



# Planning & Zoning Department

## Legal Non-Conforming Use Checklist

<b>Staff Use Only</b>	
Project Name: _____	
File Number: _____	Received date: _____

Nonrefundable Fee: **\$100.00**

**Please provide the following required documentation to complete the application. Applications should be submitted through the Citizen Self Service (CSS) portal online. Instructions can be found on our website [cityofnampa.us/255/Planning-Zoning](http://cityofnampa.us/255/Planning-Zoning) under the *Apply for a Planning Permit* link.**

Applicant	Staff	Description
<b>A copy of one of the following</b>		
		A recorded warranty deed for the property
		Proof of option
		Earnest money agreement
<b>One copy of each of the following</b>		
		A notarized, detailed letter stating the nature of the request, the type(s) of non-conforming use/site situation to be maintained and/or continued.
		At least two (2) items of evidence which establish when the non-conforming use/site situation was established and document it's continuation or continuous presence ever since that time (e.g. notarized affidavits from neighbors, utility bills, rental or other receipts, tax records, copies of old permits, date phone book entries, copies of (an) advertisement(s), aerial photos, etc.) (Note that the more that gaps in dates furnished by documentation can be accounted for, the better Zoning Staff can evaluate your request.)
		Any other miscellaneous information (e.g. misc. pictures, drawings, informational articles, etc.)
		Associated fees
		Master Application form

State the specific proposed use (attach a separate letter if more space is needed): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### NOTICE TO APPLICANT

This application will be reviewed by the Planning Director or his/her designee with the intent to approve or deny the application. If approval is granted by the Director or his/her designee, he/she shall send you, the applicant, an action letter which shall serve as your permit.

Legal, nonconforming (a.k.a. "grandfathered") uses or situations shall be considered those wherein a lawful use of land or the physical improvements (i.e., the "site situation") thereon existed on and before April 17, 1989, or prior to a rezone, annexation or zoning code change that occurred subsequent to that date. Thus, although a use or site situation does not currently conform with regulations specified by this title for the district in which such land is presently located, it may be continued subject to the provisions of this section (10-3-9: Non-Conforming Uses).



# Planning & Zoning Department

## Master Application

**Staff Use Only**

Project Name: \_\_\_\_\_

File Number: \_\_\_\_\_

Related Applications: \_\_\_\_\_

### Type of Application

- |   |  |
|---|--|
| <input type="checkbox"/> Accessory Structure          | <input type="checkbox"/> Legal Non-Conforming Use                |
| <input type="checkbox"/> Annexation/Pre-Annexation    | <input type="checkbox"/> Planned Unit Development/MPC            |
| <input type="checkbox"/> Appeal                       | <input type="checkbox"/> Subdivision                             |
| <input type="checkbox"/> Design Review                | <input type="checkbox"/> Short                                   |
| <input type="checkbox"/> Comprehensive Plan Amendment | <input type="checkbox"/> Preliminary                             |
| <input type="checkbox"/> Conditional Use Permit       | <input type="checkbox"/> Final                                   |
| <input type="checkbox"/> Multi-Family Housing         | <input type="checkbox"/> Condo                                   |
| <input type="checkbox"/> Development Agreement        | <input type="checkbox"/> Temporary Use Permit                    |
| <input type="checkbox"/> Modification                 | <input type="checkbox"/> Fireworks Stand                         |
| <input type="checkbox"/> Home Occupation              | <input type="checkbox"/> Vacation                                |
| <input type="checkbox"/> Daycare                      | <input type="checkbox"/> Variance                                |
| <input type="checkbox"/> Kennel License               | <input type="checkbox"/> Staff Level                             |
| <input type="checkbox"/> Commercial                   | <input type="checkbox"/> Zoning Map/Ordinance Amendment (Rezone) |
| <input type="checkbox"/> Mobile Home Park             | <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: \_\_\_\_\_

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Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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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, etc.)		
Right of Way (internal roadways, ROW to be dedicated, etc.)		
Qualified Open Space		
<b>Total</b>		

**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 qualified open space: \_\_\_\_\_

**Additional information may be requested after submittal.**

**Authorization**

Print applicant name: \_\_\_\_\_

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

**City Staff**

Received by: \_\_\_\_\_ Received date: \_\_\_\_\_