Community Services Department Planning and Building DETATCHED ACCESSORY DWELLING ADMINISTRATIVE REVIEW APPLICATION



Community Services Department Planning and Building 1001 E. Ninth St., Bldg. A Reno, NV 89520

Telephone: 775.328.6100

Property Owner Affidavit

Applicant Name:

)))

The receipt of this application at the time of submittal does not guarantee the application complies with all requirements of the Washoe County Development Code, the Washoe County Master Plan or the applicable area plan, the applicable regulatory zoning, or that the application is deemed complete and will be processed.

STATE OF NEVADA

Andrews Family Trust, Duane Andrews

(please print name)

being duly sworn, depose and say that I am the owner* of the property or properties involved in this application as listed below 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 understand that no assurance or guarantee can be given by members of Planning and Building.

(A separate Affidavit must be provided by each property owner named in the title report.)

Assessor Parcel Number(s): 130-312-30

Pi	rinted NameDuane Andrews
	Signed Duran Archen
	Address 908 Lakeshore Blvd.,
Subscribed and sworn to before me thisday of	10,989 (Notary Stamp)
Notary Public in and for said county and state	SEE
My commission expires:	

*Owner refers to the following: (Please mark appropriate box.)

- Owner
- Corporate Officer/Partner (Provide copy of record document indicating authority to sign.)
- Dever of Attorney (Provide copy of Power of Attorney.)
- Owner Agent (Provide notarized letter from property owner giving legal authority to agent.)
- Property Agent (Provide copy of record document indicating authority to sign.)
- Letter from Government Agency with Stewardship

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

See Attached Document (Notary to cross out lines 1–6 below)

Signature of Document Signer No. 1

Signature of Document Signer No. 2 (if any)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California County of <u>Nevada</u>

AAAA	
1	AMANDA E. SERNA Notary Public - California
	Nevada County Z
N (2 m/)	Commission # 2148241
	My Comm. Expires Apr 2, 2020

Subscrip	bed and	sworn	to (or	affirmed)	before me
on this _	4	day of			<u>, 20 (O</u>
by	Date		Λ	Nonth	Year
(1)	Du	are		And	rews
(and (2)),
		Nam	e(s) of	Signer(s)	

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Ama Signature Signature of Notary Public

Seal Place Notary Seal Above

OPTIONAL -

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: ____

Document Date:

Number of Pages: _____ Signer(s) Other Than Named Above:

©2014 National Notary Association • www.NationalNotary.org • 1-800-US NOTARY (1-800-876-6827) Item #5910

Washoe County Development Application

Your entire application is a public record. If you have a concern about releasing personal information, please contact Planning and Building staff at 775.328.6100.

Project Information	S	Staff Assigned Case No.:	
Project Name:			
Project Description:			
Project Address:			
Project Area (acres or square fe	et):		
Project Location (with point of re	eference to major cross	s streets AND area locator):	
Assessor's Parcel No.(s):	Parcel Acreage:	Assessor's Parcel No.(s):	Parcel Acreage:
Section(s)/Township/Range:			
	pe County approval	s associated with this applicat	tion:
Case No.(s).			
Applicant Inf	ormation (attach	additional sheets if necess	sary)
Property Owner:		Professional Consultant:	
Name:		Name:	
Address:		Address:	
	Zip:		Zip:
Phone:	Fax:	Phone:	Fax:
Email:		Email:	
Cell:	Other:	Cell:	Other:
Contact Person:		Contact Person:	
Applicant/Developer:		Other Persons to be Contact	ted:
Name:		Name:	
Address:		Address:	
	Zip:		Zip:
Phone:	Fax:	Phone:	Fax:
Email:		Email:	
Cell:	Other:	Cell:	Other:
Contact Person:		Contact Person:	
	For Office	e Use Only	
Date Received:	Initial:	Planning Area:	
County Commission District:		Master Plan Designation(s):	
CAB(s):		Regulatory Zoning(s):	

Administrative Review Permit Application for a Detached Accessory Dwelling Supplemental Information

(All required information may be separately attached)

This application is for proposals to establish a Detached Accessory Dwelling unit in the Low Density Rural, Medium Density Rural, High Density Rural, and Low Density Suburban regulatory zones. Chapter 110 of the Washoe County Code is commonly known as the Development Code. Specific references to the administrative review permit process for Detached Accessory Dwellings may be found in Article 306, Accessory Uses and Structures, Section 25(i). A Detached Accessory Dwelling is also referred to as a "secondary dwelling" in this application. The "main dwelling" is the original or larger dwelling on the property.

- 1. What is the size (square footage) of the main dwelling unit or proposed main dwelling unit (exclude size of garage)?
- 2. What is the size of the detached accessory dwelling unit or proposed detached accessory dwelling unit (exclude size of garage)?
- 3. How are you planning to integrate both the main dwelling and secondary dwelling to provide architectural compatibility and a sense of project integration of the two structures?

4. How are you planning to provide water and wastewater disposal (sewer or septic) to the secondary dwelling unit?

5. What additional roadway, driveway, or access improvements are you planning?

6. A parking space is required. How are you providing the additional parking?

7. When do you plan to complete construction of the secondary dwelling and obtain a certificate of occupancy?

8. What will you do to minimize any potential negative impacts (e.g. increased lighting, obstruction of views, removal of existing vegetation, etc.) your project may have on adjacent properties?

9. Is the subject property part of an active Home Owners Association (HOA) or Architectural Control Committee? If yes, please include the name and contact information for the applicable board.

10. Are there any restrictive covenants, recorded conditions, or deed restrictions (CC&Rs) that may prohibit a detached accessory dwelling on your property?

Yes	🗆 No	If yes, please attach a copy.

- 11. Only one accessory dwelling unit, whether attached or detached, is allowed per parcel. Please verify that an accessory dwelling (i.e. secondary dwelling) currently does not exist on the subject property.
- 12. List the age and size of the unit If you plan to utilize a manufactured or modular home as the secondary dwelling. (Note: manufactured or modular homes must be permanently affixed and converted to real property.)
- 13. List who the service provider will be for the following utilities:

a. Sewer Service	
b. Electrical Service	
c. Solid Waste Disposal Service	
d. Water Service	

Washoe County Treasurer P.O. Box 30039, Reno, NV 89520-3039 ph: (775) 328-2510 fax: (775) 328-2500 Email: tax@washoecounty.us

Washoe County Treasurer Tammi Davis

Bill Detail

Back to Account Detail

Change of Address

Print this Page

Washoe County Parcel Information	tion	
Parcel ID	Status	Last Update
13031230	Active	9/13/2018 2:06:45 AM
Current Owner: TOWER LLC 908 LAKESHORE BLVD INCLINE VILLAGE, NV 89451	SITUS: 1135 LAKESHORE INCLINE VILLAGE I	
Taxing District	Geo CD:	

5200

Geo CD:

Legal Description

Township 16 Section 23 Lot A Block Range 18 SubdivisionName _UNSPECIFIED

Installr	ments					
Period	Due Date	Tax Year	Тах	Penalty/Fee	Interest	Total Due
INST 1	8/20/2018	2018	\$0.00	\$0.00	\$0.00	\$0.00
INST 2	10/1/2018	2018	\$0.00	\$0.00	\$0.00	\$0.00
INST 3	1/7/2019	2018	\$0.00	\$0.00	\$0.00	\$0.00
INST 4	3/4/2019	2018	\$0.00	\$0.00	\$0.00	\$0.00
		Total Due:	\$0.00	\$0.00	\$0.00	\$0.00

Tax Detail			
	Gross Tax	Credit	Net Tax
Incline Recreati	\$705.00	\$0.00	\$705.00
Incline Village	\$3,931.48	(\$281.56)	\$3,649.92
North Lake Tahoe 2	\$20,206.65	(\$885.64)	\$19,321.01
State of Nevada	\$5,460.39	(\$239.32)	\$5,221.07
Washoe County	\$44,701.30	(\$1,959.22)	\$42,742.08
Washoe County Sc	\$36,568.54	(\$1,602.77)	\$34,965.77
LAKE TAHOE WATER BASIN	\$0.13	\$0.00	\$0.13
Total Tax	\$111,573.49	(\$4,968.51)	\$106,604.98

Payment H	istory			
Tax Year	Bill Number	Receipt Number	Amount Paid	Last Paid
2018	2018173204	B18.74707	\$106,604.98	8/27/2018

The Washoe County Treasurer's Office makes every effort to produce and publish the most current and accurate information possible. No warranties, expressed or implied, are provided for the data herein, its use, or its interpretation. If you have any questions, please contact us at (775) 328-2510 or tax@washoecounty.us

This site is best viewed using Google Chrome, Internet Explorer 11, Mozilla Firefox or Safari.

Overnight Address: 1001 E. Ninth St., Ste D140 Reno, NV 89512-2845

Change of Address

All requests for a mailing address change must be submitted in writing, including a signature (unless using the online form).

To submit your address change online click here

Address change requests may also be faxed to: (775) 328-2500

Address change requests may also be mailed to: Washoe County Treasurer P O Box 30039 Reno, NV 89520-3039

Pay By Check

Please make checks payable to: WASHOE COUNTY TREASURER

Mailing Address:

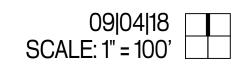
P.O. Box 30039 Reno, NV 89520-3039

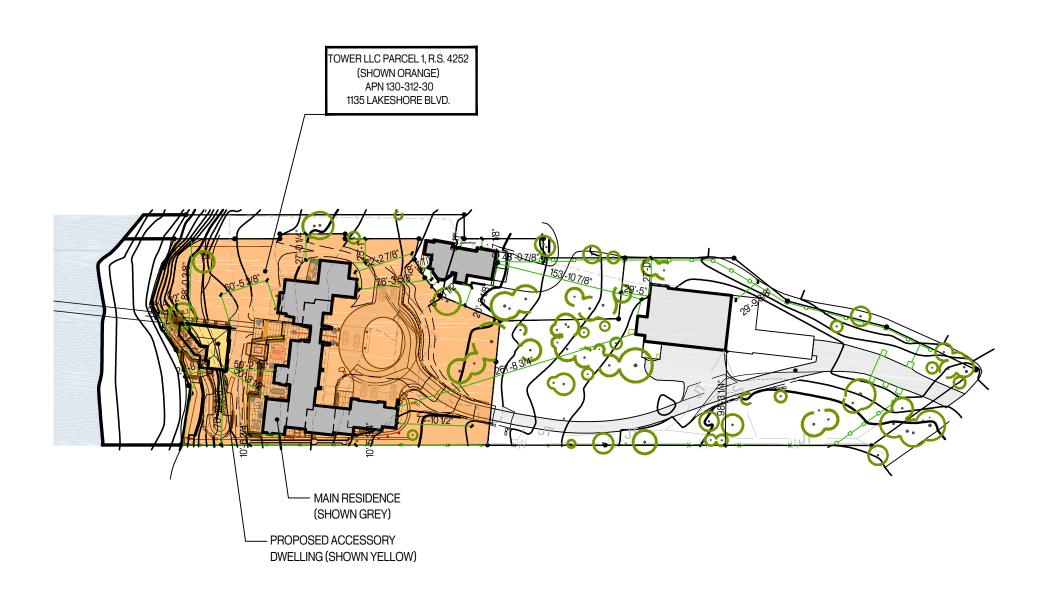


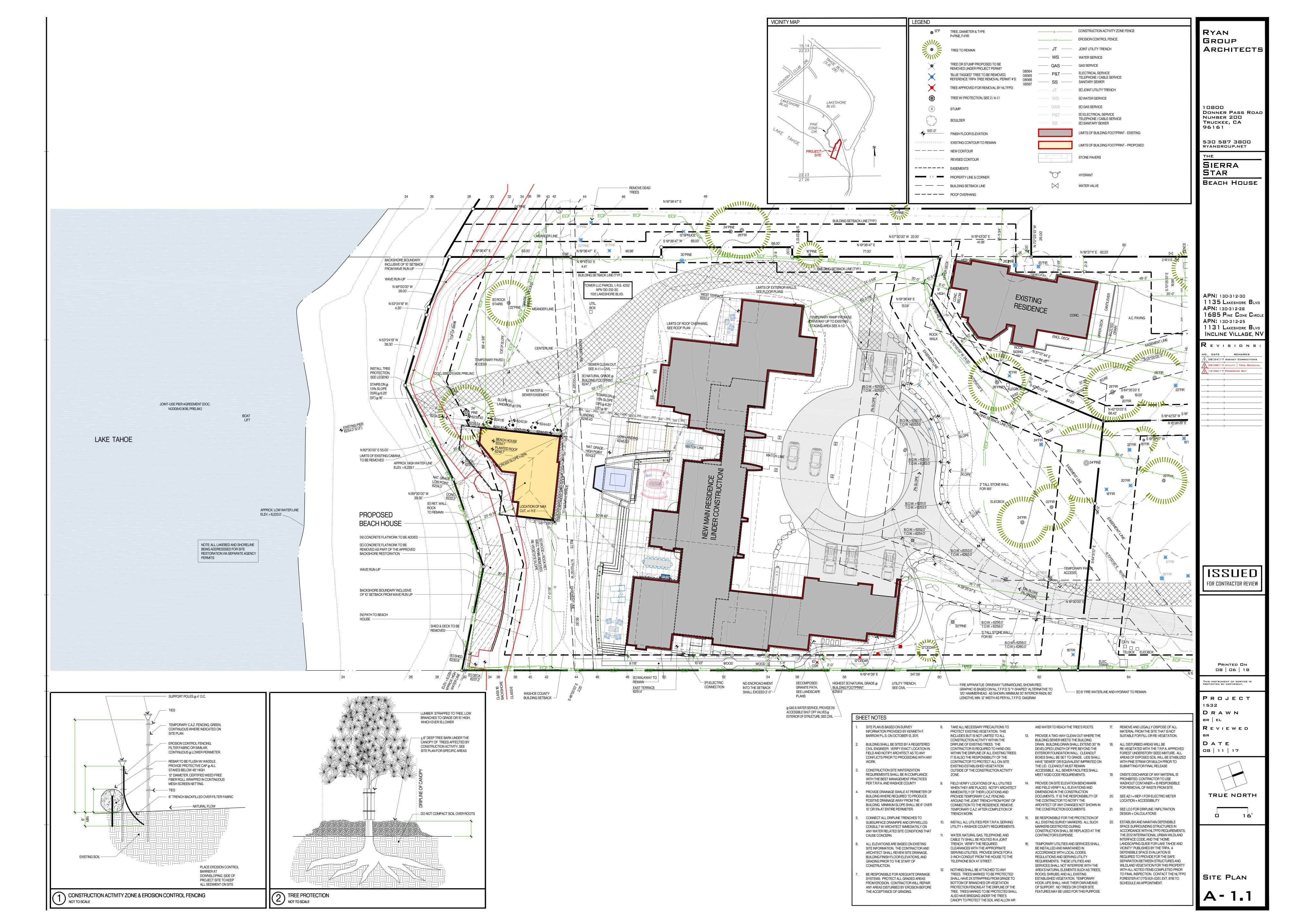
SIERRA STAR - PROJECT LOCATION DADAR SUBMITTAL PACKAGE PAGE 2 OF 2



3IERRA STAR - SITE PLAN JADAR SUBMITTAL PACKAGE PAGE 1 OF 2

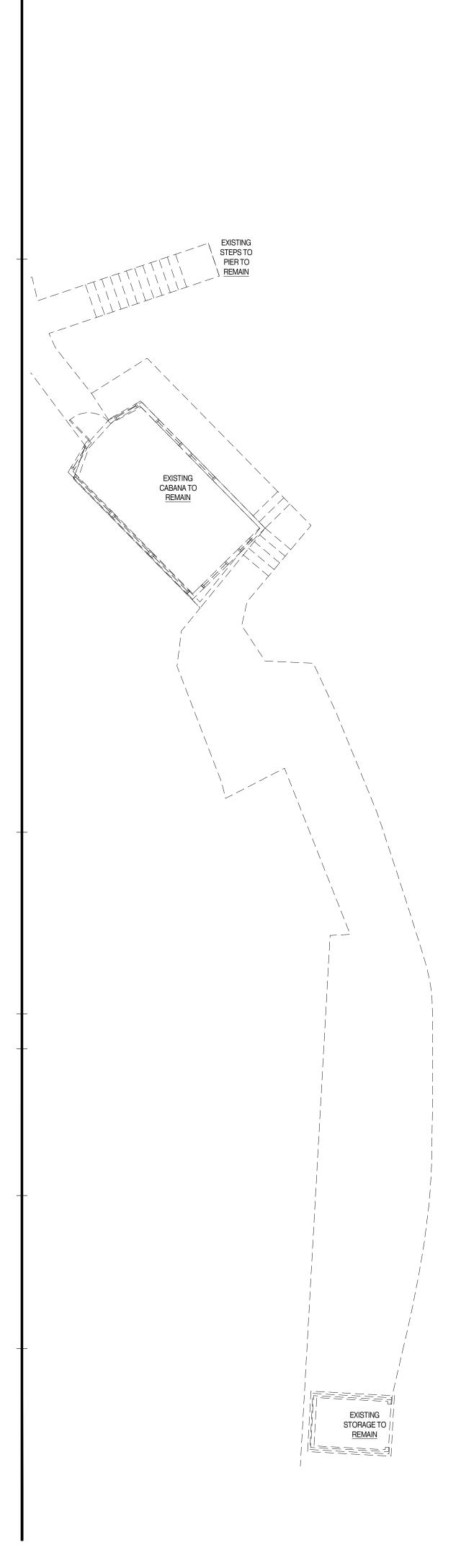


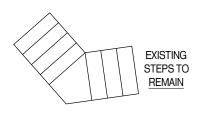


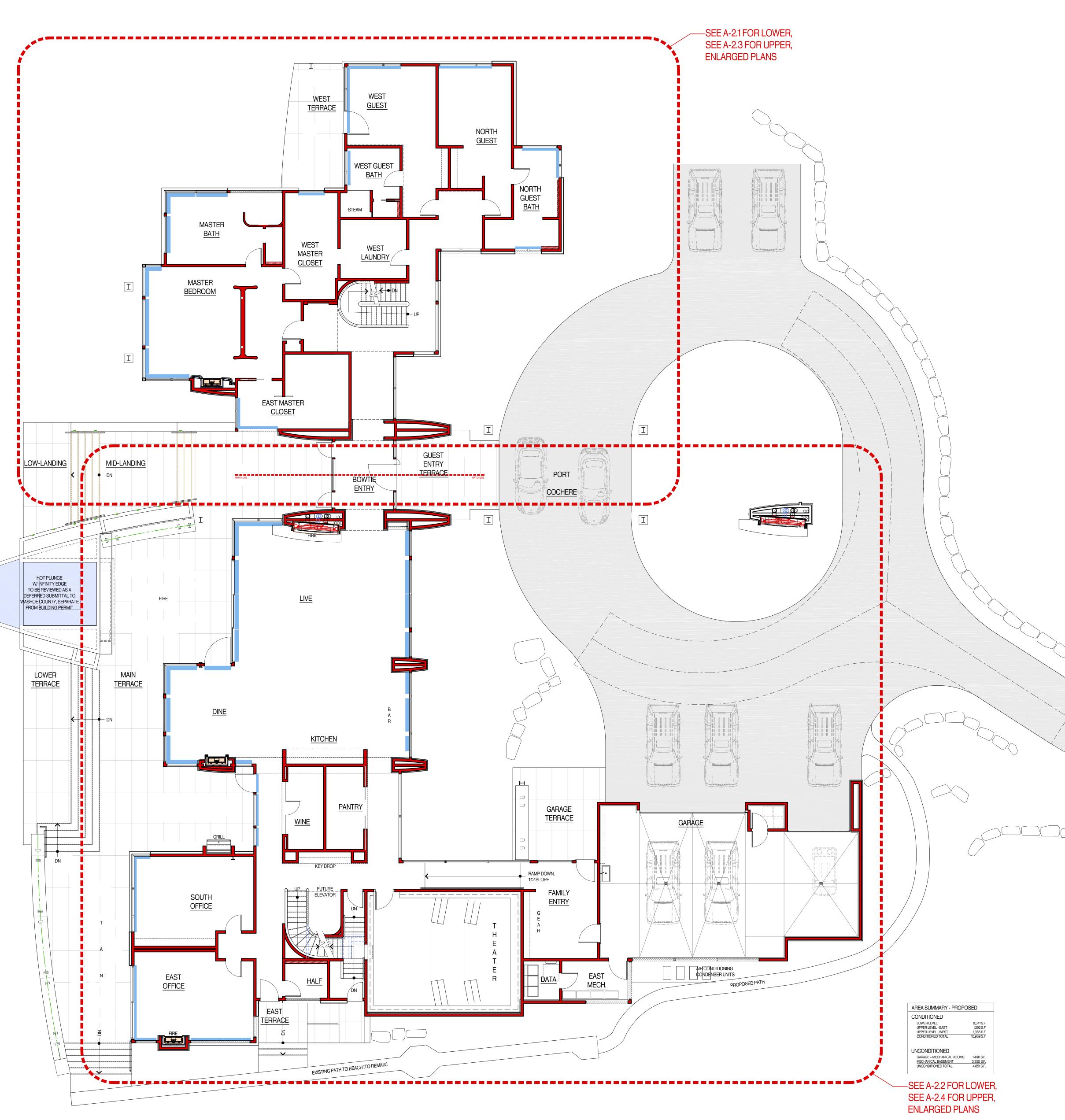


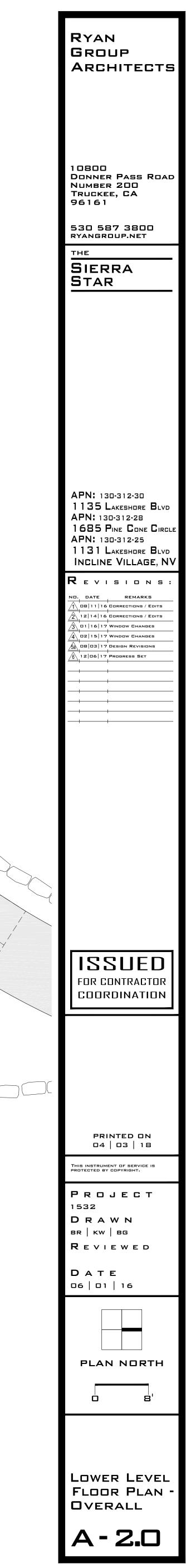


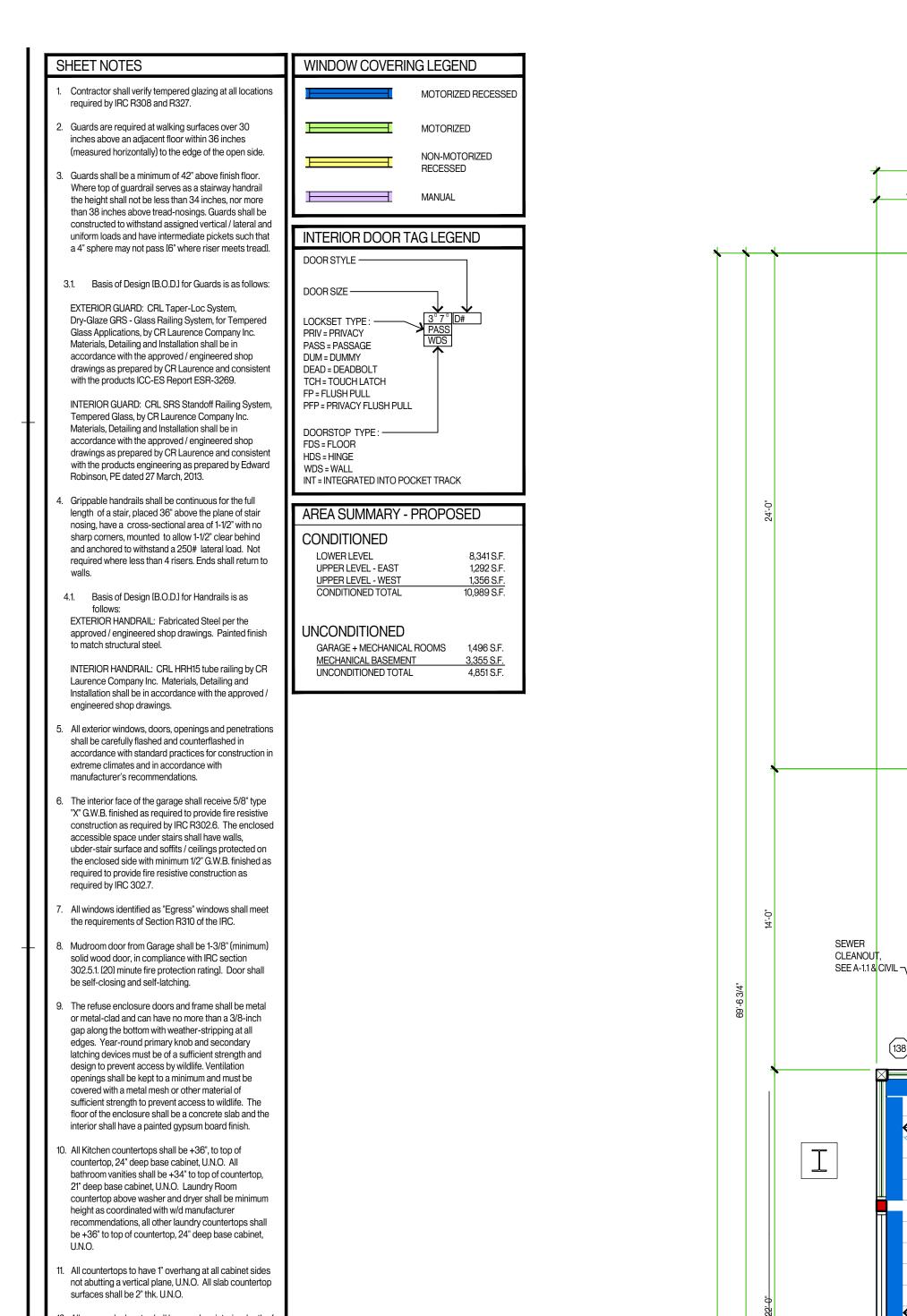










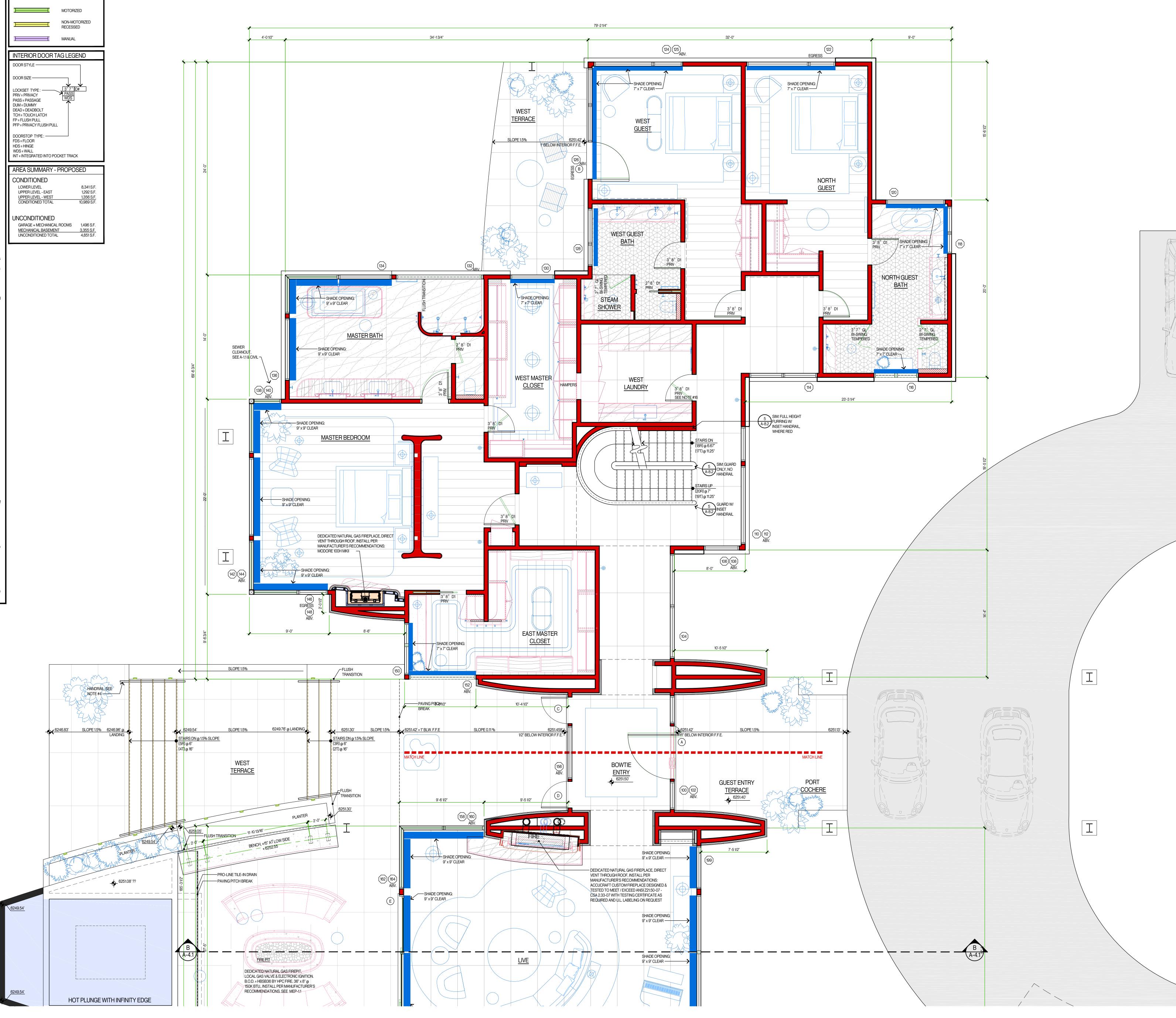


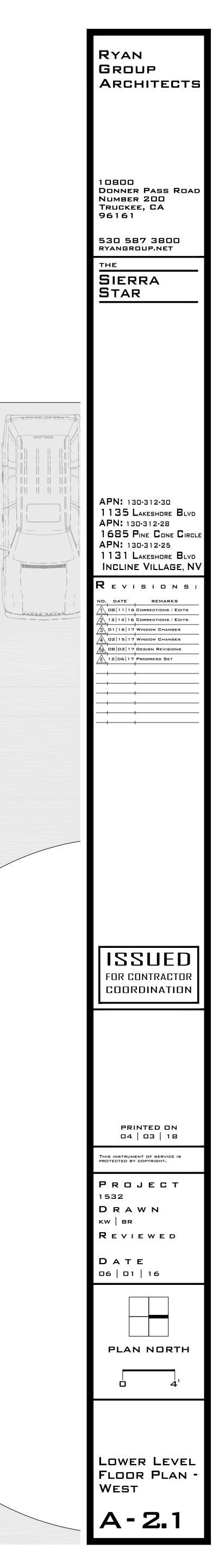
12. All casework closets shall have a clear interior depth of 24", U.N.O.

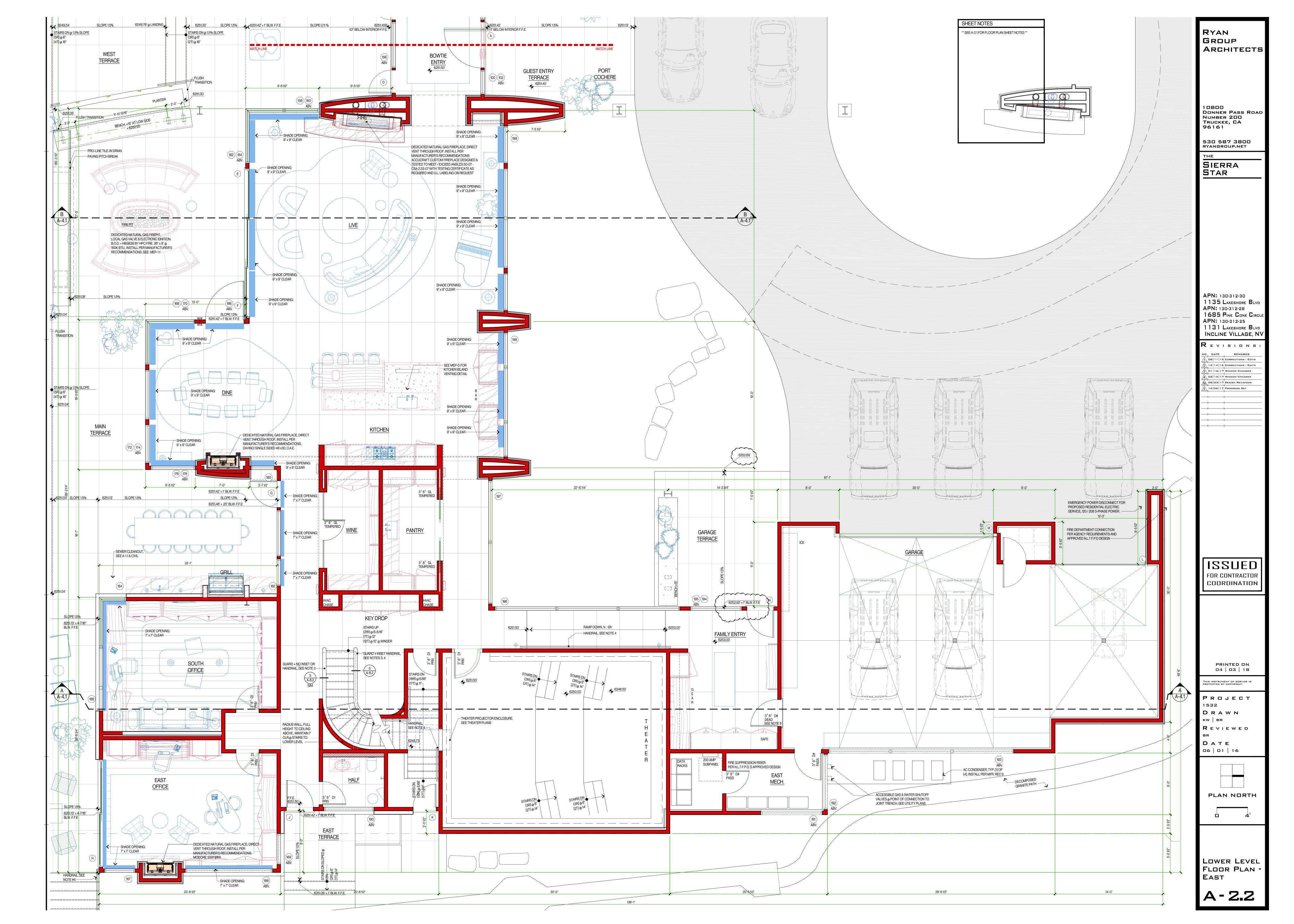
13. No wood burning devices are proposed. 14. Stairways shall have a maximum riser height of 7-3/4 inches and minimum tread depth of 10 inches. Maximum tread/riser variation shall be less than 3/8 inch. Any deviation from from the specified rise / run shall be brought to the attention of the architect prior to construction.

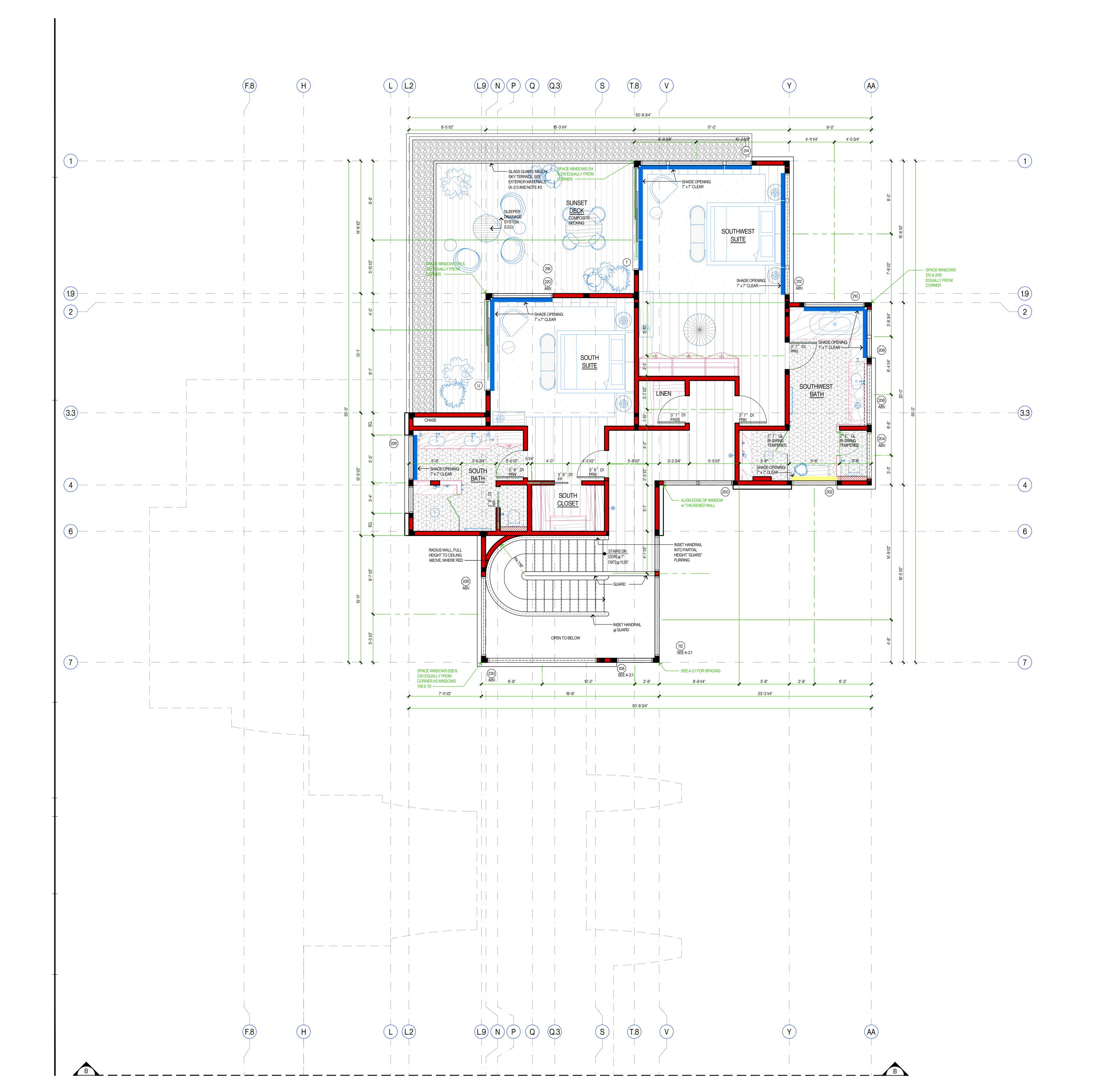
15. Install fire blocking at concealed draft openings, between stories, between walls and roofs, at stair stringers and at the top and bottom of each stair run as required by IRC R302.11 & R302.12

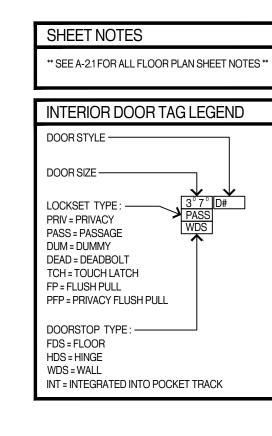
16. Bottom panel of laundry room door shall have louvered grill providing minimum of 100 square inches of net free area.

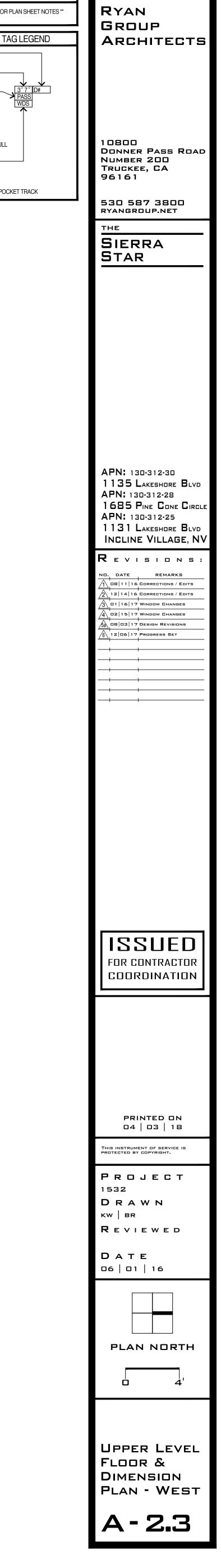




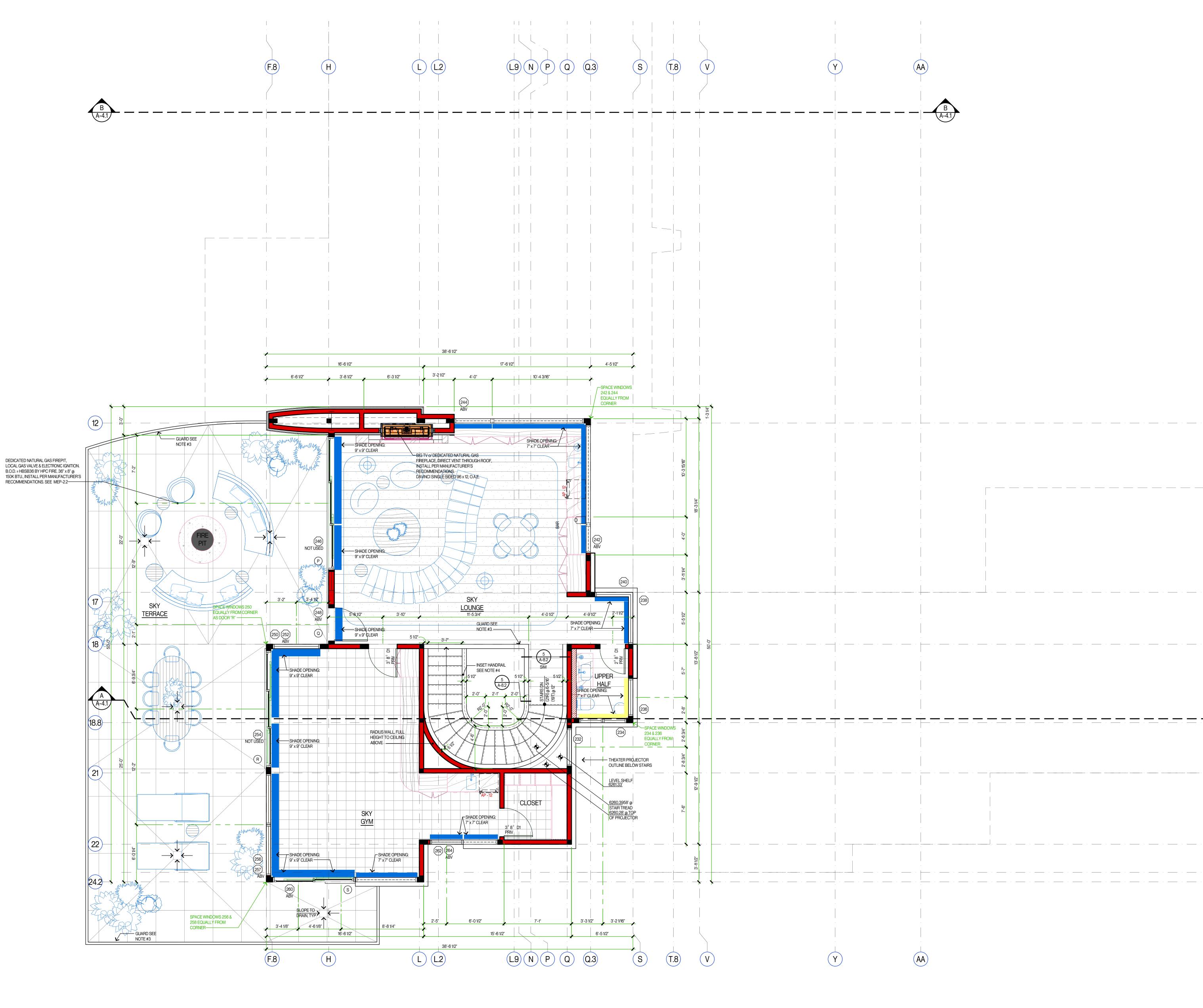


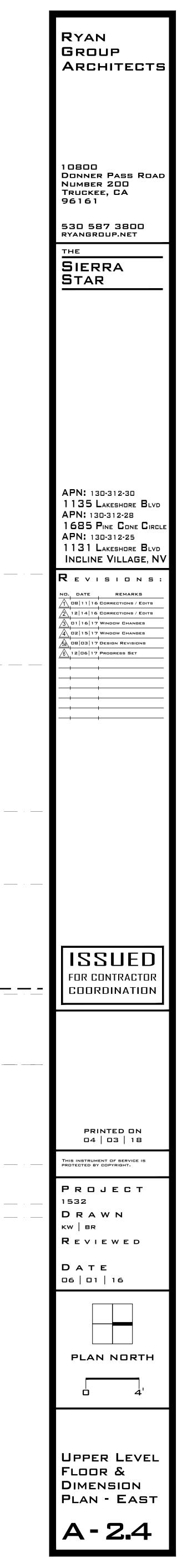


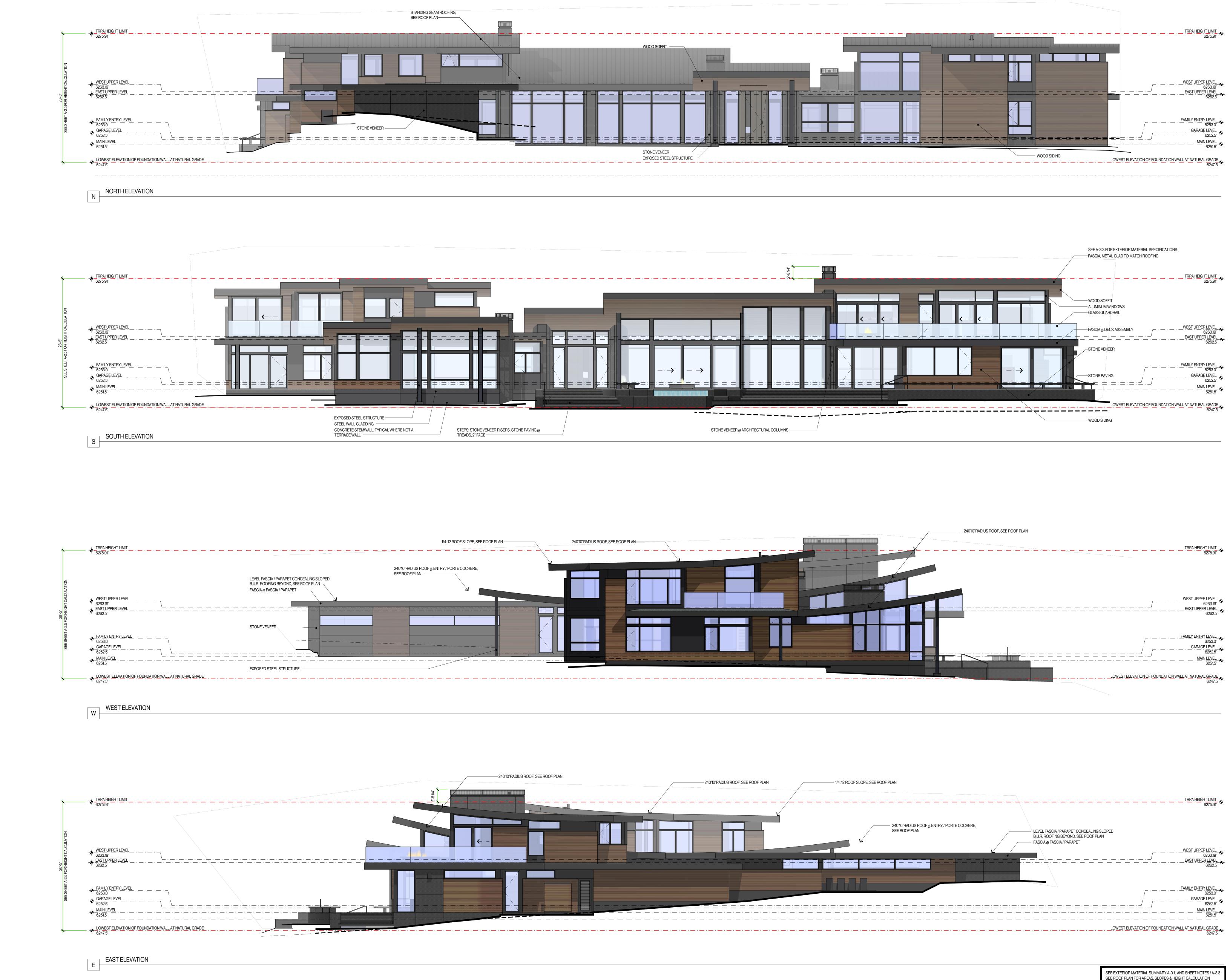


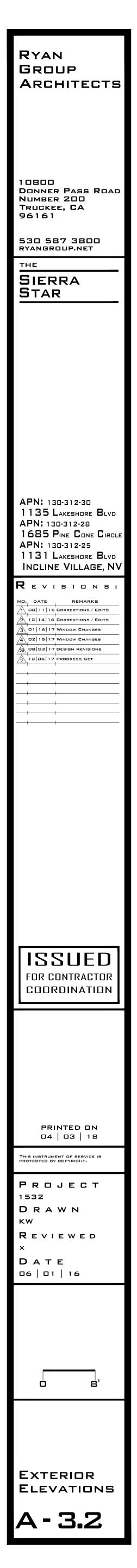


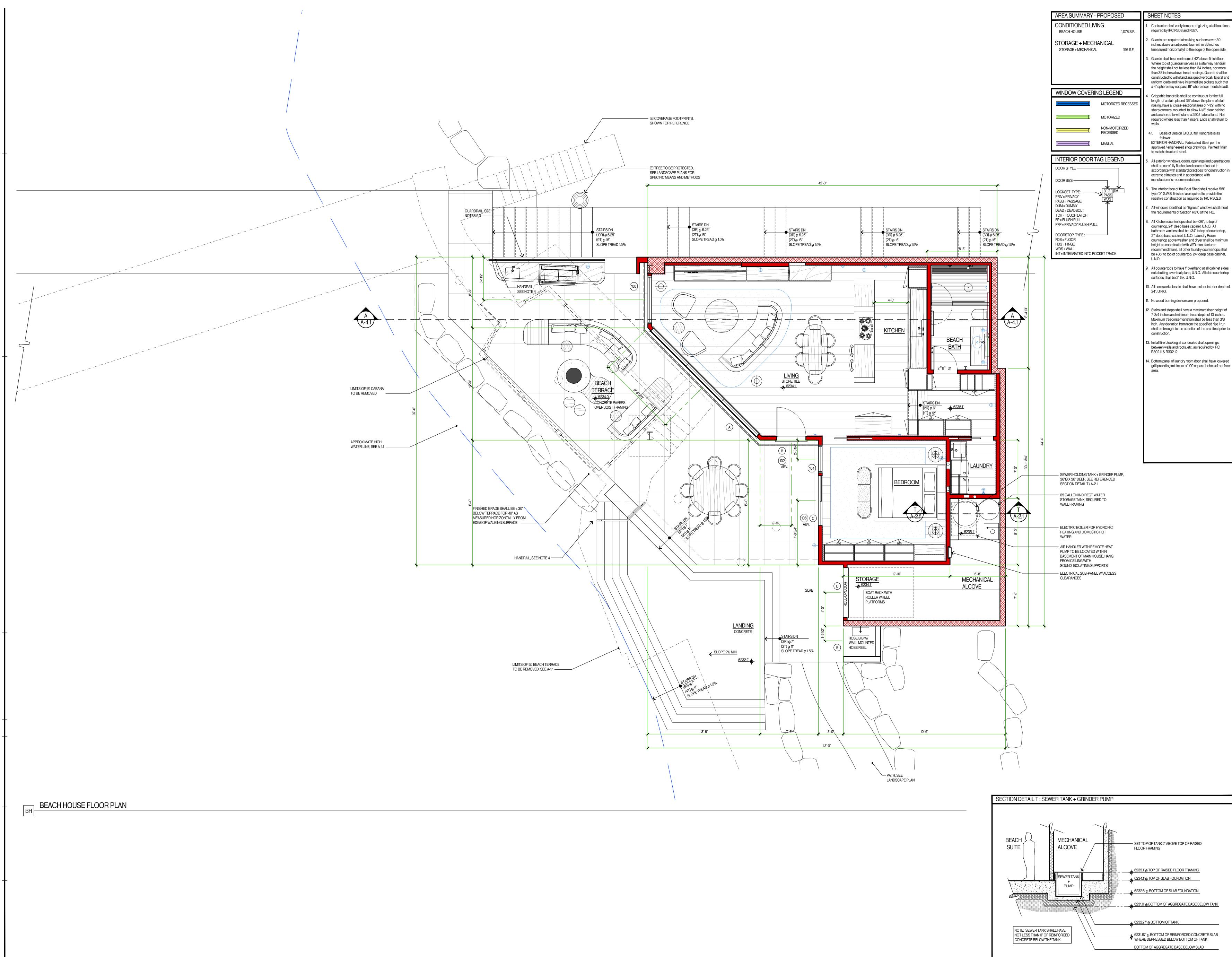
SHEET	NOTES
** SEE A-2.	1 FOR ALL FLOOR PLAN SHEET NOTES **
INTERIO	OR DOOR TAG LEGEND
DOOR STY	
DOOR SIZE	
LOCKSET PRIV = PRIV PASS = PAS DUM = DUM DEAD = DE TCH = TOU FP = FLUSH PFP = PRIV	ACY PASS SSAGE MMY ADBOLT CH LATCH
DOORSTO FDS = FLOO HDS = HINO WDS = WAI INT = INTEC	OR GE
AREA S	UMMARY - PROPOSED
UPPER CONDI UNCON GARAG MECHA	-
THE SI	ERRA STAR -
	NCE SCHEDULE
I.D.	ITEM
AP - 1	REFRIGERATOR / FREEZER
AP - 2	RANGE
AP - 3	RANGE HOOD
AP - 4	GARBAGE DISPOSAL
AP - 5	DISHWASHER
AP - 6	MICROWAVE
AP - 7	WASHER
AP - 8	DRYER
AP - 9	DOUBLE OVEN
AP - 10	REFRIDGERATOR / FREEZER
AP - 11	ICE MAKER
AP - 12	U.C. BEVERAGE CENTER
AP - 13	OUTDOOR GRILL

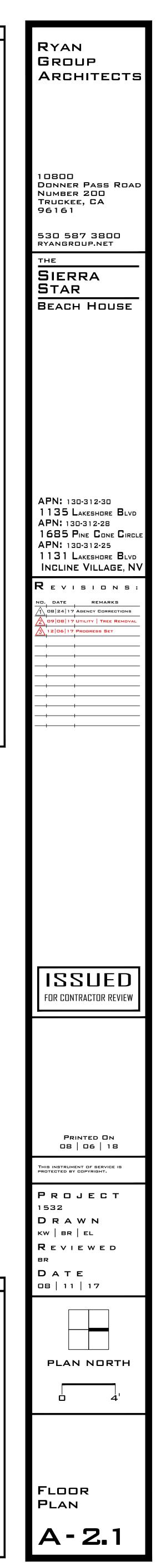












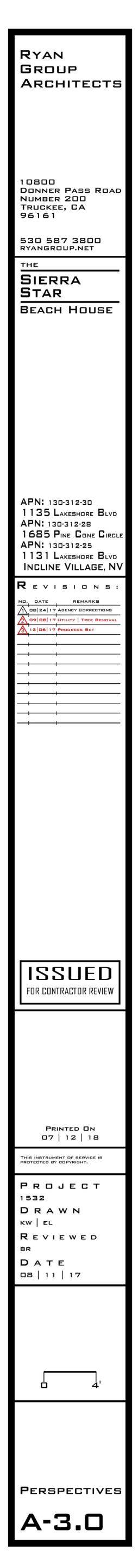




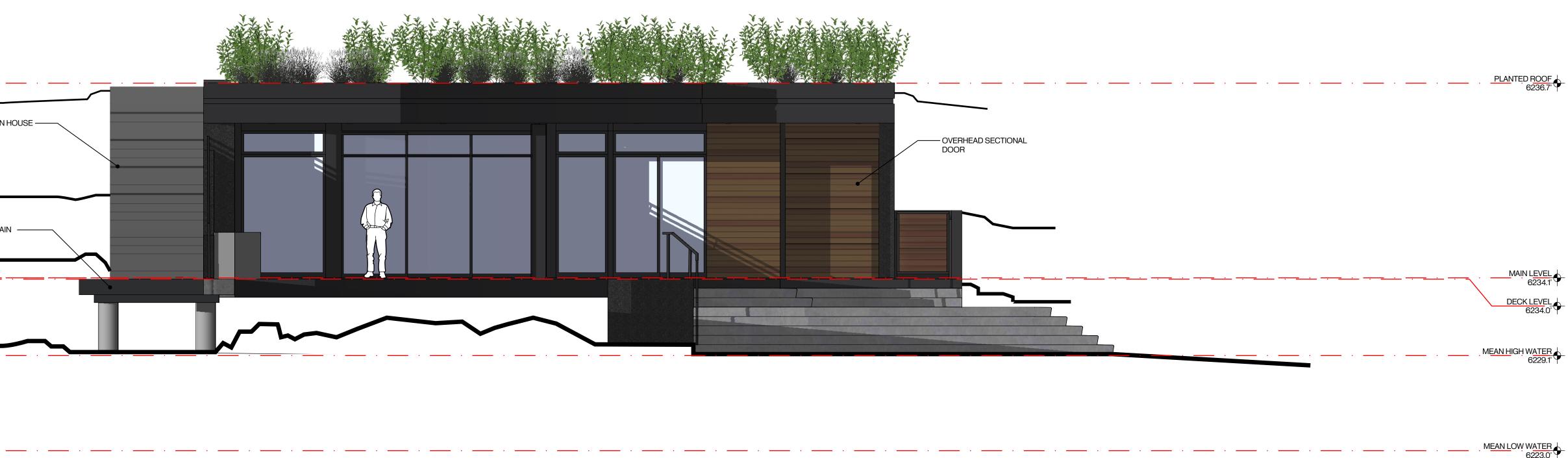
B PERSPECTIVE BEACH HOUSE

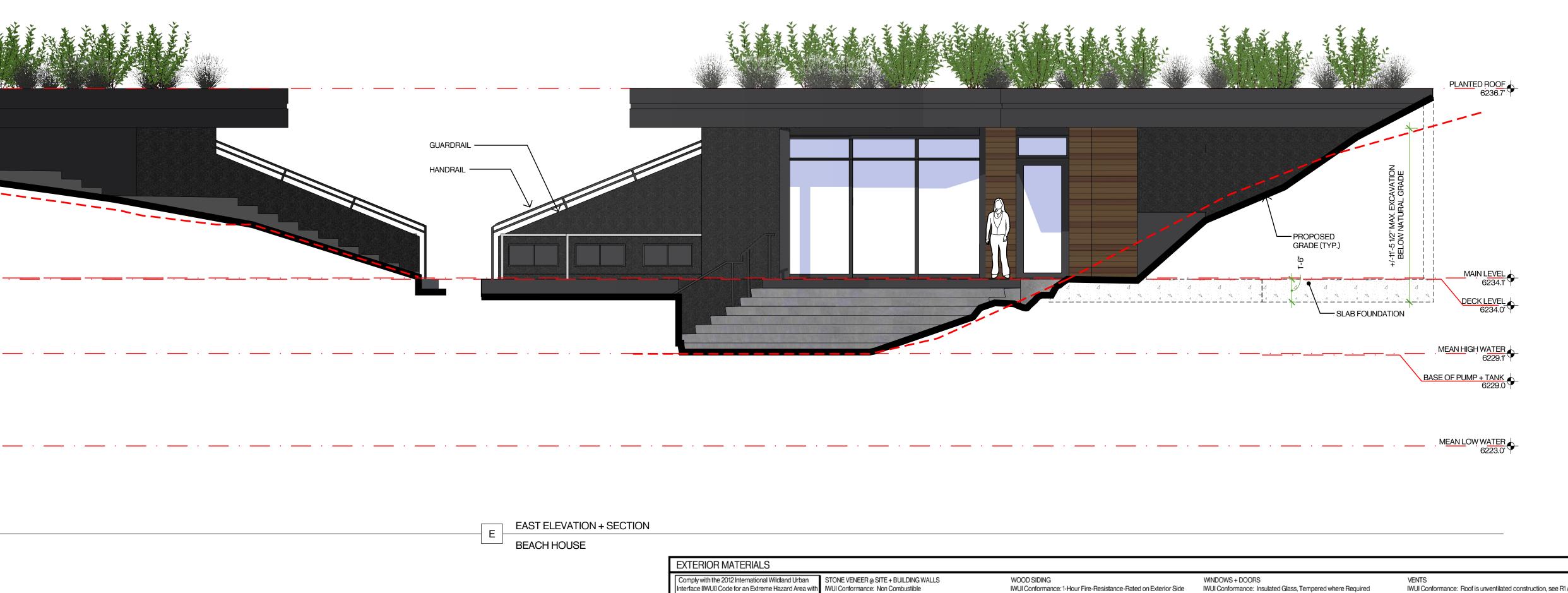


D PERSPTECTIVE BEACH HOUSE



<u>PLANTED ROOF</u> 6246.7'		· · · ·		· S
				(E)
MEAN HIGH WATER				
1 6229.1				
MEAN LOW WATER		· · · ·	· · _	
SOUTH ELEVATIONSE	NC			
PLANTED ROOF 6246.7				
PLANTED ROOF 6246.7		PROPOSED CRADE (TVP)		
PLANTED ROOF 6246.7		PROPOSED GRADE (TYP.)		
► PLANTED ROOF 6246.7'		PROPOSED GRADE (TYP.)		
MAIN LEVEL 6234.1		PROPOSED GRADE (TYP)		
		PROPOSED GRADE (TYP)		
		PROPOSED GRADE (TYP)		





Conforming Defensible Space, Conforming Water Material: Granite, Mesabi Black Material: 1x6 Thermally Modified Ash by Thermory, OAE. Material / Color: Aluminum, Thermally Improved Frame / Black
 Supply, Fire Suppression, and Ignition-Resistant
 Finish:
 Diamond #8

 Construction class "IR 1" as follows:
 Pattern:
 Stacked Bond
Press and Click Fasteners, Clear / Straight Grain. Glazing: Insulated with Low-E coatings. All Lakeward glazing shall be 1-Hour Assembly: Install over one layer of 5/8" Type X Exterior Gypsum Anti-Reflective, 3% Maximum Reflectance, Schott Amiran, Pattern: Stacked Bond Sheathing, tightly butted or taped and mudded. Pilkington Optiview, OAE. Provide Tempered glass at designed to resist ember / flame intrusion. Hazardous Locations per IRC R308. CONCRETE FOUNDATION WALLS + STEPS TO BEACH STRUCTURAL MEMBERS (BEAMS / POSTS) - STEEL Finish: UV Protectant Oil, Walnut Hue IWUI Conformance: Non Combustible IWUI Conformance: Heavy Gauge Steel Doors shall be of an approved non-combustible construction; or solid core and min. 1-3/4" thick; or 20 minute rated / labeled. Glazing within doors WOOD SOFFITS @ ROOF OVERHANGS Material: Concrete, Panel Formed, 3/4" chamfers at Material: Steel, Wide Flange, HSS and as determined by SE IWUI Conformance: 1-Hour Fire-Resistance-Rated construction on shall be insulated glass, tempered. exposed vertical corners. Finish: (2) Coats DTM Paint over grey factory primer Finish: Concrete Stain + (2) coats Cementone, Clear Color: Match Windows + Doors exposed underside. EPDM ROOFING O/ CONCRETE ROOF DECK- EARTH COVERED Material: 1x4 Thermally Modified Ash by Thermory, OAE. Matte Sealer Press and Click Fasteners, Clear / Straight Grain. IWUI Conformance: Class A Assembly STRUCTURAL MEMBERS (BEAMS / POSTS) - WOOD 1-Hour Assembly: Install over one layer of 5/8" Type X Exterior Gypsum Material: EPDM Roofing, 90-Mil, Firestone Rubber-Gard EPDM Platinum, STAIR TREADS TO MAIN HOUSE IWUI Conformance: Heavy Timber, 4x or greater Material: P.T. and as determined by SE, w/ fasteners as required Finish: (2) Coats Solid Body Stain Sheathing, tightly butted or taped and mudded. OAE, installed per manufacturer recommendations. Install below Earth-Covered and Landscaped Roofing Assembly IWUI Conformance: Non Combustible Material: Basalt, Pietra Lavica Finish: (2) Coats Solid Body Stain Finish / Pattern: Honed / Stacked Bond Color: Match Windows + Doors FASCIA TERRACE PAVERS O/ P.T. FRAMING IWUI Conformance: Minimum 2x nominal lumber, clad with min. 26 ga. metal Fascia: Painted Steel Cladding covering Engineer's Fascia Color: Match Metal Roofing Material: Concrete Dekstone by Stepstone, O.A.E. Finish / Pattern: #1404 French Grey, Clear Matte Sealer, Nominal 2' x 4' x 2" EXTERIOR ELEVATION SHEET NOTES All exterior materials or assemblies comply with 2012 IWUI codes and the requirements of the North Lake Tahoe Fire Protection District. An on-site mock-up of all exterior materials must occur for Architect and Owner approval prior to the ordering of materials.

All Exposed Mechanical and Plumbing venting locations shall be approved by Architect and Owner prior to installation and painted a color that compliments the surrounding material [Roof / Siding]

