

APPLICATION FOR PROJECT REVIEW CONCEPTUAL DEVELOPMENT ADVISORY COMMITTEE

TOWN OF LOS GATOS - COMMUNITY DEVELOPMENT DEPARTMENT
110 E MAIN STREET, LOS GATOS, CA 95030
PLANNING@LOSGATOSCA.GOV
408-354-6872

PLEASE SUBMIT APPLICATION WITH ALL REQUIRED DOCUMENTS VIA THE CITIZEN'S PORTAL:
<https://permits.losgatosca.gov/Login-and-Manage-My-Records>

PLEASE TYPE OR PRINT CLEARLY

1. PROPERTY LOCATION:

Address of subject property 233 N. Santa Cruz Ave.

2. PROPERTY DETAIL:

Lot Area: 8460 SF Zoning: C-2 APN: 510-17-040, 512-17-086
Existing Use: Optometry and Crafts retail store

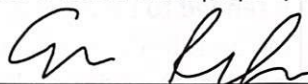
3. APPLICANT:

Name David Pak Phone: 650-455-7362
Address 4 N. 2nd Street, Suite 275
City San Jose State CA Zip 95113
Email david.p@manustudios.com

4. NAME OF PROPERTY OWNER: (If same as above, check here)

Name MPI LLC Phone: 408-457-8808
Address 260 Los Gatos Saratoga Road
City Los Gatos State CA Zip 95030
Email eric@healthmedrealty.com

I hereby certify that I am the owner of record of the property described in Box #2 above, and that I approve of the action requested herein.

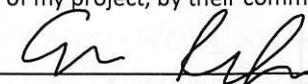
SIGNATURE OF OWNER  DATE 05-06-2026

ACKNOWLEDGMENT FORM

I, the undersigned, fully acknowledge and understand the Conceptual Development Advisory Committee is only an advisory body and is not empowered by the Town Council or the Planning Commission to render recommendations or decisions regarding land use issues.

I further understand and acknowledge that any statement by the Committee that a potential land use appears consistent with Town Policy is not an express or implied approval of a development project. A project may be rejected by the Planning Commission and/or Town Council for inconsistency with Town policy or for other reasons in the course of the development review process, including public input.

I further understand and acknowledge that the members of the Conceptual Development Advisory Committee are in no way bound in their future review of my project, by their comments at this very preliminary state of project development.

SIGNATURE OF OWNER  DATE 5/6/2026

DO NOT WRITE IN THIS SPACE.

Application #: _____

FEES PAID:	
PLPERMIT	\$ 2,966.00
PLTRACK	\$ 118.64
PLANAP	\$ 296.60
PLPERMIT (noticing deposit)	\$ 500.00
TOTAL	\$ 3,881.24

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