

# APPLICANT IS TO KEEP THIS PAGE

## VARIANCE PROCEDURE APPLICATION INFORMATION

PLEASE READ CAREFULLY - ANSWER ALL QUESTIONS BEFORE SIGNING AND FILING.

A filing fee of \$\_\_\_\_\_ is required to process this application. Please make checks or money orders payable to **HUMBOLDT COUNTY**.

1. The completed application, required fee(s), together with map(s) and any additional information must be submitted to the Humboldt County Planning Department Office *at least fifteen (15) working days prior* to the scheduled County Commission or City Council meeting.
2. A copy of the application and map(s) will be sent to various City/ County/ State and outside agencies for their review and comments. The staff report will be prepared based upon the information provided in the application and from agency comments. A letter and a copy of the staff report will be mailed to the applicant and/or agent prior to the scheduled meeting.
3. All property owners within three hundred (300) feet of the boundaries of the subject property will be notified by mail within ten (10) days prior to the meeting. The meeting will be an advertised public hearing at which time the applicant and all other interested parties will have an opportunity to be heard.
4. The application shall be heard as an agenda item on a regularly scheduled Humboldt County Commissioners or Winnemucca City Council meeting. At the public meeting, the Commissioners or Council will approve, deny or approve with conditions. The Board, however, may decide to table a request for more information or to make a site inspection, if necessary, in order to make a decision.
5. The decision will be come effective 5 days after approval.
6. For further information refer to: Humboldt County Code - Chapter 17.66  
Winnemucca Municipal Code - Chapter 17.116

Submission of this application does not imply approval of this request by the Planning Department, the Regional Planning Commission, the County Commission or the City Council; nor does it in and of itself guarantee approval of any licenses or permits that may be required.

\*\*\*\*\***THIS PAGE TO BE RETAINED BY APPLICANT**\*\*\*\*\*

APPLICATION FOR VARIANCE

**Note:** The applicant is responsible for the accuracy of the information provided. Please fill in all the spaces. If an item does not apply, please put **N/A** (not applicable) on the line. Include the parcel number and/or the address of the property. Please provide a clear, legible, location map and a copy of the Assessor's Parcel map of the property with this application, if available.

City of Winnemucca

Humboldt County

Applicant/Agent \_\_\_\_\_

Location/Address of Property \_\_\_\_\_

Assessor's Parcel # \_\_\_\_\_ Property is currently zoned \_\_\_\_\_

Record Owner of Property: (a signed, notarized Affidavit of Ownership is required)

Name of Owner \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_ Phone \_\_\_\_\_

FOR DEPARTMENT USE	
Received By _____	Date Received _____
Application No. _____	Name _____

REQUIRED INFORMATION

The following information is required for this application. If the material is missing, Staff is authorized to return the application and take no further action until a complete application has been filed. (Enter N/A next to any item that does not apply - Use additional pages as necessary)

Copies of Site Plan drawn to scale and fully dimensioned showing the following:

	<u>Applies</u>
1. The entire parcel as described in the legal description.	_____
2. The location of all existing (E) and proposed (P) buildings and uses are to be identified by name.	_____
3. Buildings to be removed are to be shown in dashed lines.	_____
4. Walls and fences (location, height and material).	_____
5. Existing landscaping and location.	_____
6. Existing and proposed parking (number of spaces and maneuver lanes, striping, and wheel stops).	_____
7. Methods of ingress and egress.	_____
8. Loading areas.	_____
9. Outdoor lighting methods, poles, lights etc.	_____
10. Elevations of all buildings and structures.	_____
11. Street dedications and improvements (existing and proposed).	_____

WRITTEN STATEMENTS (Use additional pages as necessary)

- Reason for request: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. State how your variance request application meets the following:

There are exceptional or extraordinary circumstances or conditions applicable to the property such as size, shape, landscaping or topography which do not apply generally to other property in the vicinity with the same zoning district.

- No
- Yes

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The granting of a variance will not constitute a grant of special privilege inconsistent with the limitations upon other properties in the vicinity with the same zoning.

- Yes, it will.
- No, it will not.

If no, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The granting of a variance will not be materially detrimental to the public health, safety and general welfare or injurious to property and improvements in the area in which the property is located.

- Yes, it will.
- No, it will not.

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Such variance is necessary for the preservation and enjoyment of a substantial property right of the applicant, which right is possessed by other owners under like conditions in the same zoning district.

- Yes, it is necessary.
- No, it is not necessary.

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**BY MY SIGNATURE BELOW:**

- I consent to having the Planning Department Staff enter onto my property only for the sole purpose of inspecting said property as a part of this application process.
  
- I object to having the Planning Department Staff enter onto my property as a part of their review of this application. (Your objection will not effect the recommendation made by the Staff or the final determination made by the Regional Planning Commission, City Council or County Commission).
  
- I acknowledge that submission of the application does not imply approval of this request by the Planning Department, the Regional Planning Commission, the County Commissioners or the City Council; nor does it in and of itself guarantee issuance of any other required permits and licenses.
  
- I acknowledge that this application may be tabled until a later meeting If either I or my designated representative or agent are not present at the meeting for which this application is scheduled.
  
- I have carefully read and completed all questions contained within this application to the best of my ability.**

Applicant/Agent \_\_\_\_\_  
(Please print or type)

Mailing Address \_\_\_\_\_  
Street or P.O. Box

\_\_\_\_\_  
City, State, Zip Code

Phone \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_

OWNER'S AFFIDAVIT

STATE OF \_\_\_\_\_)

COUNTY OF \_\_\_\_\_)

I, \_\_\_\_\_ being duly sworn, depose and state that I am the owner of the property herein described in the application, and that I consent to the filing of this petition.

Signed \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Telephone Number ( ) \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me personally appeared \_\_\_\_\_, whose identity was proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged that s/he executed the same.

\_\_\_\_\_  
Notary Public in and for said County and State