City of San Diego
Development Services
1222 First Ave., MS-302
San Diego, CA 92101
(619) 446-5000

THE CITY OF SAN DIEGO

Ownership Disclosure Statement

Project Title: Saint David's

Project No. *For City Use Only*:

Project Address: 5050 Milton Street

Legal Status (please check):

☒ Corporation (☐ Limited Liability -or- ☐ General) What State? _____ Corporate Identification No.: _____
☐ Partnership
☐ Individual

Please list below the owner(s) and tenant(s) (if applicable) of the above referenced property. The list must include the names, titles and addresses of all persons who have an interest in the property, recorded or otherwise, and state the type of property interest (e.g., tenants who will benefit from the permit, all individuals, all corporate officers, and all partners in a partnership who own the property). **Note:** The applicant is responsible for notifying the Project Manager of any changes in ownership during the time the application is being processed or considered. Changes in ownership are to be given to the Project Manager at least thirty days prior to any public hearing on the subject property.

Name (type or print): Cingular	Name (type or print): St. David's Episcopal Church
Title/Property Interest (type or print): Wireless Operator	Title/Property Interest (type or print): Owner
Street Address: 6170 Cornerstone Court	Street Address: 5050 Milton St.
City/State/Zip: San Diego, CA 92121	City/State/Zip: San Diego, CA 92110
Phone No: 858 642 9441 Fax No: 858 642 9466	Phone No: 6192764567 Fax No: 6192756123
Signature: Date:	Signature: [signature] Date: 4/11/03
Name (type or print): Tim Kolset (Agent for Applicant)	Name (type or print):
Title/Property Interest (type or print):	Title/Property Interest (type or print):
Street Address:	Street Address:
City/State/Zip:	City/State/Zip:
Phone No: Fax No:	Phone No: Fax No:
Signature: Date:	Signature: Date:
Name (type or print):	Name (type or print):
Title/Property Interest (type or print):	Title/Property Interest (type or print):
Street Address:	Street Address:
City/State/Zip:	City/State/Zip:
Phone No: Fax No:	Phone No: Fax No:
Signature: Date:	Signature: Date:

This information is available in alternative formats for persons with disabilities.
To request this information in alternative format, call (619) 446-5446 or (800) 735-2929 (TDD)