

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



Community Services Department
Planning and Building
1001 E. Ninth St., Bldg. A
Reno, NV 89512-2845

Telephone: 775.328.6100

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.: _____ | |
| Project Name: Nelson DADU with Garage | | | |
| Project Description: Approx. 533 sq. ft. detached accessory dwelling unit with approx. 1800 sq. ft. 3-car garage with RV bay. | | | |
| Project Address: 9350 Spearhead Way, Golden Valley | | | |
| Project Area (acres or square feet): 2.097 acres | | | |
| Project Location (with point of reference to major cross streets AND area locator): Southeast corner of Spearhead Way & Running Bear Dr., North of Golden Valley Rd. Area locator GBAF | | | |
| Assessor's Parcel No.(s): | Parcel Acreage: | Assessor's Parcel No.(s): | Parcel Acreage: |
| 552-040-59 | 2.097 | | |
| Indicate any previous Washoe County approvals associated with this application: Case No.(s). | | | |
| Applicant Information (attach additional sheets if necessary) | | | |
| Property Owner: | | Professional Consultant: | |
| Name: Nelson Living Trust | | Name: M. Steven Hendricks - Nevada Home Design | |
| Address: 9350 Spearhead Way | | Address: PO Box 19108 | |
| Golden Valley | Zip: 89506 | Reno | Zip: 89511 |
| Phone: 775-233-4124 | Fax: | Phone: 775-219-6393 | Fax: |
| Email: erdocdo@yahoo.com | | Email: nevadahomedesign@gmail.com | |
| Cell: | Other: | Cell: | Other: |
| Contact Person: Lisa Nelson | | Contact Person: Steve Hendricks | |
| Applicant/Developer: | | Other Persons to be Contacted: | |
| Name: | | Name: | |
| Address: | | Address: | |
| Reno | 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: Nelson Living Trust

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, Gail I. Nelson
(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): 552-040-59

Printed Name Gai I. Nelson, Trustee

Signed Gail Nelson

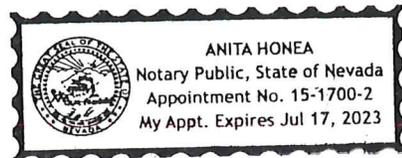
Address 9350 Spearhead Way
Reno, NV 89506

Subscribed and sworn to before me this
7 day of September, 2021.

(Notary Stamp)

[Signature] Washoe, Nevada
Notary Public in and for said county and state

My commission expires: July 17, 2023



*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 Detached Accessory Dwelling
Supplemental Information**

(All required information may be separately attached)

1. What is the size (square footage) of the main dwelling or proposed main dwelling (exclude size of garage)?

1724

2. What is the size of the proposed detached accessory dwelling (exclude size of garage)? If a manufactured or modular home is the secondary dwelling, list the age and size of the unit.

533

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

Same roof pitch, same exterior finishes, same roof style

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?

2 at existing residence, 6 at new structure plus RV space, new asphalt driveway extension to new structure

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?

Any new lighting will have shielded lamps, disturbed areas will be re-vegetated,

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

Yes No If yes, please list the HOA name.

8. 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.

9. Only one accessory dwelling unit, whether attached or detached, is allowed per parcel. Is there a guest apartment, mother-in-law unit, next-gen addition with kitchen or any other type of secondary dwelling on the subject property?

Yes No If yes, please provide information on the secondary unit.

10. List who the service providers are for the main dwelling and accessory dwelling:

| | Main Dwelling | Accessory Dwelling |
|------------------------------|------------------|-----------------------------|
| Sewer Service | Septic | New septic |
| Electrical Service | NV Energy | NV Energy |
| Solid Waste Disposal Service | Waste management | Waste management |
| Water Service | Well | extended from existing well |

ACCEPTANCE OF CONDITIONS AND APPROVAL FOR DOMESTIC WATER WELL USE FOR AN ACCESSORY DWELLING

Physical Address of Domestic Well Parcel:

9350 Spearhead Way, Golden Valley, 89506

Located in the County of: Washoe

County Assessor Parcel Number: 552-040-59

I, Gail I. Nelson, the owner of the above-referenced parcel of land, fully understand and accept the conditions listed below and upon which this approval is made.

1. The combined water use from the well for the main residence and any accessory dwelling shall not exceed two (2) acre-feet per year as provided in Chapter 534.180 of the Nevada Revised Statutes (NRS).
2. A totalizing meter shall be installed near the discharge of the well that provides water to the main residence and the accessory dwelling. The State of Nevada, not Washoe County, is the responsible party in determining meter type and placement. The State's phone number is 775-684-2800. This meter shall be easily accessible for meter reading by the Nevada State Engineer staff and maintained in good working order and shall be installed to measure all water pumped from the well for the purposes of this approval. No water shall be used by the accessory dwelling until the meter has been installed.
3. The main residence and any accessory dwelling shall remain on the same parcel as determined by the County Assessors' records, or this authorization shall be rescinded.
4. Water usage measurements from the totalizing meter must be submitted by the parcel owner to Nevada State Engineer no later than January 31st of each calendar year.
5. The "Acceptance of Conditions and Approval for Domestic Water Well Use for an Accessory Dwelling" form (available from the State of Nevada Division of Water Resources website) regarding accessory dwellings shall be completed and returned to WCDWR for approval, and WCDWR will send the request to the Nevada State Engineer. The Nevada Division of Water Resources will determine the final agreement with the owner of the property.

Subscribed and sworn to before me this 7 day

of September, 20 21



Signature of Notary Public Required

Signed



Permittee or Agent

Address

9350 Spearhead Way

Street Address or PO Box

Reno, NV 89506

City, State, ZIP Code

Notary Public in and for the County of Washoe

Phone

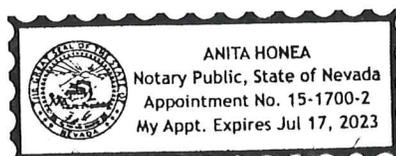
(775) 233-4124

State of Nevada

E-mail

erdocdo@yahoo.com

My commission expires July 17, 2023



Notary Stamp or Seal Required

Approval of Local Governing Body or Planning Commission

This request to allow an accessory building to be served by a domestic well is hereby approved subject to the notarized agreement on the reverse side of this form.

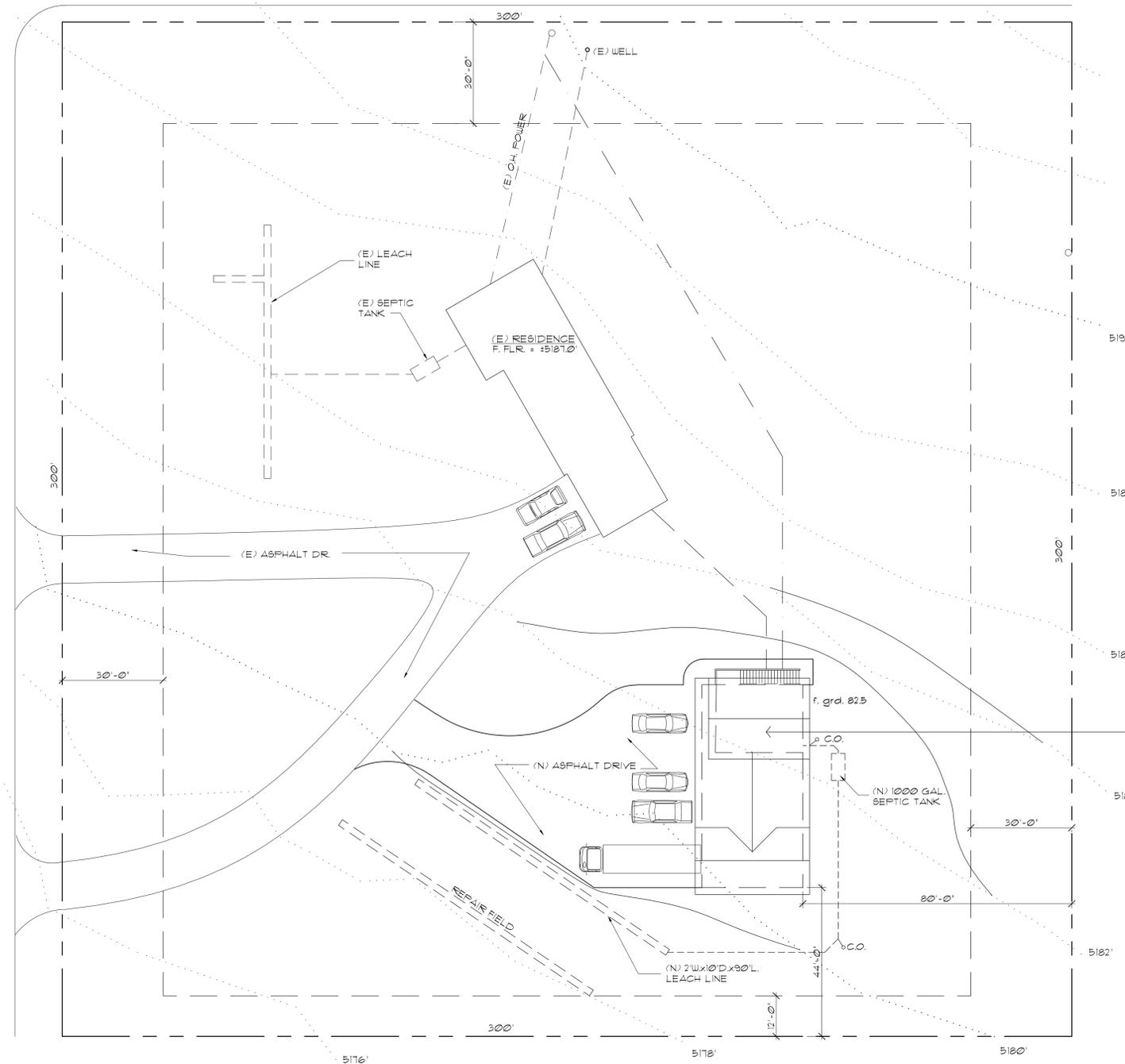
Signature _____
Print Name _____
Title _____
Agency _____
Date _____
Phone Number _____

After approval, please send original to:

**State Engineer
Nevada Division of Water Resources
901 South Stewart Street
Suite 2002
Carson City, NV 89701**

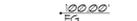
SPEARHEAD WAY

RUNNING BEAR DR.



SITE / ROOF PLAN NORTH 
 SCALE: 1" = 20'-0"
 A.P.N. 552-040-59

SITE LEGEND

-  EXISTING CONTOURS
-  FINISH CONTOURS
-  FINISH GRADES
-  SETBACK LINES
-  EASEMENT LINES
-  DRAINAGE SLOPE - 5% MIN.

LIST OF DRAWINGS

| | |
|-----|-----------------------------|
| A-1 | SITE PLAN, DRAWING LIST |
| A-2 | (E) FLOOR PLAN - ELEVATIONS |
| A-3 | (N) FLOOR PLAN |
| A-4 | (N) EXTERIOR ELEVATIONS |

| | |
|-----------|--|
| REVISIONS | |
| | |

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Nevada Home Design L.L.C.
 Residential Designs
 www.nevadahomedesign.com
 (775) 219-6393
 nevadahomedesign@gmail.com
 P.O. Box 19708
 Reno, NV 89511



DATE: 9-8-2021
 JOB NO.: 21-140
 PROJECT LOCATION:
 9350 SPEARHEAD WAY
 WASHOE COUNTY, NV.

SITE / ROOF PLAN
DETACHED ACCESSORY DWELLING for
NELSON LIVING TRUST



(E) NORTH ELEVATION
NOT TO SCALE



(E) EAST ELEVATION
NOT TO SCALE



(E) RESIDENCE FLOOR PLAN NORTH
SCALE: 1/4" = 1'-0"
(E) LIVING AREA ±2,208 SQ. FT.



(E) WEST ELEVATION
NOT TO SCALE



(E) SOUTH ELEVATION
NOT TO SCALE

REVISIONS

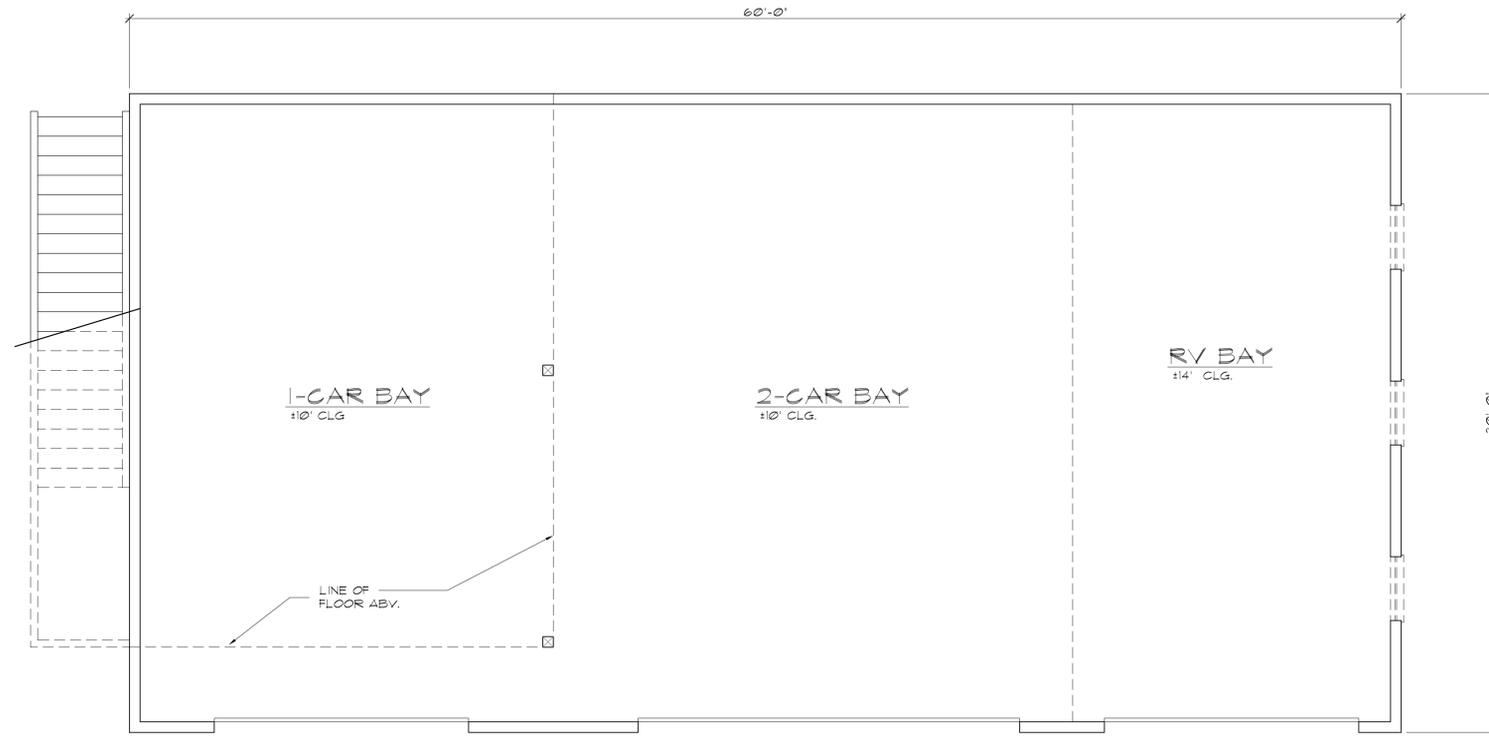
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(775) 219-6393
nevadahomedesign@gmail.com
P.O. Box 19708
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www.nevadahomedesign.com



(E) FLOOR PLAN & ELEVATIONS
DETACHED ACCESSORY DWELLING for
NELSON LIVING TRUST

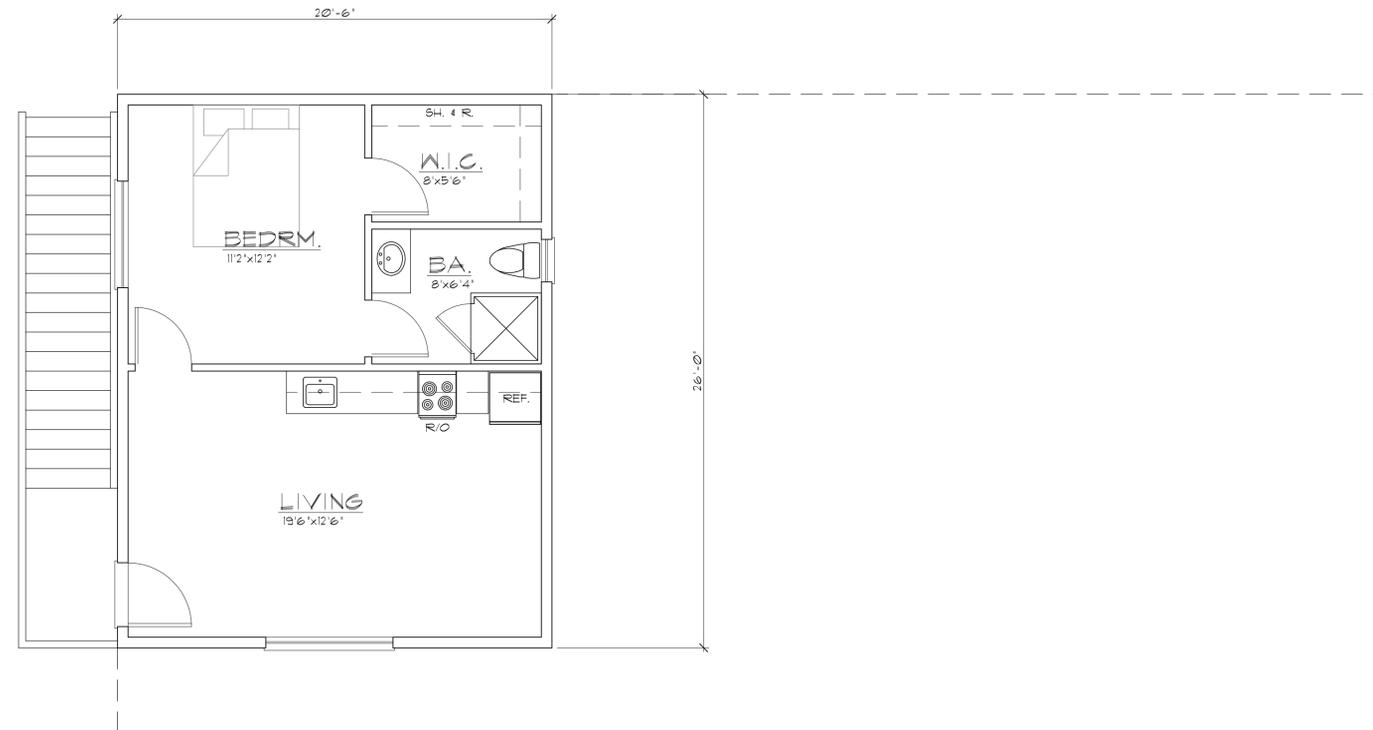
DATE: 9-8-2021
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9350 SFEARHEAD WAY
WASHOE COUNTY, NV.



MAIN FLOOR PLAN NORTH

SCALE: 1/4" = 1'-0"

GARAGE AREA ±1800 SQ. FT.



UPPER FLOOR PLAN NORTH

SCALE: 1/4" = 1'-0"

LIVING AREA ±533 SQ. FT.
APPROX 24% OF (E) LIVING AREA

| | |
|-----------|--|
| REVISIONS | |
| | |
| | |

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(775) 219-6393
nevadahomedesign@gmail.com
P.O. Box 19708
Reno, NV 89511

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9-8-2021

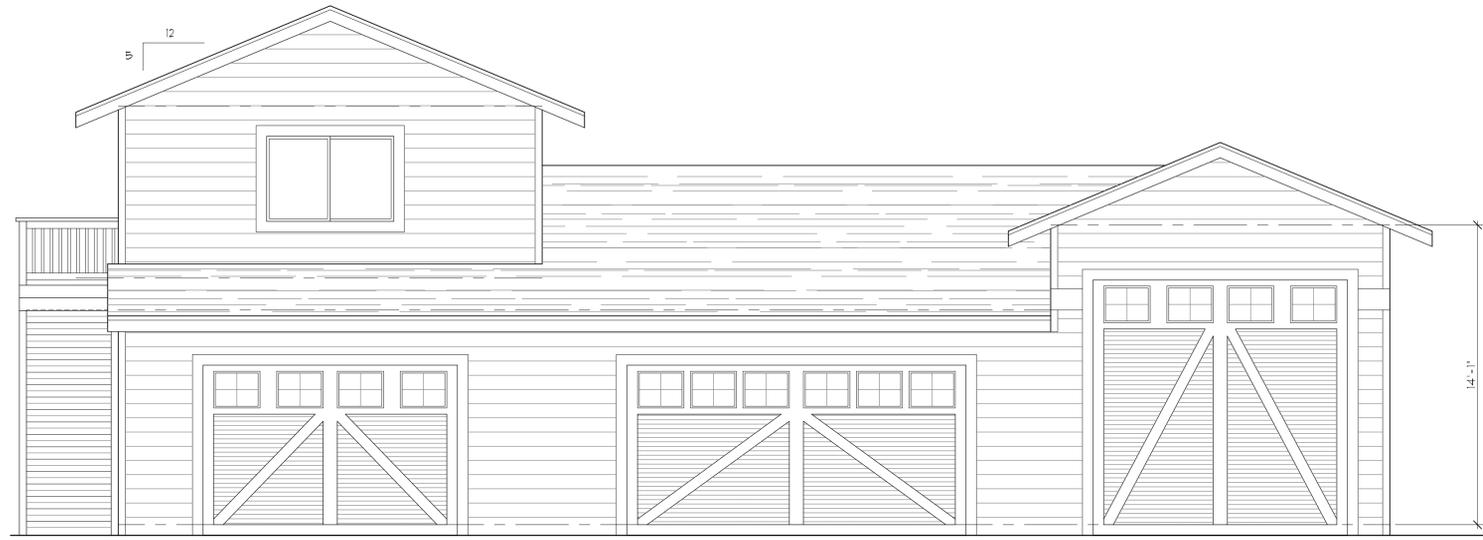


(N) FLOOR PLANS
DETACHED ACCESSORY DWELLING for
NELSON LIVING TRUST

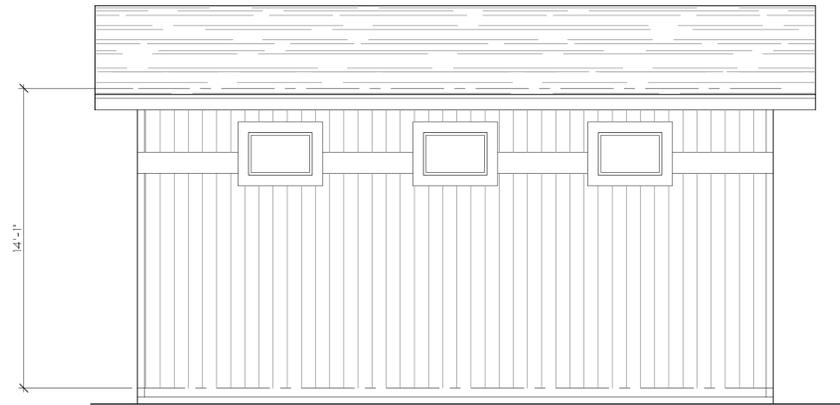
DATE: 9-8-2021
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SHEET NUMBER

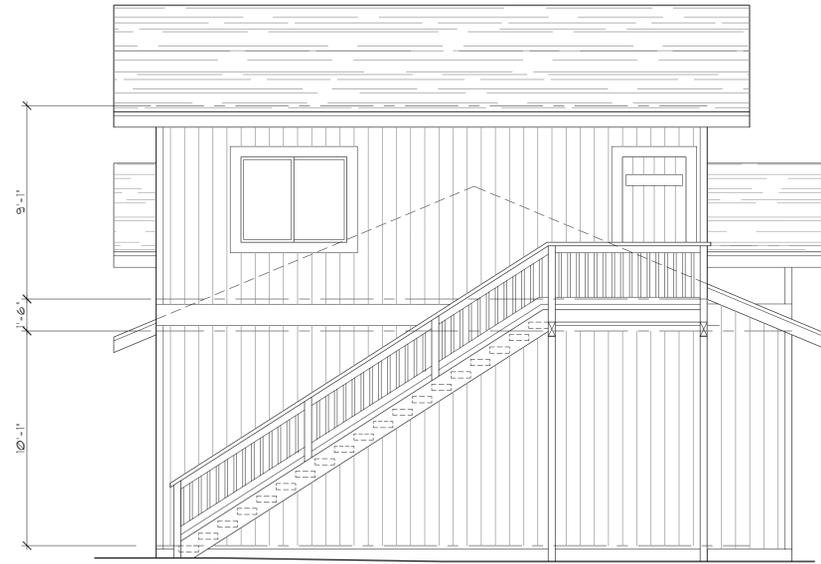




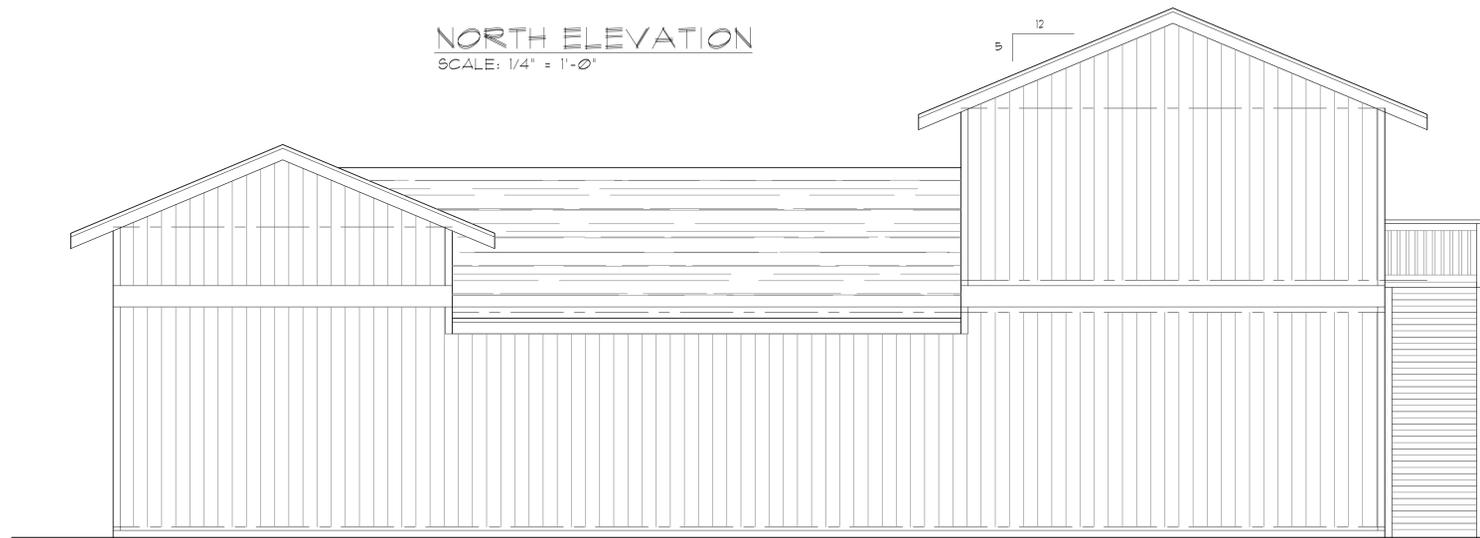
WEST ELEVATION
SCALE: 1/4" = 1'-0"



SOUTH ELEVATION
SCALE: 1/4" = 1'-0"



NORTH ELEVATION
SCALE: 1/4" = 1'-0"



EAST ELEVATION
SCALE: 1/4" = 1'-0"

EXTERIOR FINISHES

- 1 ASPHALT SHINGLES:
MATCH (E) STYLE
COLOR: MATCH (E)
- 2 LAP SIDING & TRIM:
MATCH (E) STYLE
COLOR: MATCH (E)
- 3 WOOD FASCIA, STAIRS & RAILING:
'SHERWIN WILLIAMS' FLAT ACRYLIC PAINT
COLOR: MATCH (E)
- 4 O.H. GARAGE DOORS:
INSUL. STEEL CARRIAGE STYLE
COLOR: PAINT TO MATCH SIDING
- 5 ENTRY DOOR:
WOOD PLANK STYLE
COLOR: NATURAL WOOD TONE
- 6 WINDOWS:
'AMSCO' VXi SERIES VINYL
COLOR: MATCH (E)
- 7 GARAGE MAN DOOR:
6 PANEL INSULATED STEEL
COLOR: PAINT TO MATCH SIDING
- 8 VENTS, FLASHING & FLUES:
COLOR: PAINT TO MATCH ROOF

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EXTERIOR ELEVATIONS
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SHEET NUMBER
A-4