

September 15, 2023

P.O. Box 3000 ~ 31315 Chaney St ~ Lake Elsinore, CA 92530

Phone: (951) 674-3146 ~ Fax: (951) 674-7554

<b>Description:</b> Commercial Warehouse (WO# 23-062)	<b>Zoning:</b> Industrial
<b>Address:</b> SE corner of Pierce St. and Baker Street	<b># of Lots:</b> 10
<b>City:</b> Lake Elsinore <b>State:</b> CA <b>Zip:</b>	<b>Acreage:</b> 65
<b>APN:</b> 378-020-014, 378-020-015, 378-020-016, 378-020-028, 378-020-029, 378-020-030, 031, 036, 037 & 048	<b>Tract Map:</b>
<b>Phone:</b> (949) 466-1199	<b>Pressure Zone:</b> 1434
<b>Email:</b> heather@epdsolutions.com	

EPD Solutions  
2030 Main Street, Suite 1200  
Irvine, CA 92614  
*Attn: Heather Roberts*

**Will Serve Fees Paid:** \$340.00  
**Paid Date:** 07/31/2023  
**Check / Receipt #:** 508417

#### DEVELOPER

Ecosystem Investment Partners  
5550 Newbury St. Suite B  
Baltimore, MD  
*Attn: Trygg Danforth*

Elsinore Valley Municipal Water District ("EVMWD") has determined that water and sewer service is available to the subject project. The nearest public water main is located northeast of the subject property. Public water and sewer facility improvements would need to be constructed by the property owner/developer in accordance to EVMWD's standards, specifications and master plan.

Currently, the District has no plans to construct water or sewer system improvements in the vicinity of the subject parcel, and they would need to be sponsored by the property owner/developer. The cost of these improvements is unknown and would need to be determined by the contractor/owner. Further arrangements for service from EVMWD may also include plan check, facility construction, inspection, jurisdictional annexation, and payment of financial participation charges. The developer is advised to contact EVMWD's Development Services early in the entitlement process to determine the necessary arrangements for service, and to receive requirements on the preparation of facility design conditions, which is required prior to plan check submittal.

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.

This letter shall at all times be subject to such changes or modifications by EVMWD.

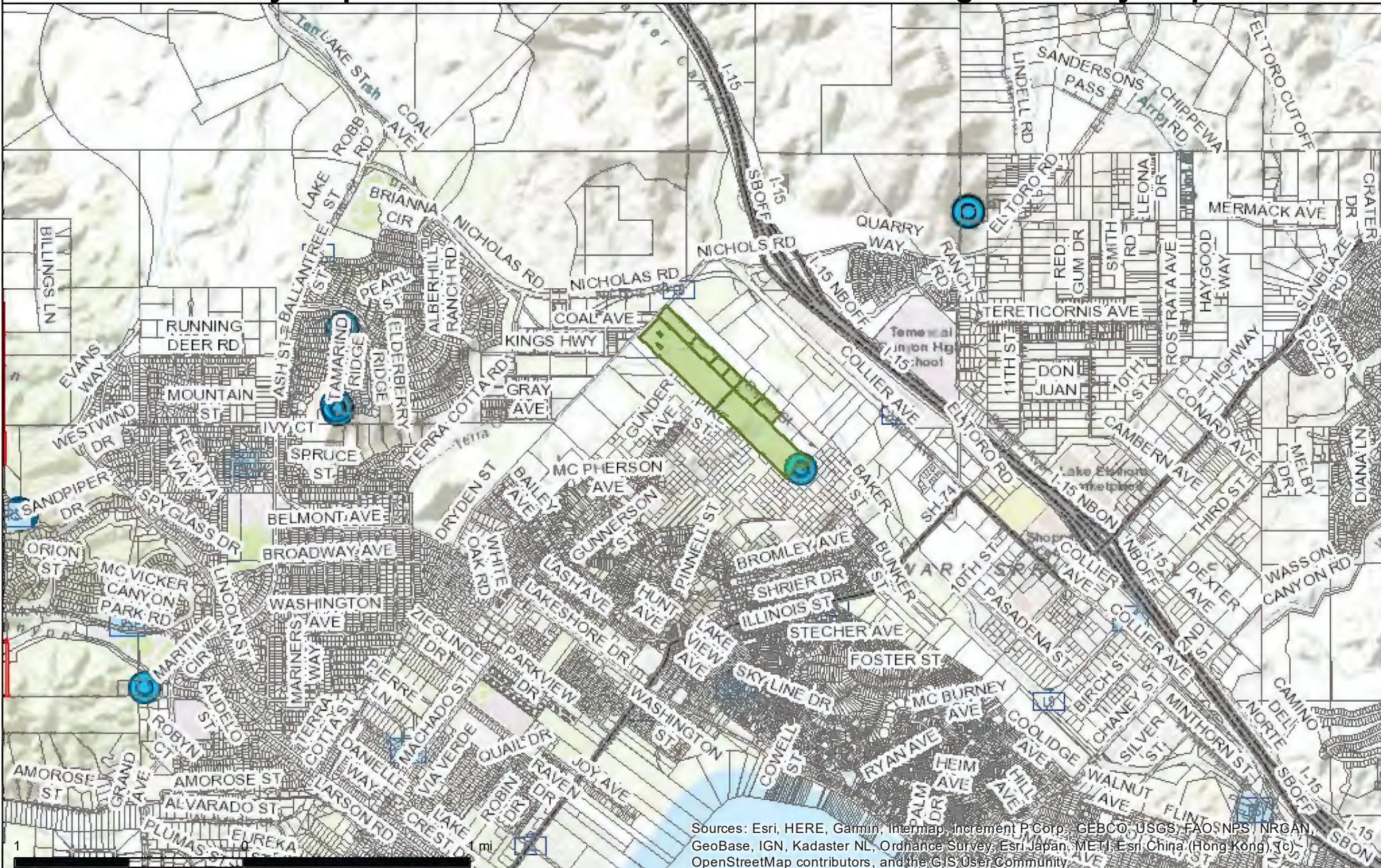
Pre-Treatment Program Division approval is required for commercial sites. An EVMWD "Industrial Waste Permit" is required for all commercial establishment; please contact Dave Oates at (951) 674-3146 ext. 8327 or e-mail at [doates@evmwd.net](mailto:doates@evmwd.net).

A copy of the landscape and irrigation plans are required prior to quoting irrigation meters.

*m C*

Authorized by: Christina Bachinski Date: 09/15/2023

# Vicinity Map - Baker Industrial - 2 Industrial Buildings - Vicinity Map



## Legend



Parcels \_Query result

EVMWD Sphere of Influence

Street Centerlines



Lift Station



Reservoir



EVMWD Boundary

Highways

Parcels



Pump Station

Data Sources: EVMWD, County of Riverside



Date: 5/23/2023

Time: 11:18:54 AM





**COMMERCIAL/INDUSTRIAL  
EL SINORE VALLEY MUNICIPAL WATER DISTRICT  
WILL SERVE & CONNECTION FEE APPLICATION**

**GENERAL INFORMATION**

Date of Application: 07/31/23

Preferred Delivery Method of Completed Will Serve (Check One):  Pickup at District Offices  
 Email to (Circle one): Owner/Developer  Representative  
**WO# 23-062**  
 Mail to (Circle one): Owner/Developer  Representative

**CONTACT INFORMATION**

**Owner/Developer** Trygg Danforth

Contact Name:

Business Name: Ecosystem Investment Partners

Mailing Address: 5550 Newbury Street, Suite B City: Baltimore State: MD Zip: 21209

Email: trygg@ecosystempartners.com Telephone: ( 617 ) 877-7637 Ext. \_\_\_\_\_

*Representative for Owner/Developer (or) Engineering Firm, if applicable*

Contact Name: Heather Roberts

Business Name: EPD Solutions Business Type: Representative

Mailing Address: 3333 Michelson Drive, Suite 500 City: Irvine State: CA Zip: 92612

Email: heather@epdsolutions.com Telephone: ( 949 ) 466-1199 Ext. \_\_\_\_\_

**PROJECT INFORMATION**

Property Address: South of Baker St and Pierce St intersection City: Lake Elsinore State: \_\_\_\_\_ Zip: \_\_\_\_\_

Assessor's Parcel Number(s): 378-020-014, -015, -016, -028, -029, -030, -031, -036, -037, -048

Total Acres: 65

Nearest Cross Streets: Baker St and Pierce St

**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 plans and water demand calculations. **WSA submitted under WO23-062**



Elsinore Valley Municipal Water District

#### PROJECT INFORMATION (continued)

Duplicate this page for each building/suite.

Building/Suite # 378-020-014, -015, -016, -028, -029, -030, -031, -036, -037, -048 Square Footage 212,730 SF and 789,181 SF

#### 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 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 checked="" 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.

Speculative high cube warehouses



Elsinore Valley Municipal Water District

#### SERVICES REQUESTED

\*Information speculative and will be determined at a later date

Building/Suite #	No. of Units	Meter Type Domestic / Irrigation	WATER					Backflow Required? Yes / No / Not applicable	
			1/4"	1"	1-1/2"	2"	3"	4"	
Building 1	1	Domestic			2"				
		Irrigation			2"				
Building 2	1	Domestic			3"				
		Irrigation			2"				

**PAYMENT PLAN DESIRED?**  Yes  No\*      If yes, number of years? (Circle one.)  1  2  3  4  5  6

\*Once the Will Serve has been issued, Payment Plans may not be available.

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
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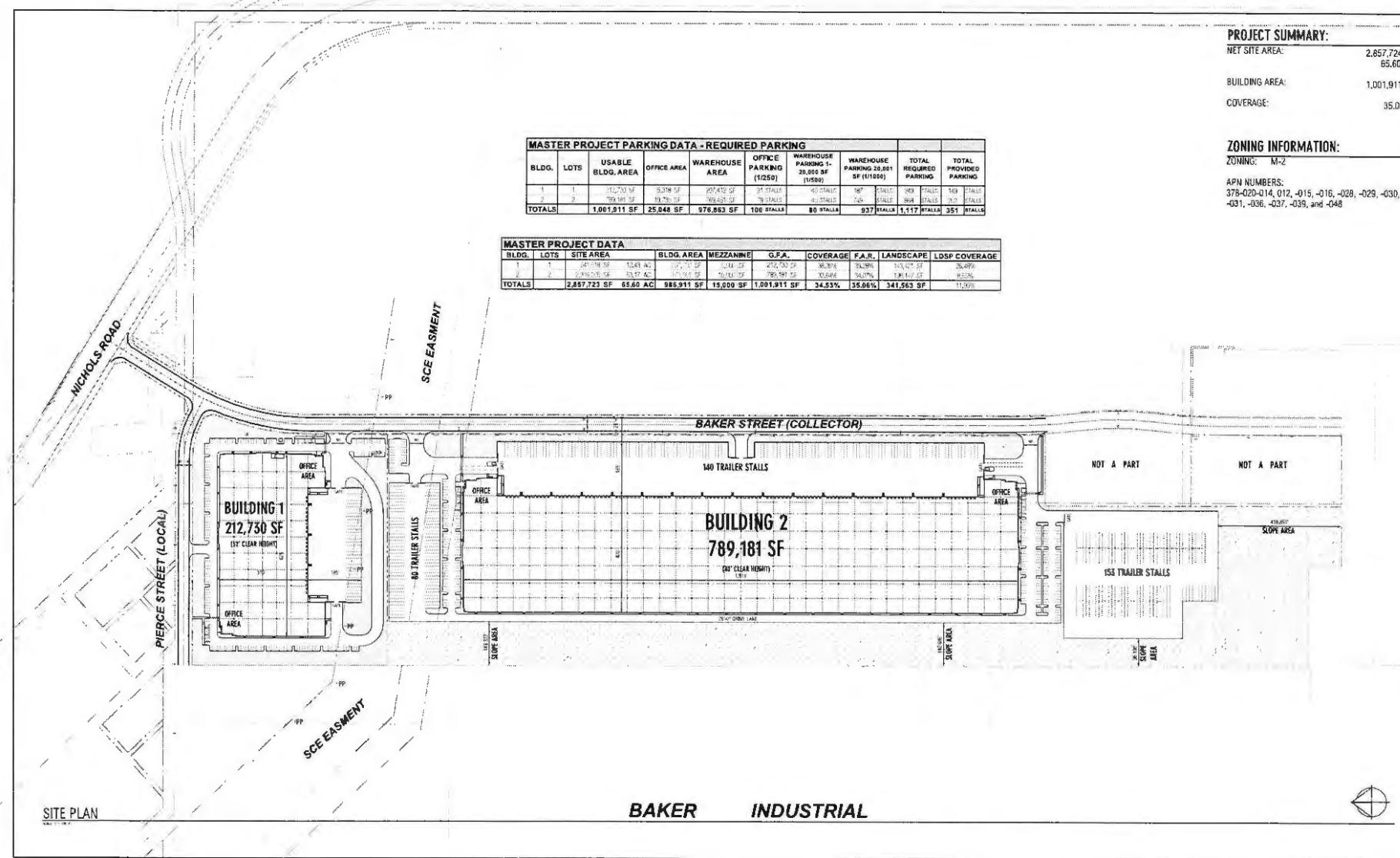
INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

<b>FOR EVMWD USE ONLY</b>	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"/> CIPAcc
	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@evmd.net](mailto:Development@evmd.net).

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



ME A1-1P



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

July 31, 2023 11:34

Staff ID: PCAS  
Receipt No. 508417  
Account:  
Customer:  
Service:

Tender Methods  
American Express (\$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](http://www.evmwd.com)?

Visit our website at [www.evmwd.com](http://www.evmwd.com) to access your account and make payments 24/7 or get valuable conservation information.

USE WATER WISELY!

EL SINORE VLY MUNI WATE  
31315 CHANEY ST  
LAKE ELSINORE, CA 92530  
07/31/2023

11:31:27

CREDIT CARD  
AMEX SALE

Card #: XXXXXXXX1187  
SEQ #: 3  
Batch #: 246  
INVOICE 4  
Approval Code: 185181  
Entry Method: Manual  
Mode: Online  
Avs Code: NYZ

SALE AMOUNT

\$340.00

CUSTOMER COPY