

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		Staff Assigned Case No.: <u>WSTR-000 535 APP 2021</u>	
Project Name: <u>563 SILVERTIP DRIVE</u>			
Project Description: <u>TIER 2 APPLICATION for OCCUPANCY</u>			
Project Address: <u>563 SILVERTIP DRIVE, INCLINE VILLAGE, NV 89451</u>			
Project Area (acres or square feet): <u>6222</u>			
Project Location (with point of reference to major cross streets AND area locator): <u>X STREET PONDEROSA CLOSE TO 2ND CREEK</u>			
Assessor's Parcel No.(s):	Parcel Acreage:	Assessor's Parcel No.(s):	Parcel Acreage:
<u>122-126-62</u>	<u>.40</u>		
Indicate any previous Washoe County approvals associated with this application: Case No.(s).			
Applicant Information (attach additional sheets if necessary)			
Property Owner: <u>PRIMARY RESIDENCE</u>		Professional Consultant:	
Name: <u>LAURA LEVINE</u>		Name: <u>GOLDFISH PROPERTIES</u>	
Address: <u>" SAME</u>		Address:	
Zip:		Zip:	
Phone: <u>4153021086</u> Fax:		Phone: <u>775.690.3909</u> Fax:	
Email: <u>lauralevine17@yahoo.com</u>		Email:	
Cell: <u>415</u> Other:		Cell: <u>775690 3909</u> Other:	
Contact Person: <u>LAURA LEVINE KAUSCH</u>		Contact Person: <u>BOYD GOLDEN</u>	
Applicant/Developer:		Other Persons to be Contacted:	
Name:		Name:	
Address:		Address:	
Zip:		Zip:	
Phone: Fax:		Phone: Fax:	
Email:		Email:	
Cell: Other:		Cell: Other:	
Contact Person:		Contact Person:	
For Office Use Only			
Date Received:	Initial:	Planning Area:	
County Commission District:		Master Plan Designation(s):	
CAB(s):		Regulatory Zoning(s):	

Property Owner Affidavit

Applicant Name: LAURA LEVINE

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)
)
COUNTY OF WASHOE)

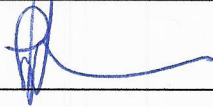
I, LAURA LEVINE
(please print name)

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): 122-126-02

Printed Name LAURA LEVINE

Signed 

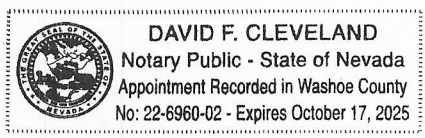
Address 563 SILVERTIP DRIVE
INCLINE VILLAGE, NV 89451

Subscribed and sworn to before me this 8th day of June, 2022.

(Notary Stamp)

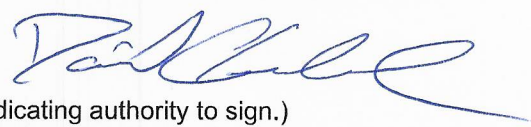
Washoe County, Nevada
Notary Public in and for said county and state

My commission expires: October 17, 2025



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

- Owner
- Corporate Officer/Partner (Provide copy of record document indicating authority to sign.)
- Power 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



**Administrative Review Permit Application
for a Short Term Rental
Supplemental Information**

(All required information may be separately attached)

1. What is the square footage of habitable area of the proposed short term rental (exclude the bathrooms, hallways, garage, etc)?

3432.5 MEASUREMENTS
OF ELIGIBLE AREAS

2. How many off-street parking spaces are available? Parking spaces must be shown on site plan. Are any new roadway, driveway, or access improvements be required?.

NO IMPROVEMENTS REQUIRED - 7-8 SPACES + GARAGE

3. How are you planning to integrate the main dwelling and secondary dwelling to provide architectural compatibility of the two structures?

N/A

5. How many off-street parking spaces are available? Parking spaces must be shown on site plan. Are any new roadway, driveway, or access improvements be required?

SEE #2

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

NO DEVELOPMENT NECESSARY - EXISTING HOME

7. Is the subject property part of an active Home Owners Association (HOA) or Architectural Control Committee?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If yes, please list the HOA name.
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8. Are there any restrictive covenants, recorded conditions, or deed restrictions (CC&Rs) that may prohibit a short term rental on your property?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If yes, please attach a copy.
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