

**VARIANCE APPLICATION
PURSUANT TO ELKO COUNTY CODE
TITLE 4, CHAPTER 9**

Elko County Planning, Zoning, Building & Safety Division
155 South 9th Street, Elko, NV 89801
(775) 738-6816 or 738-2266

FOR PLANNING STAFF USE ONLY		
APPLICATION #:		
REQUIREMENTS CHECK LIST	YES	NO
COPY OF LEGAL DESCRIPTION INCLUDED		
COPY OF SITE OR PLOT PLAN INCLUDING TOPOGRAPHY FOR SLOPES OVER 8%		
COPY OF RECORDED MAP INCLUDED (IF APPLICABLE)		
COPY OF U.S.G.S. QUAD MAP OF THE VICINITY INCLUDING TOPOGRAPHY		
COPY OF OWNER'S AFFIDAVIT(S) INCLUDED		
APPLICATION RETURNED AS INCOMPLETE BY STAFF INITIALS		
WRITTEN RESPONSE FROM COMMITTEE OF ARCHITECTURE IF APPLICABLE:		
DATE ACCEPTED:		
STAFF:		

A FILING FEE OF \$400.00 MUST ACCOMPANY THIS APPLICATION, THIS FEE IS NON-REFUNDABLE REGARDLESS OF THE DECISION(S) OF THE ELKO PLANNING COMMISSION AND OR THE ELKO COUNTY BOARD OF COMMISSIONERS.

APPLICANT(S) Name: _____

Address: _____

Phone: () _____

ASSESSOR'S PARCEL No(s): _____
(attach filed map if available)

LOCATION / LEGAL DESCRIPTION: _____

PROPERTY OWNER(S) (if other than applicant): _____

CURRENT ZONING OF THIS LAND: _____

VARIANCE BEING APPLIED FOR: _____

Applicable Regulations: Title _____ **Chapter** _____ **Section** _____

SPECIFY EXACT NATURE OF BUSINESS, ACTIVITY, OR LAND USE IF THIS VARIANCE IS GRANTED FOR THIS APPLICATION: _____

→ MANDATORY INFORMATION REQUIREMENTS ←

THIS APPLICATION WILL NOT BE ACCEPTED OR PROCESSED WITHOUT THE FOLLOWING INFORMATION:

1. IF PROPERTY DESCRIPTION INCLUDES A REFERENCE TO A MAP FILED IN THE OFFICE OF THE ELKO COUNTY RECORDER, PROVIDE 1 COPY OF SAID MAP WITH THIS APPLICATION.
2. METES AND BOUNDS, OR OTHER LEGAL DESCRIPTION OF LAND TO WHICH THE VARIANCE WOULD APPLY (INCLUDING SECTION, TOWNSHIP, AND RANGE) WITH AN ACCOMPANYING MAP.
3. APPLICANT WILL PROVIDE 1 COPY OF A VICINITY MAP, A U.S.G.S. QUAD MAP WITH TOPOGRAPHY.
4. COPY OF MOST CURRENT DEED PERTAINING TO PROPERTY.

PLEASE RESPOND TO THE FOLLOWING STATEMENTS AS RELATED TO YOUR PROPOSED VARIANCE APPLICATION: (attach separate pages if needed)

A. Explain any exceptional circumstances, such as narrowness of the lot, shallowness of the lot, shape of the lot, topographical conditions or any other restrictions to the buildable area that have contributed to the requirement of this variance _____

B. How would granting this variance impact the public welfare, or be injurious to property in the vicinity. _____

C. How would the strict application of the regulation sought to be modified result in practical difficulties including monetary or physical hardships. _____

D. Explain how the property will be accessed, or what access currently exists. _____

E. Provide a copy of a plot plan, parcel map, subdivision map, record of survey or any other map showing the proposed Variance legal description and development.

F. By signing and notarizing this application the applicant agrees to provide all information required herein. The applicant also understands that should this required information not be provided with the application it may be returned as incomplete and will not proceed to the Planning Commission until such time the information is provided.

OWNER'S AFFIDAVIT

STATE OF _____)

COUNTY OF _____)

I / we, _____ PLEASE PRINT NAME(S) being duly sworn, depose

and state that I am the owner of the property herein described in the application, and that I / we consent to the filing of this petition.

Signed: _____

Mailing Address: _____

Telephone Number: (____) _____

On this _____ day of _____, 20____, before me personally appeared _____, whose identity was proven to me on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged that he/she executed the same.

Notary Public in and for said County and State

OPTIONAL USE

I / we further confirm that I / we have given _____ the authority to act on our behalf, in the matter of this particular request to be heard by the Elko County Planning Commission, and Board of County Commissioners if applicable.

ELKO COUNTY WILL NOTIFY THE OWNERS OF THE THIRTY CLOSEST PARCELS OF THE LAND INDICATED ON THIS APPLICATION BY MAIL AS TO THIS APPLICATION AND DATE OF THE PUBLIC MEETING FOR THE VARIANCE REQUEST.

ANY ERRORS IN THE LEGAL DESCRIPTION, INFORMATION OR MAPS PROVIDED, MAY NULLIFY THE GRANTING OF A VARIANCE.

THE ATTACHED OWNER'S AFFIDAVIT SHALL BE COMPLETE, PROPERLY SIGNED AND NOTARIZED.

ALL REQUIRED INFORMATION MUST BE ATTACHED TO THIS APPLICATION, BEFORE THE ITEM WILL BE PLACED ON THE PLANNING COMMISSION AGENDA.

OFFICE STAFF USE ONLY

ELKO COUNTY PLANNING & ZONING STAFF NAME _____

FEE PAID BY _____ CASH, _____ CHECK, CHECK NO. _____

AMOUNT PAID \$ _____ RECEIPT # _____ DATE: _____

HTE Data Entry Date & Initial _____

HTE Fee Recieved Data & Initial, _____

Planning, Zoning, Building & Safety Variance Information Data Form

ELKO COUNTY HAS WITHIN ITS ADOPTED CODES, ZONING ORDINANCE AND OTHER DEVELOPMENT CRITERIA. VARIOUS REQUIREMENTS, PROVISIONS, INTENDED PURPOSES, SPECIFICATIONS, FEES, VIOLATIONS, AND PENALTIES ARE SET FORTH THEREIN.

If you have questions or need assistance please contact
Planning, Zoning, Building & Safety Division
(775) 738-6816 or 738-2266, Extension No. 3, 4 or 6
155 South 9th Street, Elko, NV 89801

Provide the following information, mandatory for all applications requiring public review and hearings. Answer the following questions thoroughly. If questions do not apply to your project or proposal, indicate so by "NA" or checking "NO". **Use additional pages as necessary.**

I. PROJECT DESCRIPTION:

Project or Applicant Name: _____

For Commercial or Industrial Uses:

a. Type of Business / Request: _____

b. Hours of Operation: _____

c. Days of Operation: _____

d. Anticipated Number of Customers per day: _____

e. Anticipated Number of Deliveries / Pickups per day: _____

f. Anticipated Company Vehicles / number and type: _____

g. Number of parking spaces available: _____

h. Existing Building _____ Proposed New Building _____

i. Total floor space of existing or proposed building: _____

j. Parcel / lot square footage and/or acres : _____

k. Building height / number of stories: _____

l. Total size of property and/or area of project: _____

m. Additional Information : _____

II. SPECIAL DEVELOPMENT INFORMATION:

PLEASE BE AWARE THAT IF YOU MAKE ANY INACCURATE STATEMENTS FILLING OUT THIS SUPPLEMENTAL INFORMATION FORM, THAT INFORMATION COULD BE USED IN THE STAFF REPORT.

If **YES** is answered to **ANY** of the following questions please provide an explanation on Page 8 or on a separate page.

	YES	NO
1. Development, construction or grading on steep slopes.		
2. Will require extensive earth work or grading.		
3. Development or construction on fill or expansive soils.		
4. Will be altering the course of any drainage or waterway.		
5. Will cause an increase in: ash, dust, smoke, fumes or odor to the area or surrounding properties.		
6. Proposed project is located on lands that periodically flood or is totally or partially within a flood zone. If yes, provide Flood Zone Designation.		
7. Will cause the loss of wetland or waterway vegetation.		
8. Will create the reduction of agricultural lands, crop lands or agricultural soils.		
9. Will require the removal of trees or large amounts of brush.		
10. Will cause an increase in noise or vibration on or off-site.		
11. Is substantially different in size or character from existing development patterns of the area.		
12. A notice of violation or citation has been issued concerning this property or project.		
13. Will create a substantial increase in energy / resource use.		
14. Will cause a loss of existing housing units.		
15. Will cause an increase in housing units.		
16. Will substantially increase vehicular traffic to the area.		
17. Involve the use of: a) toxic or hazardous materials, b) highly flammable materials, c) explosives.		
18. Will introduce the risk of an explosion or the release of hazardous substances in the event of an accident.		
19. Will expose public to untreated or partially treated sewage or chemical pollution.		
20. Will require outdoor areas illuminated at night		
21. Will change the scenic view from existing: a) residential areas, b) public lands, c) roadways.		
22. Will involve possible archaeological or historical significant areas.		
23. Will involve development on more than one parcel of land.		

	YES	NO
24. This project is part of a speculated or proposed series of future projects.		
25. This project is located within one (1) mile of the Incorporated City limits of the City of _____.		
26. If so has the City Council, Planning Commission or Staff been notified of this proposal?		
27. Are the Incorporated City comments attached to this application?		
28. This project is located within the un-incorporated town or community of _____.		
29. If so has the town or community advisory board has been notified of this proposal.		
30. Are the un-incorporated town or community comments attached to this application?		
31. There are known written or verbal subdivision (CC&R's) (DOR's) restrictions attached to this property. If yes attach a current copy to this application.		
32. This application has been submitted to the applicable architectural review committee, if required.		
32a. If yes, then attach a copy of letter of approval to this application.		
33. The applicant/developer has contacted adjacent property owners about the possible subdivision of this property.		
34. The applicant/developer is aware of any prior Elko County Planning Commission or Elko County Commissions actions against the development of this property.		
35. There is currently a lawsuit pending that will impact this property. If so, please provide the case number and names of the parties involved in the lawsuit.		
36. There is currently a lawsuit pending on properties adjacent to this property that will impact access or have other impacts upon this property. If so, please provide the case number and names of the parties involved in the lawsuit.		
FOR ZONE CHANGES ONLY		
37. THIS IS A ZONE CHANGE APPLICATION TO CHANGE FROM OS (OPEN SPACE) TO SL (SPECIAL LANDS) IF THE ANSWER IS YES, PLEASE ANSWER THE FOLLOWING QUESTIONS.		
38. DOES THIS LAND CURRENTLY MEET THE AGRICULTURAL LAND CLASSIFICATION AND IS "AGRICULTURALLY DEFERRED" FOR TAX PURPOSES?		
39. IS THIS LAND MORE THAN 40 ACRES IN SIZE?		
40. IS THIS LAND <u>CURRENTLY BEING USED FOR AGRICULTURAL PURPOSES?</u>		
41. DESCRIBE THE LANDS ON ALL FOUR (4) SIDES OF THIS PROPERTY, INCLUDING USES AND ZONING. (USE ANOTHER SHEET OF PAPER IF NEEDED)		
42. EXPLAIN WHY THIS LAND SHOULD BE CHANGED TO SPECIAL LANDS. WHAT MAKES IT APPROPRIATE FOR SUCH ZONING? (USE ANOTHER SHEET OF PAPER IF REQUIRED)		

