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		taff Assigned Case No.:			
Project Name: 863 Jennifer St STR 10+ Application					
Project Description:					
Project Address: 863 Jennifer Street, Incline Village, NV 89451					
Project Area (acres or square feet):					
Project Location (with point of reference to major cross streets AND area locator):					
Assessor's Parcel No.(s):	Parcel Acreage:	Assessor's Parcel No.(s):	Parcel Acreage:		
12524107					
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: Robert Philkill		Name: Robert Philkill			
Address: 190 Nadina Way		Address: 190 Nadina Way			
Kentfield, CA	Zip: 94904	Kentfield, CA	Zip: 94904		
Phone: 415-336-1011	Fax:	Phone: 415-336-1011	Fax:		
Email: robertphilkill@yahoo.com		Email: robertphilkill@yahoo.com			
Cell: 415-336-1011	Other:	Cell: 415-336-1011	Other:		
Contact Person: Susan Philkill		Contact Person: Susan Philkill			
Applicant/Developer:		Other Persons to be Contacted:			
Name: Robert Philkill		Name: Robert Philkill			
Address: 190 Nadina Way		Address: 190 Nadina Way			
Kentfield, CA	Zip: 94904	Kentfield, CA	Zip: 94904		
Phone: 415-336-1011	Fax:	Phone: 415-336-1011	Fax:		
Email: robertphilkill@yahoo.com		Email: robertphilkill@yahoo.co	om		
Cell: 415-336-1011	Other:	Cell: 415-336-1011	Other:		
Contact Person: Susan Philkill		Contact Person: Susan Philkill			
For Office 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 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)?				
	approximately 3,000				
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?.				
	4				
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?				
	4				
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?				
	N/A				
7.	7. Is the subject property part of an active Home Owners Association (HOA) or Architectural Co Committee?				
	☐ Yes ☐ No If yes, please list the HOA name.				
 Are there any restrictive covenants, recorded conditions, or deed restrictions (CC&Rs) the prohibit a short term rental on your property? 					
	☐ Yes ☐ No If yes, please attach a copy.				

Property Owner Affidavit

Applicant Name: Robert Philkill				
requirements of the Washoe County Developm	abmittal does not guarantee the application complies with all nent Code, the Washoe County Master Plan or the applicable or that the application is deemed complete and will be			
STATE OF NEVADA) COUNTY OF WASHOE)				
1, Robert Phillip				
being duly sworn, depose and say that I an application as listed below and that the fore information herewith submitted are in all respendent belief. I understand that no assurance or g	ease print name) In the owner* of the property or properties involved in this egoing statements and answers herein contained and the ects complete, true, and correct to the best of my knowledge uarantee can be given by members of Planning and Building. If by each property owner named in the title report.)			
Assessor Parcel Number(s):				
	Printed Name Robert Philkill Signed All All Signed			
Subscribed and sworn to before me t	Address 863 Jennifust Indine Village Neveda 89451 (Notary Stamp)			
Notary Public in and for said county and state My commission expires:	Notary Certificate			
*Owner refers to the following: (Please mark	appropriate box.)			
☐ Owner				
☐ Corporate Officer/Partner (Provide co	py of record document indicating authority to sign.)			
☐ Power of Attorney (Provide copy of Po	☐ Power of Attorney (Provide copy of Power of Attorney.)			
Owner Agent (Provide notarized letter	Owner Agent (Provide notarized letter from property owner giving legal authority to agent.)			
☐ Property Agent (Provide copy of recor	,			
☐ Letter from Government Agency with	Stewardship			

CALIFORNIA JURAT

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 Marin			
Subscribed and sworn to (or affirmed) before me on this Date day of One, 2021 by Robert Philkill	-		
Name of Signers	-		
proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.			
Signature of Notary Public TRAYIS MATTHEW LOMBARDI Notary Public - California Marin County Commission # 2336144 My Comm. Expires Oct 20, 2024			
Seal			
Place Notary Seal Above	Place Notary Seal Above		
· OPTIONAL	rd.		
Though this section is optional, completing this information can deter alteration of the document or fraudylen attachment of this form to an unintended document.	ıt		
Description of Attached Document Title or Type of Document: 1000000 Owner Affidavit Document Date: N/A			
Number of Pages:			
Signer(s) Other Than Named Above: ///			

Record WSTRAR22-0010: Short Term Rentals Administrative Review

Record Info ▼

Payments <

Custom Component

Work Location

863 JENNIFER ST, INCLINE VILLAGE, NV 89451

Record Details

Project Description:

Katy Stark

Owner:

PHILKILL LIVING TRUST, ROBERT 190 NADINA WAY KENTFIELD CA 94904

- ▼More Details
 - **Related Contacts**
 - Application Information GENERAL INFORMATION

STR Application Number:

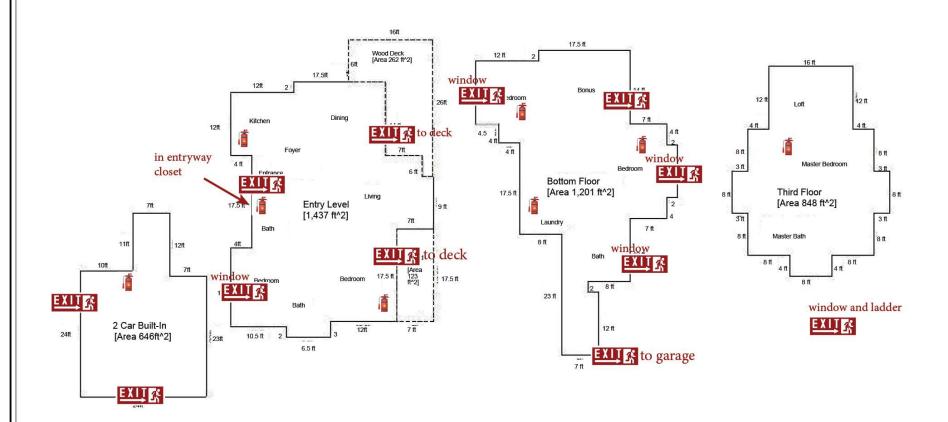
Verified STR Occupancy:

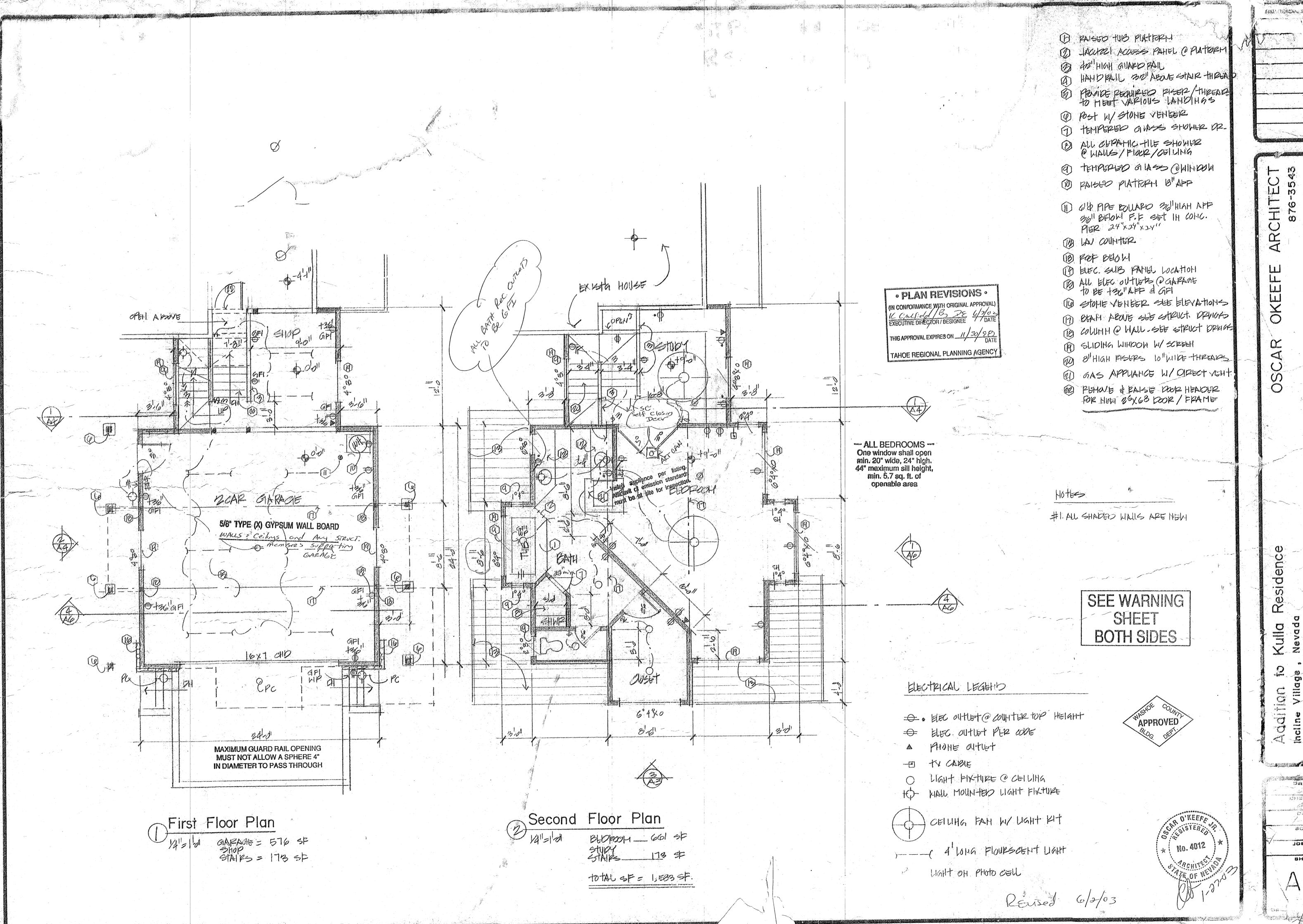
■ Parcel Information

WSTR21-0141

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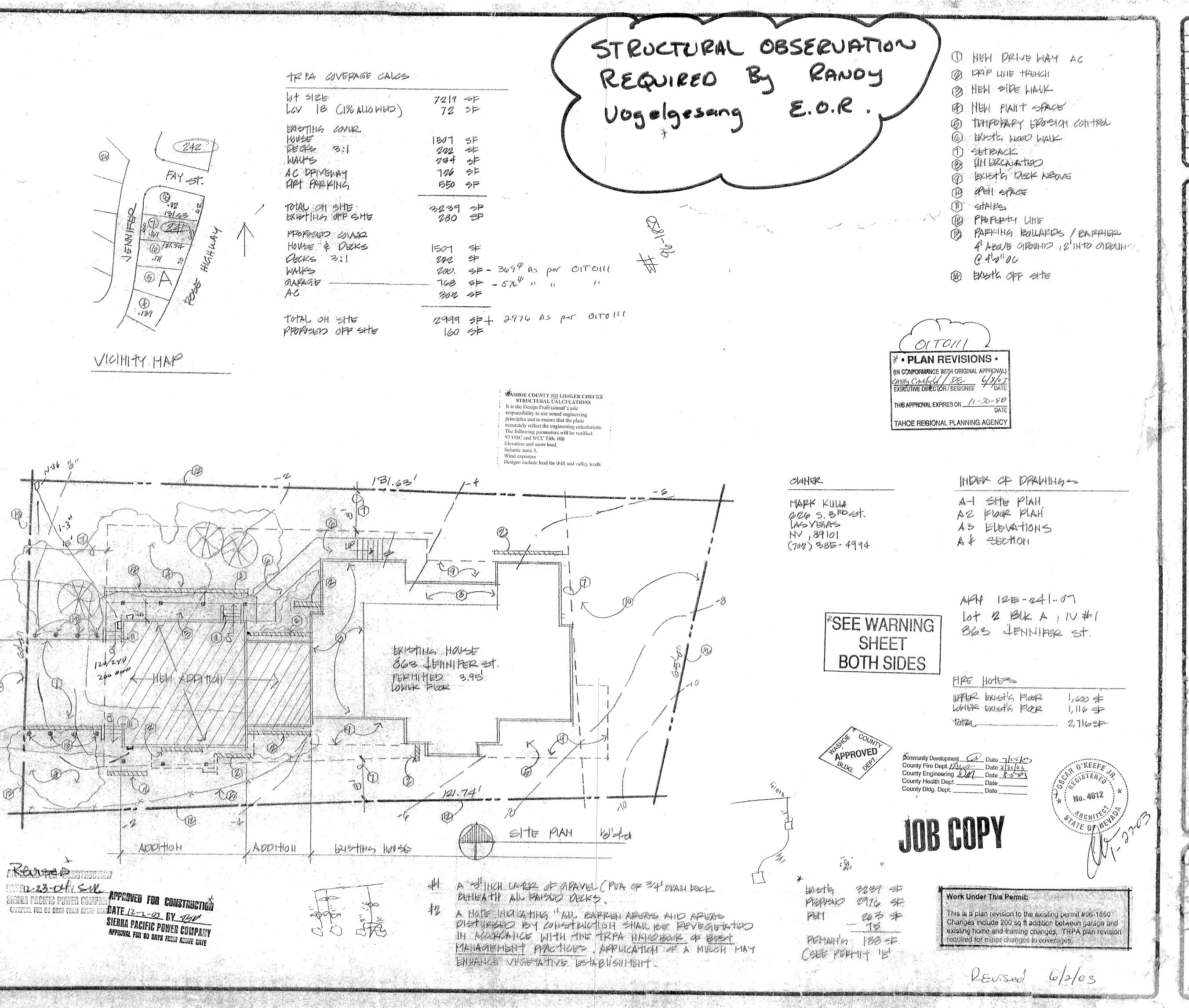






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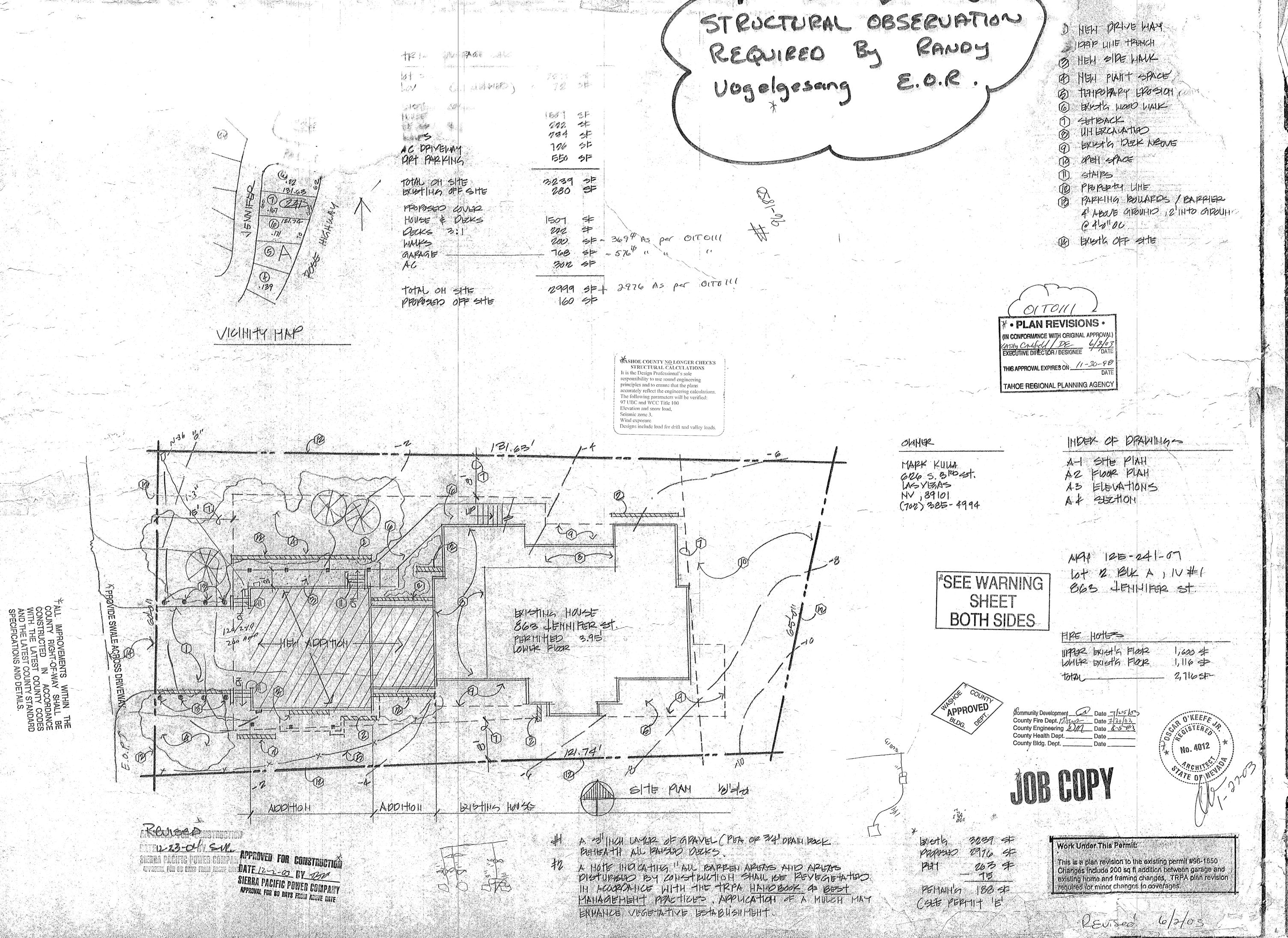
Port Scale JOB NO.



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MENTAN

Addition to Kulla Residence notine Village, Nevada



SCAR OKEEFE ARCHITECT

Addition to Kulla Residence Indine Village, Nevada

CHECKED CHECKED

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