



Planning & Zoning Department

Subdivision Final Plat Checklist

Staff Use Only	
Project Name: _____	
File Number: _____	Prelim Plat Number: _____

All of the following materials must be provided or the application will not be accepted.

Applicant	Staff	Description
		Affidavit of legal interest (if different from Preliminary Plat)
		Auto CAD File and PDF of Final Plat (full size)
		Improvement/Construction Drawings (full size)
		Full Geotechnical/Soil Reports with foundation recommendations
		Storm Water Reports
		Traffic Impact Study (if not submitted previously)
		Legal description of plat boundary
		PDF of landscape plans Show Tree details and planting specifics Show Fencing details to include location, Fence Material and Height
		An as-built record of survey (only for existing and permitted buildings)
		PDF of the approved Preliminary Plat
		Narrative fully describing the scope of the project
		Associated fees
		Master Application form

Submit all materials digitally unless requested otherwise.

Standard Final Plat Fees

Planning Final Plat Review Fee	\$375	\$
Plus \$25.79 per lot	\$25.79 x () =	\$
Sewer Model Fee	\$300	\$
Water Model Fee	\$300	\$
Fire Department Review Fee	\$50	\$
	Total=	\$

NOTICE TO APPLICANT

ROUTING – Applications will be scheduled as a Business Item to be recommended for approval by the Nampa Planning and Zoning Commission. The recommendation for approval will be scheduled on the following City Council agenda as a consent agenda item. All information on this checklist shall be submitted at least 41 days prior to the desired Planning and Zoning Commission Meeting. Planning and Zoning Commission meetings are held on the 2nd & 4th Tuesday of each month. City Council meetings are held on the 1st & 3rd Mondays of each month.



Planning & Zoning Department Master Application

Staff Use Only

Project Name: _____
 File Number: _____
 Related Applications: _____

Type of Application

- | | |
|---|---|
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Planned Unit Development/MPC |
| <input type="checkbox"/> Appeal | <input type="checkbox"/> RV Park |
| <input type="checkbox"/> Building & Site Design | <input type="checkbox"/> Subdivision |
| <input type="checkbox"/> Comprehensive Plan Amendment | <input type="checkbox"/> Short |
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Preliminary |
| <input type="checkbox"/> Development Agreement | <input type="checkbox"/> Final |
| <input type="checkbox"/> Modification | <input type="checkbox"/> Condo |
| <input type="checkbox"/> Home Occupation | <input type="checkbox"/> Temporary Use Permit |
| <input type="checkbox"/> Daycare | <input type="checkbox"/> Fireworks Stand |
| <input type="checkbox"/> Kennel License | <input type="checkbox"/> Vacation |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Mobile Home Park | <input type="checkbox"/> Zoning Map/Ordinance Amendment |
| <input type="checkbox"/> Legal Non-Conforming Use | <input type="checkbox"/> Other: _____ |

You must attach any corresponding checklists with your application or it will not be accepted

Applicant Name: _____ Phone: _____

Applicant Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Interest in property: Own Rent Other: _____

Owner Name: _____ Phone: _____

Owner Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Contractor Name (e.g., Engineer, Planner, Architect): _____

Firm Name: _____ Phone: _____

Contractor Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Subject Property Information

Address: _____

Parcel Number(s): _____ Total acreage: _____ Zoning: _____

Type of proposed use: Residential Commercial Industrial Other: _____

Project/Subdivision Name: _____

Description of proposed project/request: _____

Proposed Zoning: _____ Acres of each proposed zone: _____

Development Project Information (if applicable)

Lot Type	Number of Lots	Acres
Residential		
Commercial		
Industrial		
Common (Landscape, Utility, Other)		
Open Space		
Total		

Please answer all questions that are relevant to your project

Minimum square footage of structure: _____ Maximum building height: _____

Minimum property size (s.f.): _____ Average property size (s.f.): _____

Gross density: _____ Net density: _____

Type of dwelling proposed: Single-family Detached Single-family Attached

Duplex Multi-family Condo Other: _____

Proposed number of units: _____

Total number of parking spaces provided: _____

% of open space/common area: _____

Completed applications and checklists can be sent to: pzall@cityofnampa.us

Authorization

Print applicant name: _____

Applicant signature: _____ Date: _____

City Staff

Received by: _____ Received date: _____



City of Nampa

PLANNING and ZONING DEPARTMENT

OFFICE (208) 468-5484

CITY HALL

411 THIRD STREET SO.

NAMPA, IDAHO 83651

FAX (208) 465-2261

AFFIDAVIT OF LEGAL INTEREST

STATE OF IDAHO)
 :SS
COUNTY OF CANYON)

A. I, _____, whose address is _____, being first duly sworn upon oath, depose and say that I am the owner of record of the property described on the attached application.

B. I grant my permission to _____, whose address is _____, to submit the accompanying application pertaining to the property described on the attached application.

C. I agree to indemnify, defend and hold the City of Nampa and its employees harmless from any claim or liability resulting from any dispute as to the statements contained herein or as to the ownership of the property which is the subject of the application.

Dated this _____ day of _____, _____.

Signature

SUBSCRIBED AND SWORN to before me the ____ day of _____, _____.

Notary Public for Idaho
Residing at: _____
Commission Expires: _____