

# **CONDITIONAL USE PERMIT**

## **APPLICATION INFORMATION**

### **City of Sparks, Nevada**

#### **GENERAL:**

A Conditional Use Permit may be required as a prerequisite to the establishment of certain uses in certain zoning districts. Uses requiring a Conditional Use Permit are specified by zoning district in Sparks Municipal Code Title 20.

#### **PRE-APPLICATION MEETING:**

A pre-application meeting with the Community Services Department is **advisable** for any applicant proposing to apply for a Conditional Use Permit in the City of Sparks. Information on scheduling a pre-application meeting is available by contacting the Community Services Department.

#### **APPLICATION & REVIEW PROCEDURE:**

1. The applicant may choose to attend a pre-application meeting with the Community Services Department.
2. The applicant submits the Conditional Use Permit application on an application deadline date. Please refer to the attached schedule for the Conditional Use Permit application submittal dates.
3. The Community Services Department reviews the submitted application and distributes the application to other city departments and reviewing agencies for comments. The Community Services Department mails a letter to the applicant stating the date of the Plan Review Meeting and any supplemental information needed for staff's review of the application.
4. The applicant attends the **required** Plan Review Meeting to discuss their proposed Conditional Use Permit application. If supplemental application information was requested by the Community Services Department then the applicant shall bring it to the Plan Review Meeting.
5. Once the application has been deemed complete and the Plan Review meeting has been held, the Community Development Department will schedule the Conditional Use Permit to go before the Planning Commission. **Staff will make every effort to assure that completed applications maintain the Planning Commission Meeting schedule included in this application packet.**

For additional information please contact:

**Community Services Department**

**431 Prater Way, Sparks, Nevada 89431**

**Phone: (775) 353-2340 Fax:(775) 353-1635**

**CONDITIONAL USE PERMIT**  
**APPLICATION CHECKLIST**  
City of Sparks, Nevada

The following items shall be submitted as a part of the Conditional use permit application:

- 1. **Health Department Application Fee:** An additional fee is assessed by the District Health Department for review of your application. Please include a check or money order payable to the "City of Sparks" with your application. (The City of Sparks receives fees on behalf of District Health) See FEE SCHEDULE for correct amount.
- 2. **Application & Noticing Fee:** A check or money order payable to the "City of Sparks" for the application fee and the required noticing fee. **Both the application fee and noticing fee are due at the time of the application submittal.** The application fee is a deposit against which staff bills time and materials. At end of review and approval, there could be a refund or balance due. **The Conditional use permit will not be issued until the balance due is paid in full.** See FEE SCHEDULE for correct amount.

\*\*\*\*\*PLEASE NOTE ALL FEES MAY BE PAID BY ONE CHECK\*\*\*\*\*

- 3. **Proof of Ownership:** If the person signing the owner's affidavit is not listed as the property owner in the most recent records of the Washoe County Assessor, proof of ownership acceptable to the administrator must be submitted with the application. If the signer is an agent of the owner, written documentation of that fact acceptable to the administrator must be submitted. If in Corporate ownership, a list of all Corporate Officers must be provided.
- 4. **Traffic Study:** Six (6) copies of a complete traffic study for any project which will generate more than 80 p.m. peak hour trips.
- 5. **Review Packets:** Twelve (12), each containing the following:
  - a. Completed Development Application form
  - b. Completed Residential or Non-Residential Project Data Sheet
  - c. A written description of the proposed use
  - d. Are there any existing structures on the proposed site?
    - No
    - Yes (Please include a dimensioned site plan, pictures of existing buildings, and any additional information that would be helpful to illustrate the existing use of the site. All plans shall be drawn to standard architectural or engineering scale and shall include a north arrow.)
  - e. Is a new structure proposed at the existing site?
    - No
    - Yes – The following shall be submitted:
      - A dimensioned site plan which includes the new structure, setbacks to property lines, easements, and any additional information that would be helpful to illustrate the proposed use of the site.
      - Four sided architectural building elevations with colors and materials clearly labeled.
      - Floor plans
      - A detailed landscape and irrigation plan with plant materials, sizes and quantities clearly labeled. The total percent of the site that is proposed to be landscaped shall be provided.
  - f. Is the use to be located in an existing developed area?
    - No
    - Yes, provide written narrative discussing how the proposed use is in character with the existing neighborhood.
  - g. Demonstrate that City services can be provided at acceptable service levels.
  - h. Is the project site 20 or more acres in size?
    - No
    - Yes, all 20 or more acres development projects must demonstrate the project is fiscally positive to the City for a period of at least 20 years.
  - i. **If drawings larger than 8½" x 11" are included with the application, one 8½" x 11" or 11" x 17" color reproduction of each MUST be provided.**
  - j. Vicinity Map depicting the respective site and including surrounding roadways.
  - k. One packet containing the original signed owner's affidavit shall be provided and shall be clearly labeled "Community Services Department Original"

NOTE: • **The Community Services Department may request that additional application materials be submitted depending on the specific project request. The application materials required above shall serve as the minimum requirements necessary to make application submittal to the Community Services Department.**

**CONDITIONAL USE PERMIT  
RESIDENTIAL PROJECT DATA SHEET  
City of Sparks, Nevada**

**1. Number of Dwelling Units**

Single Family Detached \_\_\_\_\_  
 Duplexes \_\_\_\_\_  
 Multi-Family Attached \_\_\_\_\_

**2. Site Area Breakdown**

Lots or Buildings \_\_\_\_\_ Ac. \_\_\_\_\_ %  
 Public Right-of-Way \_\_\_\_\_ Ac. \_\_\_\_\_ %  
 Common Area \_\_\_\_\_ Ac. \_\_\_\_\_ %  
 TOTAL \_\_\_\_\_ Ac. \_\_\_\_\_ %

**3. Gross Density**

\_\_\_\_\_/\_\_\_\_\_=\_\_\_\_\_  
 Total # of Dwellings / Total Area = Gross Density  
 in Acres (DU/AC)

**4. Schools Serving Project**

Elementary School \_\_\_\_\_  
 Middle School \_\_\_\_\_  
 High School \_\_\_\_\_

**5. Estimated Sewage to be Generated**

\_\_\_\_\_ GPD  
 (Attach Calculations)

**6. Traffic**

Average Daily Trips \_\_\_\_\_ Trips  
 Peak Hour Trips \_\_\_\_\_ Trips  
 (Attach Calculations)

**7. Flood Hazard**

Portion of site subject to inundation  
 By 100 year flood:  
 \_\_\_\_\_ Ac. \_\_\_\_\_ %

**8. Estimated Water Demand (Attach Calculations)**

Domestic \_\_\_\_\_ AFY  
 Irrigation \_\_\_\_\_ AFY  
 TOTAL \_\_\_\_\_ AFY  
 Source of water supply: \_\_\_\_\_

**9. Lot Sizes**

\_\_\_\_\_ Sq. Ft. minimum (corner)  
 \_\_\_\_\_ Sq. Ft. minimum (interior)  
 \_\_\_\_\_ Sq. Ft. maximum  
 \_\_\_\_\_ Sq. Ft. average

**10. Minimum Building Setbacks**

\_\_\_\_\_ Feet (Front Property Line to Dwelling)  
 \_\_\_\_\_ Feet (Front Property Line to Garage)  
 \_\_\_\_\_ Feet (Exterior Side Property Line to Dwelling)  
 \_\_\_\_\_ Feet (Interior Side Property Line to Dwelling)  
 \_\_\_\_\_ Feet (Rear Property Line to Dwelling)

**11. Portion of Site within the Following  
Slope Categories:**

0% - 10% \_\_\_\_\_ Ac. \_\_\_\_\_ %  
 10% + \_\_\_\_\_ Ac. \_\_\_\_\_ %

**12. Unit Sizes**

\_\_\_\_\_ Sq. Ft. \_\_\_\_\_ Bedrooms  
 \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ Bedrooms

**13. Maximum Building Height**

\_\_\_\_\_ Feet \_\_\_\_\_ Stories

**14. Coverage of Lot by Structure**

Maximum \_\_\_\_\_ %

**15. Single Family & Two-Family Parking**

SF detached \_\_\_\_\_ x 1 per bedrm = \_\_\_\_\_  
 2 dwelling (duplex) \_\_\_\_\_ x 1 per bedrm = \_\_\_\_\_

**16. Multi-Family Parking**

Multi-Family \_\_\_\_\_ x 1 per dwelling unit = \_\_\_\_\_  
 Live/work \_\_\_\_\_ x 1 per dwelling unit = \_\_\_\_\_  
 Boarding/rooming house \_\_\_\_\_ x 0.5 per bdrm = \_\_\_\_\_  
 Group home \_\_\_\_\_ square footage / 400 sf = \_\_\_\_\_

**17. Life Care Housing**

\_\_\_\_\_ square footage / 400 sf = \_\_\_\_\_

**CONDITIONAL USE PERMIT  
NON-RESIDENTIAL PROJECT DATA SHEET  
City of Sparks, Nevada**

**1. Site Area Breakdown**

Building Coverage	_____ Ac.	_____ %
Landscaped Area	_____ Ac.	_____ %
Paved Area	_____ Ac.	_____ %
Undeveloped Area	_____ Ac.	_____ %
Public Right-of-Way	_____ Ac.	_____ %
TOTAL	_____ Ac.	_____ %

**2. Existing Building Information**

#1	Description _____	Floor Area _____ Sq.Ft	Height _____ Feet
	Type of Construction _____		
#2	Description _____	Floor Area _____ Sq.Ft	Height _____ Feet
	Type of Construction _____		

**3. Floor Area Ratio**

$$\frac{\text{Total Floor Area (Sq. Ft.)}}{\text{Net Site Area (Sq. Ft.)}} = \text{Floor Area Ratio}$$

**4. Description of Proposed Use**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**5. Building Area Breakdown & Parking Calculations**

Auto Repair / Service	_____	1 per 500 Sq.Ft.	=	_____	Spaces
Child Care	_____	1 per 350 Sq. Ft.	=	_____	Spaces
Church	_____	1 per 150 Sq. Ft.	=	_____	Spaces
Financial	_____	1 per 400 Sq. Ft.	=	_____	Spaces
Gaming Establishment	_____	1 per 100 Sq. Ft. + 1 per 300 Sq. Ft.	=	_____	Spaces
		for Accessory uses	=	_____	Spaces
Health Club	_____	1 per 150 Sq. Ft.	=	_____	Spaces
Hospitals	_____	1 per 400 Sq. Ft.	=	_____	Spaces
Hotel/Motel	_____	1 per guest room	=	_____	Spaces
Life Care	_____	1 per 400 Sq. Ft.	=	_____	Spaces
Manufacturing	_____	1 per 2000 Sq. Ft.	=	_____	Spaces
Medical/Clinic	_____	1 per 500 Sq. Ft.	=	_____	Spaces
Office	_____	1 per 800 Sq. Ft.	=	_____	Spaces
Personal Service	_____	1 per 300 Sq. Ft.	=	_____	Spaces
Recreational Facility	_____	1 per 200 Sq. Ft.	=	_____	Spaces
Restaurant/Bar	_____	1 per 300 Sq. Ft.	=	_____	Spaces
Retail	_____	1 per 300 Sq. Ft.	=	_____	Spaces
Sale of Bulky Goods	_____	1 per 400 Sq. Ft.	=	_____	Spaces
School, Elementary	_____	1 per classrm + 1 per 100 students	=	_____	Spaces
School, Middle	_____	2 per classrm + 1 per 100 students	=	_____	Spaces
School, High	_____	1 per 1.5 Students + Staff	=	_____	Spaces
Theatre/Auditorium	_____	1 per 300 Sq. Ft.	=	_____	Spaces
Warehousing	_____	1 per 2000 Sq. Ft.	=	_____	Spaces

**6. Outdoor Uses**

Outdoor Storage	_____ Yes	_____ No
Outdoor Processing	_____ Yes	_____ No
Staging/Loading of Trucks	_____ Yes	_____ No

**7. Estimated Water Demand (Attach Calculations)**

Domestic	_____	AFY
Irrigation	_____	AFY
TOTAL	_____	AFY
Source of water supply: _____		

**8. Traffic (Attach Calculations)**

Average Daily Trips	_____ Trips
Peak Hour Trips	_____ Trips

**9. Estimated Sewage to be Generated**

_____	GPD
(Attach Calculations)	

**10. Hazardous Materials**

Will the use on this site involve the use of hazardous materials? \_\_\_\_\_ Yes \_\_\_\_\_ No

**11. Flood Hazard**

Portion of site subject to inundation by 100 year flood: \_\_\_\_\_ Ac. \_\_\_\_\_ %

**12. Portion of Site within the Following Slope Categories:**

0% - 10%	_____ Ac.	_____ %
10% +	_____ Ac.	_____ %

**DEVELOPMENT APPLICATION**



**ACTION REQUESTED:**

- Administrative Review
- Administrative Review MME
- Annexation
- Conditional Use Permit
- Comprehensive Plan Amendment
- Major Deviation
- Minor Deviation
- Planned Development
- Rezoning

- Tentative Subdivision Map
- Variance

<b>CASE NUMBER:</b>	<b>FEE:</b>
_____	\$ _____
Noticing Fee	\$ _____
District Health Fee	\$ _____
<b>TOTAL FEES</b>	\$ _____
Rec'd by: _____	Date: _____
<b>(For Planning Department Use Only)</b>	

**DATE:** \_\_\_\_\_

**PROJECT NAME:** \_\_\_\_\_

**PROJECT DESCRIPTION:** \_\_\_\_\_

*(Mark one box to indicate responsible party and mailing address)*

**PROPERTY OWNER\***

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZipCode \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

**APPLICANT\***

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZipCode \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

**PERSON / FIRM PREPARING PLANS**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZipCode \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

**PROJECT ADDRESS:**

\_\_\_\_\_

**PARCEL NO. (APN):** \_\_\_\_\_

\_\_\_\_\_

**PROPERTY SIZE:** \_\_\_\_\_

**EXISTING ZONING:** \_\_\_\_\_

**PROPOSED ZONING:** \_\_\_\_\_

**MASTER PLANNED LAND USE:** \_\_\_\_\_

**EXISTING USE:** \_\_\_\_\_

\_\_\_\_\_

**SURROUNDING USES:**

North \_\_\_\_\_

East \_\_\_\_\_

South \_\_\_\_\_

West \_\_\_\_\_

**\* If a corporation please attach a list of corporate officers.**

**\* If a partnership please list all general partners.**

**NOTE: Affidavits must be signed by both the property owner and the developer/lessee and notarized before the application is submitted.**

**DEAR APPLICANT:**

**THE CITY OF SPARKS APPLICATION PROCESS REQUIRES THAT THE PROPERTY OWNER AUTHORIZE THE APPLICANT TO REQUEST DEVELOPMENT RELATED APPLICATIONS. DEVELOPMENT APPROVALS REMAIN WITH THE LAND; THEREFORE, THE PROPERTY OWNER IS ALWAYS RESPONSIBLE FOR ANY ACTIVITY ON THE PROPERTY.**

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**OWNER AFFIDAVIT**

STATE OF NEVADA                    )  
  ) SS.  
COUNTY OF WASHOE )

I, \_\_\_\_\_ being duly sworn, depose and say that I am an owner of property/authorized agent involved in this petition and that I authorize \_\_\_\_\_ to request development related applications on my property. I also give permission for site visitation by the Planning Commission, City Council and City Staff.

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Signed \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for said County and State  
My commission expires: \_\_\_\_\_

**APPLICANT AFFIDAVIT**

STATE OF NEVADA                    )  
  ) SS.  
COUNTY OF WASHOE )

I, \_\_\_\_\_ being duly sworn, depose and say that I am the applicant involved in this petition and that the foregoing statements and answers herein contained and the information herewith submitted are in all respects complete, true and correct to the best of my knowledge and belief. I also give permission for site visitation by the Planning Commission, City Council and City Staff.

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Signed: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for said County and State  
My commission expires: \_\_\_\_\_

City of Sparks Community Services Department  
 2018 APPLICATION DATES  
CONDITIONAL USE PERMITS, VARIANCES & MAJOR DEVIATIONS

*APPLICATIONS WILL ONLY BE ACCEPTED ON APPLICATION DEADLINE DATES*

<b>Application Deadline*</b>			<b>Plan Review Meeting</b>			<b>Planning Commission Meeting</b>			The decision of the Planning Commission is subject to an 11-day appeal period.
Wed	<b>Jan 17, 2018</b>	4:00 PM	Wed	<b>Feb 07, 2018</b>	9:30 AM	Thu	<b>Mar 01, 2018</b>	6:00 PM	
Wed	<b>Feb 21, 2018</b>	4:00 PM	Wed	<b>Mar 07, 2018</b>	9:30 AM	Thu	<b>Apr 05, 2018</b>	6:00 PM	
Wed	<b>Mar 21, 2018</b>	4:00 PM	Wed	<b>Apr 04, 2018</b>	9:30 AM	Thu	<b>May 03, 2018</b>	6:00 PM	
Wed	<b>Apr 25, 2018</b>	4:00 PM	Wed	<b>May 09, 2018</b>	9:30 AM	Thu	<b>Jun 07, 2018</b>	6:00 PM	
Wed	<b>May 23, 2018</b>	4:00 PM	Wed	<b>Jun 06, 2018</b>	9:30 AM	Thu	<b>Jul 05, 2018</b>	6:00 PM	
Wed	<b>Jun 20, 2018</b>	4:00 PM	<b>Tue</b>	<i>Jul 03, 2018</i>	9:30 AM	Thu	<b>Aug 02, 2018</b>	6:00 PM	
Wed	<b>Jul 25, 2018</b>	4:00 PM	Wed	<b>Aug 08, 2018</b>	9:30 AM	Thu	<b>Sep 06, 2018</b>	6:00 PM	
Wed	<b>Aug 22, 2018</b>	4:00 PM	Wed	<b>Sep 05, 2018</b>	9:30 AM	Thu	<b>Oct 04, 2018</b>	6:00 PM	
Wed	<b>Sep 19, 2018</b>	4:00 PM	Wed	<b>Oct 03, 2018</b>	9:30 AM	Thu	<b>Nov 01, 2018</b>	6:00 PM	
Wed	<b>Oct 24, 2018</b>	4:00 PM	Wed	<b>Nov 07, 2018</b>	9:30 AM	Thu	<b>Dec 06, 2018</b>	6:00 PM	
<b>Tue</b>	<i>Nov 20, 2018</i>	4:00 PM	Wed	<b>Dec 05, 2018</b>	9:30 AM	Thu	<b>Jan 03, 2019</b>	6:00 PM	
Wed	<b>Dec 26, 2018</b>	4:00 PM	Wed	<b>Jan 09, 2019</b>	9:30 AM	Thu	<b>Feb 07, 2019</b>	6:00 PM	

*\*Meeting the application deadline does not guarantee each submittal will follow this schedule. Staff will make every effort to assure that completed submittals will maintain this schedule.*

**FEE SCHEDULE FOR PLANNING DIVISION  
(Effective July 2017)**

APPLICATION TYPE	CITY OF SPARKS	DIV. OF WATER RESOURCES	DIV. OF ENVIRON. PROT.
Annexation	\$3,000.00 plus \$500.00 noticing fee	N/A	N/A
Administrative Review	\$1,250.00 deposit credited toward actual staff time <b>**Not to exceed \$7,495**</b> Plus \$168.00 District Health fees	N/A	N/A
Administrative Review Medical Marijuana Establishment	\$1,250.00 deposit credited toward actual staff time <b>**Not to exceed \$7,495**</b> Plus \$168.00 District Health fees	N/A	N/A
Administrative Review Telecommunications Tower	\$1,250.00 deposit credited toward actual staff time <b>**Not to exceed \$7,495**</b> Plus \$555.00 District Health fee if site is served by Septic System	N/A	N/A
Amendment to Development Agreement	\$88.00 per hour	N/A	N/A
Area Plan	\$5,000.00 deposit credited toward actual staff time	N/A	N/A
Comprehensive Plan Amendment	\$2,500.00 <b>**Plus \$703.00 District Health fee**</b>	N/A	N/A
Conditional Use Permit  Major	\$2,500.00 deposit credited toward actual staff time <b>**Not to exceed \$7,495.00 **Plus \$500.00 noticing fee** **Plus \$555.00 District Health fee**</b> \$10,000.00 deposit credited toward actual staff time <b>**Plus \$500.00 noticing fee** **Plus \$555.00 District Health fee**</b>	N/A	N/A
Development Agreement	\$1,900.00 plus \$120.00 per hour <b>**Plus \$555.00 District Health fee**</b>	N/A	N/A
Deviations Minor Major	\$120.00 \$1,250.00 deposit credited toward actual staff time <b>**Not to exceed - \$7,495**</b> <b>**Plus \$500.00 noticing fee** **</b>		
Planned Development	\$5,000.00 deposit credited toward actual staff time Typical costs for a Planned Development: \$10,000 to \$50,000 <b>** Plus \$500.00 noticing fee**</b> <b>**Plus \$1,204 if served by sewer or \$2,656 if served by septic District Health fee**</b>	Applies only if there is a Tentative Map/Conformance Review (See Tentative Map)	
Reviewed of expired Tentative Subdivision Map	\$1,250.00 deposit credited toward actual staff time <b>**Not to exceed \$7,495**</b> <b>**Plus \$1,204 if served by sewer or \$2,656 if served by septic District Health fee**</b>	\$180.00 + \$1.00/lot	\$100.00 + \$1.00/lot
Rezoning	\$517.00 <b>**Plus \$500.00 noticing fee**</b>	N/A	N/A
Temporary Use Permit	\$100.00	N/A	N/A
Tentative Subdivision Map	\$22,800.00 <b>**Plus \$1,204 if served by sewer or \$2,656 if served by septic District Health fee**</b>	\$180.00 + \$1.00/lot	\$100.00 + \$1.00/lot
Variance	\$4,110.00 <b>**Plus \$500.00 noticing fee** **Plus \$168.00 District Health fee**</b>	N/A	N/A
Zoning Research	\$80.50 per hour	N/A	N/A

**Please Note:** Washoe County District Health fees are now payable to the City of Sparks. The fees can be paid by separate check or can be added together and paid as one. All checks made payable to the City of Sparks. Fees are due and payable at the time of submittal. Thank you.