



Planning & Zoning Department

Variance Checklist

Nonrefundable Fee: **\$350.00**

Staff Use Only	
Project Name: _____	File Number: _____
Date Received: _____	Code Referenced: _____

Please ensure that you have had a pre-application meeting or discussion with a member of Planning and Zoning staff prior to submitting your application.

Did you discuss this application with a planner? Yes No

Date of Pre-App Meeting/Discussion: ____/____/____ Type (in person, phone, email, etc.) _____

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 under the *Apply for a Planning Permit* link.

Applicant	Staff	Description
A copy of <u>ONE</u> of the following		
		A recorded warranty deed for the property
		Proof of option
		Earnest money agreement
One copy of <u>EACH</u> of the following		
		Signed & Notarized Affidavit of Legal Interest. Form must be completed by the legal owner (if the owner is a corporation, submit a copy of the Articles of Incorporation or other evidence to show that the person signing is an authorized agent)
		A Professional Land Surveyor or Engineer verified <u>original legal description</u> of property. • If the legal description provided is not clean and legible, a retyped Microsoft Word formatted document must be submitted.
		Site plan showing requested area for variance
		Narrative fully describing the practical difficulty or unnecessary hardship which would result from a literal interpretation and enforcement of the specific regulation for which the variance is being sought.
		Associated fees
		Master Application form

NOTICE TO APPLICANT

This application will be referred to the Nampa City Council for its consideration. The City Council shall hold a public hearing on the application and it shall be granted or denied. Notice of the public hearing shall be sent to adjacent property owners no less than 10 or more than 30 days prior to the hearing. You will be given notice of the public hearing and should be present to answer any questions.

A variance shall not be considered a right or a privilege, but will only be granted upon showing the following undue hardship:

1. Special characteristics of the site, which deprive it of privileges commonly enjoyed by other properties in the same zone or vicinity, and
2. The variance is not in conflict with the public interest.

Variances are not intended to allow something that others do not have a permitted right to do. The use or construction permitted by a variance must be commenced within a 6-month period. If such use or construction has not commenced within such time period, the variance shall no longer be valid. Prior to the expiration of the 6-month period the applicant may request from the city Council an extension for up to an additional 6 months from the original date of approval.



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: _____

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, etc.)		
Right of Way (internal roadways, ROW to be dedicated, etc.)		
Qualified 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 qualified open space: _____

Additional information may be requested after submittal.

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: _____