

# **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 = \_\_\_\_\_



**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.

OWNER AFFIDAVIT

STATE OF NEVADA )
COUNTY OF WASHOE ) SS.

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 )
COUNTY OF WASHOE ) SS.

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  
 2019 APPLICATION DATES  
CONDITIONAL USE PERMITS, VARIANCES & MAJOR DEVIATIONS

*APPLICATIONS WILL ONLY BE ACCEPTED ON APPLICATION DEADLINE DATES*

Application Deadline*			Plan Review Meeting			Planning Commission Meeting**			The decision of the Planning Commission is subject to an 11-day appeal period.
Wed	Jan 23, 2019	4:00 PM	Wed	Feb 06, 2019	9:30 AM	Thu	Mar 07, 2019	6:00 PM	
Wed	Feb 20, 2019	4:00 PM	Wed	Mar 06, 2019	9:30 AM	Thu	Apr 04, 2019	6:00 PM	
Wed	Mar 20, 2019	4:00 PM	Wed	Apr 03, 2019	9:30 AM	Thu	May 02, 2019	6:00 PM	
Wed	Apr 24, 2019	4:00 PM	Wed	May 08, 2019	9:30 AM	Thu	Jun 06, 2019	6:00 PM	
Wed	May 22, 2019	4:00 PM	Wed	Jun 05, 2019	9:30 AM	Thu	Jul 18, 2019	6:00 PM	
Wed	Jun 19, 2019	4:00 PM	Wed	Jul 03, 2019	9:30 AM	Thu	Aug 01, 2019	6:00 PM	
Wed	Jul 24, 2019	4:00 PM	Wed	Aug 07, 2019	9:30 AM	Thu	Sep 05, 2019	6:00 PM	
Wed	Aug 21, 2019	4:00 PM	Wed	Sep 04, 2019	9:30 AM	Thu	Oct 03, 2019	6:00 PM	
Wed	Sep 25, 2019	4:00 PM	Wed	Oct 09, 2019	9:30 AM	Thu	Nov 07, 2019	6:00 PM	
Wed	Oct 23, 2019	4:00 PM	Wed	Nov 06, 2019	9:30 AM	Thu	Dec 05, 2019	6:00 PM	
Wed	Nov 20, 2019	4:00 PM	Wed	Dec 04, 2019	9:30 AM	Thu	Jan 02, 2020	6:00 PM	
Mon	Dec 23, 2019	4:00 PM	Wed	Jan 08, 2020	9:30 AM	Thu	Feb 06, 2020	6:00 PM	

*\*Meeting the application deadline does not guarantee each submittal will follow this schedule. There are two Planning Commission meetings scheduled each month on the first and third Thursdays. Staff reserves the right to schedule applications for either meeting. If an item is scheduled for the second meeting of the month, City Council consideration will shift accordingly.*

*\*\*Due to the Independence Day holiday on July 4, 2019, complete applications submitted on May 22, 2019, will be heard by the Planning Commission on July 18, 2019. Submitting an application on the May 22, 2019 application deadline shall be deemed a waiver of any right to have an application considered in a shorter time period.*

**FEE SCHEDULE FOR PLANNING DIVISION  
(Effective July 2018)**

APPLICATION TYPE	CITY OF SPARKS	DIV. OF WATER RESOURCES	DIV. OF ENVIRON. PROT.
<b>Annexation</b>	\$3,000.00 plus \$500.00 noticing fee	N/A	N/A
<b>Administrative Review</b>	\$1,250.00 deposit credited toward actual staff time <b>**Not to exceed \$7,495**</b> Plus \$472.00 District Health fees	N/A	N/A
<b>Administrative Review Medical Marijuana Establishment</b>	\$1,250.00 deposit credited toward actual staff time <b>**Not to exceed \$7,495**</b> Plus \$472.00 District Health fees	N/A	N/A
<b>Administrative Review Telecommunications Tower</b>	\$1,250.00 deposit credited toward actual staff time <b>**Not to exceed \$7,495**</b> Plus \$798.00 District Health fee if site is served by Septic System	N/A	N/A
<b>Amendment to Development Agreement</b>	\$88.00 per hour	N/A	N/A
<b>Area Plan</b>	\$5,000.00 deposit credited toward actual staff time	N/A	N/A
<b>Conditional Use Permit  Major</b>	\$2,500.00 deposit credited toward actual staff time <b>**Not to exceed \$7,495.00 **Plus \$500.00 noticing fee** **Plus \$798.00 District Health fee**</b> \$10,000.00 deposit credited toward actual staff time <b>**Plus \$500.00 noticing fee** **Plus \$798.00 District Health fee**</b>	N/A	N/A
<b>Comprehensive Plan Amendment</b>	\$2,500.00	N/A	N/A
<b>Development Agreement</b>	\$1,900.00 plus \$120.00 per hour <b>**Plus \$798.00 District Health fee**</b>	N/A	N/A
<b>Deviations Minor Major</b>	\$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>		
<b>Planned Development</b>	\$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 \$1,243 if served by sewer or \$2,739 if served by septic District Health fee**</b>	Applies only if there is a Tentative Map/Conformance Review (See Tentative Map)	
<b>Reviewed of expired Tentative Subdivision Map</b>	\$1,250.00 deposit credited toward actual staff time <b>**Not to exceed \$7,495**</b> <b>**Plus \$1,243 if served by sewer or \$2,739 if served by septic District Health fee**</b>	\$180.00 + \$1.00/lot	\$100.00 + \$1.00/lot
<b>Rezoning</b>	\$517.00 <b>**Plus \$500.00 noticing fee**</b>	N/A	N/A
<b>Temporary Use Permit</b>	\$100.00	N/A	N/A
<b>Tentative Subdivision Map</b>	\$22,800.00 <b>**Plus \$1,243 if served by sewer or \$2,739 if served by septic District Health fee**</b>	\$180.00 + \$1.00/lot	\$100.00 + \$1.00/lot
<b>Variance</b>	\$4,110.00 <b>**Plus \$500.00 noticing fee** **Plus \$472.00 District Health fee**</b>	N/A	N/A
<b>Zoning Research</b>	\$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.**