



CITY OF ELKO PLANNING DEPARTMENT

1751 College Avenue * Elko * Nevada * 89801

(775) 777-7160 * (775) 777-7219 fax

APPLICATION FOR VARIANCE

APPLICANT(s): _____
MAILING ADDRESS: _____
PHONE NO (Home) _____ (Business) _____
NAME OF PROPERTY OWNER (If different): _____
(Property owner's consent in writing must be provided.)
MAILING ADDRESS: _____
LEGAL DESCRIPTION AND LOCATION OF PROPERTY INVOLVED (Attach if necessary):
ASSESSOR'S PARCEL NO.: _____ Address _____
Lot(s), Block(s), & Subdivision _____
Or Parcel(s) & File No. _____

FILING REQUIREMENTS:

Complete Application Form: In order to begin processing the application, an application form must be complete and signed. *Complete* applications are due at least 21 days prior to the next scheduled meeting of the Elko City Planning Commission (meetings are the 1st Tuesday of every month).

Fee: A \$500.00 non-refundable fee must be paid. If in conjunction with a Rezone Application a \$250.00 non-refundable fee must be paid.

Plot Plan: A plot plan depicting existing conditions, as surveyed by a properly licensed surveyor, and any proposed improvements, as designed by a properly licensed design professional to include: property lines, existing and proposed buildings, building setbacks, parking and loading areas, driveways and other pertinent information must be provided.

If the property is not developed, a plot plan provided by a properly licensed design professional, drawn to scale showing property lines, proposed buildings, building setbacks, parking and loading areas, driveways and other pertinent information must be provided.

Elevation Plan: Elevation profile of all proposed buildings or alterations in sufficient detail to explain the nature of the request must be provided.

Note: One .pdf of the entire application must be submitted as well as three sets of legible, plans.

Other Information: The applicant is encouraged to submit other information and documentation to support this Variance application.

1. The provision or regulations of Title 3, Chapter 2, 5 or 9 of the Elko City Code from which the property or building is sought to be excepted:

2. The existing zoning classification of the property _____

3. Proposed Zone (If in conjunction with a Zone Change Application): _____

4. The applicant shall present **adequate** evidence demonstrating the following criteria which are necessary for the Planning Commission to grant a variance:

a) Identify any special circumstances or features, i.e., unusual shape, configuration, exceptional topographic conditions or other extraordinary situations or conditions applying to the property under consideration.

b) If applicable, describe how the special circumstance or extraordinary situation or condition results in exceptional practical difficulties or exceptional undue hardships.

c) Describe why the strict application of the provision or requirement constitutes an abridgment of property right and deprives the property owner of reasonable use of property.

d) Identify how such circumstances, features or conditions do not apply generally to other properties in the same zoning district.

e) Indicate how the granting of the variance will not result in material damage or prejudice to other properties in the vicinity nor be detrimental to the public health, safety and general welfare.

f) State why the granting of the variance will not substantially impair the purpose or intent of the Code.

g) State why the granting of the variance will not result in a change of land use or zoning classification.

h) Indicate how granting of the variance will not substantially impair affected natural resources.

5. Provide evidence of your ability and intent to proceed with actual construction within one year of approval of the variance? All persons who received variances **must** commence construction within one year and complete construction within 18 months per City Code Section 3-2-22 F.1.:

(Use additional pages if necessary to address questions 2a through h)

By My Signature below:

I consent to having the City of Elko Staff enter on my property only for the sole purpose of inspecting said property as part of this application process.

I object to having the City of Elko Staff enter onto my property as a part of their review of this application. (Your objection will not affect the recommendation made by the staff or the final determination made by the City Planning Commission or the City Council, but may limit the information available to Staff in making its recommendation.)

I acknowledge that submission of this application does not imply approval of this request by the City Planning Department, the City Planning Commission and the City Council, nor does it in and of itself guarantee issuance of any other required permits and/or licenses.

I acknowledge that this application may be tabled until a later meeting if I am not present or represented 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 Address or P.O. Box

City, State, Zip Code

Phone Number: _____

Email address: _____

SIGNATURE: _____

FOR OFFICE USE ONLY

File No.: _____ **Date Filed:** _____ **Fee Paid:** _____