 12/12/24

Date: 12/12/24

Reason for Appeal: (Attach extra sheets if necessary)

We are appealing the Planning Commission's decision because it was based on false and defamatory statements made by individuals from the public, rather than the substantial evidence provided. Our project complies fully with County requirements and CEQA guidelines, as confirmed by reports and studies conducted by qualified professionals. Despite this, the Commission failed to consider this evidence, resulting in an unjust decision that disregards established facts and professional analysis.

Signature of Appellant/s

FOR OFFICE USE ONLY

Appeal Number: _____

Related File#: _____

Fee: _____

Receipt #: _____

Date Received: _____

Received By: _____

**COUNTY OF LAKE**

Community Development Department
255 N. Forbes St.
Lakeport, CA 95453
(707) 263-2382

Receipt No.: **75268**

Receipt Date: **12/18/2024**

RECEIPT

RECORD & PAYER INFORMATION

Record ID: AB24-05
Record Type: Planning Entitlement
Property Address: 23180 SHADY GROVE RD, MIDDLETOWN 95461
Parcel Number: 014-006-16
Description of Work: Appeal to denial of two (2) A-Type 3B Licenses
A-Type 13 Self-Distribution, transport only license
Job Value: \$0.00
Payer: Sufyan Hamouda
Applicant:
Nina Star LLC
23180 Shady Grove Rd
Middletown, CA 95461
Owner: NINASTAR LLC

PAYMENT DETAIL

Date	Payment Method	Reference	Cashier	Comments	Amount
12/18/2024	Check	145	YCLAYBON		\$1,725.50

FEE DETAIL

Fee Description	Account	Fee Amount	Current Paid
TECH Recov Fee	001-2702-461.66-19	\$20.00	\$20.00
ENF Appeal to BOS	001-2702-492.79.90	\$1,000.00	\$1,000.00
ENF Appeal to BOS	001-1908-492.79-90	\$110.00	\$110.00
ENF Appeal to BOS	001-1231-461.66-10	\$420.00	\$420.00
ENF Appeal to BOS	170-4010-461.66-10	\$113.00	\$113.00
Gen Plan MaintcFee	001-2702-461.66-21	\$62.50	\$62.50
		\$1,725.50	\$1,725.50