

REZONING

APPLICATION INFORMATION

City of Sparks, Nevada

GENERAL:

All land in the City is classified into zoning districts, as shown on the zoning map, and regulations for the use of property in each district are contained in Title 20 of Sparks Municipal Code. A Rezoning, or reclassification of a lot or parcel from one district to another, requires adoption of an ordinance amending the zoning map.

PRE-APPLICATION MEETING:

A pre-application meeting with the Community Services Department is **advisable** for any applicant proposing a Rezoning 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 a complete Rezoning application on an application deadline date. Please refer to the attached schedule for the Rezoning application submittal dates.
3. The Community Services Department reviews the submitted application for completeness. The Community Services Department sends a letter to the applicant stating whether the application has been deemed complete or incomplete. If the application is deemed complete, a letter with the date of the Plan Review Meeting and any supplemental information needed for staff's review of the application will be sent to the applicant. If the application is deemed incomplete, a letter identifying the required deficient information will be sent to the applicant.
4. The applicant attends the **required** Plan Review Meeting to discuss their proposed Rezoning 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 Services Department will schedule the Rezoning to go before the Planning Commission and the City Council. **Staff will make every effort to assure that completed applications maintain the Planning Commission and City Council 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 / Email planningreview@cityofsparks.us

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City of Sparks, Nevada

The following items shall be submitted as a part of the Rezoning application:

- 1. **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.** See **FEE SCHEDULE** for correct amount.
- 2. **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.
- 3. **Review Packets:** One (1) original and (1) digital copy (preferably on a thumb drive), of each containing the following:
 - a. Completed Development Application form
 - b. A written description of the proposed rezoning
 - c. A wet-stamped legal description and boundary map.
 - d. A list of the Sparks Master Plan goals and policies that will be met by the proposed rezoning
 - e. 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.)
 - f. Provide written narrative that city services can be provided to the site at acceptable service levels.
 - g. **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.**
 - h. Rezoning Vicinity Map depicting the existing and proposed zoning designation of the respective site including surrounding roadways and the zoning designations of the surrounding properties.
 - i. **The original signed applicant and owner’s affidavit shall be provided. Signatures must be original.**

NOTE: The application materials required above shall serve as a short list of necessary material. The Community Services Department requests that additional application materials be submitted specific to the nature of the project request.

The complete list of required materials as outlined in the Sparks Zoning Code – Title 20 can be found at the following link.

https://library.municode.com/nv/sparks/codes/code_of_ordinances?nodeId=TIT20ZOCO_AP_APXA-IGE

DEVELOPMENT APPLICATION

ACTION REQUESTED:

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



- Rezoning
- Tentative Subdivision Map
- Variance

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

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: _____

PROJECT ADDRESS:

PARCEL NO. (APN): _____

PROPERTY SIZE: _____

EXISTING ZONING: _____

PROPOSED ZONING: _____

MASTER PLANNED LAND USE: _____

EXISTING USE: _____

APPLICANT*

Name: _____

Address: _____

City _____ State _____ ZipCode _____

Phone: _____ Fax: _____

Contact Person: _____

E-mail Address: _____

SURROUNDING USES:

North _____

East _____

South _____

West _____

PERSON / FIRM PREPARING PLANS

Name: _____

Address: _____

City _____ State _____ ZipCode _____

Phone: _____ Fax: _____

Contact Person: _____

E-mail Address: _____

* *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.

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: _____

Signature: _____

Subscribed and sworn 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: _____

Signature: _____

Subscribed and sworn before me this _____ Day of _____, 20 _____

Notary Public in and for said County and State

My Commission expires: _____

**FEE SCHEDULE FOR PLANNING DIVISION
(Effective July 2020)**

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 **Not to exceed \$7,495** Plus \$501.00 District Health fee	N/A	N/A
Administrative Review Medical Marijuana Establishment	\$1,250.00 deposit credited toward actual staff time **Not to exceed \$7,495** Plus \$501.00 District Health fee	N/A	N/A
Administrative Review Telecommunications Tower	\$1,250.00 deposit credited toward actual staff time **Not to exceed \$7,495** Plus \$501.00 District Health fee	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
Conditional Use Permit Major	\$2,500.00 deposit credited toward actual staff time **Not to exceed \$7,495.00 **Plus \$500.00 noticing fee** **Plus \$846.00 District Health fee** \$10,000.00 deposit credited toward actual staff time **Plus \$500.00 noticing fee** **Plus \$846.00 District Health fee**	N/A	N/A
Comprehensive Plan Amendment	\$2,500.00	N/A	N/A
Development Agreement	\$1,900.00 plus \$120.00 per hour **Plus \$846.00 District Health fee**	N/A	N/A
Deviations Minor Major	\$120.00 \$1,250.00 deposit credited toward actual staff time **Not to exceed - \$7,495** **Plus \$500.00 noticing fee** **		
Planned Development	\$5,000.00 deposit credited toward actual staff time Typical costs for a Planned Development: \$10,000 to \$50,000 ** Plus \$500.00 noticing fee** **Plus \$1,319 if served by sewer or \$2,906 if served by septic District Health fee**	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 **Not to exceed \$7,495** **Plus \$1,319 if served by sewer or \$2,906 if served by septic District Health fee**	\$180.00 + \$1.00/lot	\$100.00 + \$1.00/lot
Rezoning	\$517.00 **Plus \$500.00 noticing fee**	N/A	N/A
Temporary Use Permit	\$100.00	N/A	N/A
Tentative Subdivision Map	\$22,800.00 **Plus \$1,319 if served by sewer or \$2,906 if served by septic District Health fee**	\$180.00 + \$1.00/lot	\$100.00 + \$1.00/lot
Variance	\$4,110.00 **Plus \$500.00 noticing fee** **Plus \$501.00 District Health fee**	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. All fees are due and payable at the time of submittal. Thank you.

City of Sparks Community Services Department
 2022 APPLICATION DATES
ANNEXATIONS AND REZONINGS

APPLICATIONS WILL ONLY BE ACCEPTED ON APPLICATION DEADLINE DATES

Application Deadline*	Plan Review Meeting	Planning Commission Meeting	City Council 1st Reading	City Council Public Hearing
Tue Dec 21, 2021	Wed Jan 05, 2022	Thu Feb 17, 2022 6:00 PM	Mar 28, 2022	Apr 11, 2022
Wed Jan 19, 2022	Wed Feb 02, 2022	Thu Mar 17, 2022 6:00 PM	Apr 25, 2022	May 09, 2022
Wed Feb 16, 2022	Wed Mar 02, 2022	Thu Apr 21, 2022 6:00 PM	May 23, 2022	Jun 13, 2022
Wed Mar 23, 2022	Wed Apr 06, 2022	Thu May 19, 2022 6:00 PM	Jun 27, 2022	Jul 11, 2022
Wed Apr 20, 2022	Wed May 04, 2022	Thu Jun 16, 2022 6:00 PM	Jul 25, 2022	Aug 08, 2022
Wed May 18, 2022	Wed Jun 01, 2022	Thu Jul 21, 2022 6:00 PM	Aug 22, 2022	Sep 12, 2022
Wed Jun 22, 2022	Wed Jul 06, 2022	Thu Aug 18, 2022 6:00 PM	Sep 26, 2022	Oct 10, 2022
Wed Jul 20, 2022	Wed Aug 03, 2022	Thu Sep 15, 2022 6:00 PM	Oct 24, 2022	Nov 14, 2022
Wed Aug 24, 2022	Wed Sep 07, 2022	Thu Oct 20, 2022 6:00 PM	Nov 28, 2022	Dec 12, 2022
Wed Sep 21, 2022	Wed Oct 05, 2022	Thu Nov 17, 2022 6:00 PM	Jan 09, 2023	Jan 23, 2023
Wed Oct 19, 2022	Wed Nov 02, 2022	Thu Dec 15, 2022 6:00 PM	Jan 23, 2023	Feb 13, 2023
Mon Nov 21, 2022	Wed Dec 07, 2022	Thu Jan 19, 2023 6:00 PM	Feb 27, 2023	Mar 13, 2023
Tue Dec 20, 2022	Wed Jan 04, 2023	Thu Feb 16, 2023 6:00 PM	Mar 27, 2023	Apr 10, 2023

**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.*