## 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

## **Washoe County Development Application**

Your entire application is a public record. If you have a concern about releasing personal information, please contact Planning and Development staff at 775.328.3600.

Project Information	:	Staff Assigned Case No.:				
Project Name: Rob & Sharon Oeschger						
Project The project consist	s of a new building for	an approximately 3,400 sq. ft. ga with a conventional concrete foun	rage/shop and new dation and engineered			
Project Address: 3560 Lunsford	Ct., Reno NV 89511					
Project Area (acres or square fe	et): 2.88 ACRES					
Project Location (with point of re	eference to major cross	s streets AND area locator):				
Lunsford & Lake						
Assessor's Parcel No.(s):	Parcel Acreage:	Assessor's Parcel No.(s):	Parcel Acreage:			
041-092-12	2.88					
		NORTH, RANGE 20 EAST, M.D.M				
Indicate any previous Washe Case No.(s).	be County approval	s associated with this applica	ition:			
Applicant Inf	ormation (attach	additional sheets if neces	sary)			
Property Owner:		Professional Consultant:				
Name: Rob & Sharon Oeschger		Name: CWX Architects, Inc.				
Address: 3560 Lunsford Ct., Re	no Nevada	Address: 1680 Montclair Ave. Ste A				
	Zip: 89511		Zip: 89511			
Phone: 775-527-3165	Fax:	Phone: 775-829-7747 Fax:				
Email: roboeschger@gmail.com		Email: mike@cwxarchitects.com				
Cell: N/A Other:		Cell: N/A Other:				
Contact Person: Rob Oeschger Contact Person: Mike Farley						
Applicant/Developer:		Other Persons to be Contacted:				
Name: Rob & Sharon Oeschger		Name:				
Address: 3560 Lunsford Ct., Rer	no Nevada	Address:				
	Zip: 89511		Zip:			
Phone: 775-527-3165	Fax:	Phone:	Fax:			
Email: roboeschger@gmail.com		Email:				
Cell: N/A	Other:	Cell:	Other:			
Contact Person: Rob Oeschger		Contact Person:				
	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 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)?

4220 sq. ft.

2. What is the size of the detached accessory dwelling unit or proposed detached accessory dwelling unit (exclude size of garage)?

826 sq. ft.

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?

The proposed building matches the main residence in architectural style and detailing. As well as materials and colors.

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

Water from an existing well will be piped over from the main residence. An additional septic tank is proposed for the secondary dwelling unit and a new engineered leach field is proposed for both main and detached structures.

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

The existing asphalt driveway will be extended to provide access to the detached structure.

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

Additional parking is provided in front of the garage area of the detached structure.

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

The estimated structure completion date is next spring or summer of 2018.

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?

The structure has been placed on the lower portion of the property within the required setbacks to help minimize the overall height. Subject area is currently planted as a pasture.

The proposed building will also replace a small barn structure that is not matching in style to main residence where the new proposed building will match and be more compatible.

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.

No.			

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.	
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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.

There are no existing accessory dwelling units on subject property.

 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.)

N/A

13. List who the service provider will be for the following utilities:

a. Sewer Service	Septic
b. Electrical Service	NV Energy
c. Solid Waste Disposal Service	Waste Management
d. Water Service	Private Well

## Property Owner Affidavit

Applicant Name: **COBERT** SCHGER

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 t hat the application is deemed complete and will be processed.

STATE OF NEVADA

COUNTY OF WASHOE

OBERT (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): 4109212 Printed Name Signed Addres Subscribed and, to before me this sworn day of (Notary Stamp) Notary Public in and for said county and state MILENA TONINO NOTARY PUBLIC STATE OF NEVADA My commission expires:02-My Commission Expires: 02-17-2020 Certificate No: 16-1638-3

\*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

## **Property Owner Affidavit**

Applicant Name: SHARON DESCHGER

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 t hat the application is deemed complete and

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HA RON

(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

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

04109212 Assessor Parcel Number(s): Printed Name Signed Address Subscribed and, sworn to before me this day of (Notary Stamp) MILENA TONINO Notary Public in and for said county and state NOTARY PUBLIC STATE OF NEVADA

My commission expires: 02.1

\*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.)
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- Letter from Government Agency with Stewardship

Commission Expires: 02-17-2020

Certificate No: 16-1638-3

#### 8/8/2017

#### Bill Detail

Washoe County Treasurer P.O. Box 30039, Reno, NV 89520-3038 ph: (775) 328-2510 fax: (775) 328-2500 Email: tax@washoecounty.us

#### Washoe County Treasurer Tammi Davis

### Bill Detail

**Taxing District** 

Back to Account Detail

Change of Address

Print this Page

Geo CD:

Washoe County Parcel Information		
Parcel ID	Status	Last Update
04109212	Active	8/8/2017 2:10:39 AM
Current Owner: OESCHGER FAMILY TRUST, ROBERT A 3560 LUNSFORD CT RENO, NV 89511	3!	<b>ITUS:</b> 560 Lunsford CT I'CTY NV

Legal Description

Township 18 Lot 8 Block Range 19 SubdivisionName FROST RANCHES Section

Installments							
Period	Due Date	Tax Year	Тах	Penalty/Fee	Interest	Total Due	
INST 1	8/21/2017	2017	\$0.00	\$0.00	\$0.00	\$0.00	
INST 2	10/2/2017	2017	\$4,222.01	\$0.00	\$0.00	\$4,222.01	
INST 3	1/1/2018	2017	\$4,222.01	\$0.00	\$0.00	\$4,222.01	
INST 4	3/5/2018	2017	\$4,222.01	\$0.00	\$0.00	\$4,222.01	
		Total Due:	\$12,666.03	\$0.00	\$0.00	\$12,666.03	

Tax Detail					
	Gross Tax	Credit	Net Tax		
State of Nevada	\$903.76	(\$17.71)	\$886.05		
Truckee Meadows Fire Dist	\$2,870.76	(\$56.26)	\$2,814.50		
Washoe County	\$7,398.58	(\$144.99)	\$7,253.59		
Washoe County Sc	\$6,052.53	(\$118.63)	\$5,933.90		
Water District	\$10.00	\$0.00	\$10.00		
TRUCKEE MDWS/SUN VALLEY WATER BASIN	\$0.03	\$0.00	\$0.03		
Total Tax	\$17,235.66	(\$337.59)	\$16,898.07		

Payment History					
Tax Year	Bill Number	Receipt Number	Amount Paid	Last Paid	
2017	2017065931	B17.28191	\$4,232.04	8/4/2017	

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.

#### Pay By Check

Please make checks payable to: WASHOE COUNTY TREASURER

Mailing Address: P.O. Box 30039 Reno, NV 89520-3039

**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 <u>click here</u>

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





- AMENITIES, (I.E. AREAS TO REMAIN 'NATURAL', TREES, SHRUBS, ROCK OUTCROPPINGS, STRUCTURES, UTILITIES ETC.) THE GENERAL CONTRACTOR SHALL USE ANY AND ALL MEANS AVAILABLE TO PREVENT DAMAGE FROM OCCURRING. DAMAGE TO ANY OF THESE ITEMS SHALL BE REPAIRED BY THE GENERAL CONTRACTOR AT NO COST TO THE OWNER.
- 13. ALL SITE WORK AND FINISH GRADING INCLUDING IRRIGATION SLEEVES, RETAINING WALLS, ROCK EMBANKMENTS, AREAWAYS AND DRAINAGE SWALES MUST BE COMPLETED PRIOR TO CERTIFICATE OF OCCUPANCY.
- 14. CONCRETE PAVER COLOR AND SHAPE SHALL BE SELECTED BY THE OWNER. PAVERS SHALL BE BEDDED ON COMPACTED SAND BASE AND INSTALLED IN STRICT COMPLIANCE WITH MANUFACTURERS RECOMMENDATIONS.
- 15. PROVIDE ELECTRICAL POWER FOR LANDSCAPE LIGHTS AS SHOWN PER PLANS. STUB OUT FOR FUTURE LIGHTING PER OWNERS DIRECTIONS.





ISSUE DATE FOR PERMIT 6-27-17 PLANNING REVIEW 8-15-17

10617 roject No. MF rawn bv CW hecked by TITLE ARCHITECTURAL

SITE PLAN

SHEET



## FLOOR PLAN KEYNOTES

(1) 22" x 30" ATTIC ACCESS PANEL

- (2) 18" x 24" CRAWL SPACE ACCESS PANEL
- (3) (4) 16" DEEP PAINTED WOOD SHELVES
- SHOWER WITH MORTAR SET TILE FLOOR, WALLS AND CEILING. TILE LEDGE @ 60" A.F.F. ALL TILE (4) WORK SHALL COMPLY WITH I.R.C. SECTION R702.4 AND T.C.A. STANDARDS.

5 UPPER CABINETS

- (6) 2'x2' SKYLIGHT ABOVE

(7) DECORATIVE PRECAST COLUMN - MATCH COLUMNS AT (E) RESIDENCE

(8) FLOOR DRAIN

## FLOOR PLAN LEGEND

2x6 WOOD STUD WALL, REFER TO STRUCTURAL FOR SHEAR WALL ASSEMBLY 2x4 WOOD STUD WALL 2x6 WOOD STUD WALL W/ THIN BRICK VENEER, \_\_\_\_\_ REFER TO STRUCTURAL FOR SHEAR WALL ASSEMBLY CONCRETE OR PAVER FLATWORK

- - - - - - -

2 A3.2

GYP. BOARD SOFFIT (8'-0" TYP., U.N.O.)

\_\_\_\_\_X'-X"\_\_\_ CEILING HEIGHT

CRAWL SPACE VENTILATION FOUNDATION VENTS (F.V.) 6 X 0.6 = 3.6 S.F. REQUIRED = 826 S.F./ 1500 = 0.6 S.F. CALCULATION BASED ON I.R.C. SECTION R408.2 EXCEPTION 2 GALVANIZED METAL FOUNDATION VENTS PER WUI 2012



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ISSUE DATE FOR PERMIT 6-27-17 PLANNING REVIEW 8-15-17

roject No. 10617 MF rawn by CW hecked by TITLE FLOOR PLAN

SHEET A2.1



A3.1 SCALE: 1/4" = 1'-0"







# 2 WEST ELEVATION A3.1 SCALE: 1/4" = 1'-0"

## **ELEVATION KEYNOTES**

# 1 CONCRETE ROOF 'S' TILE COLOR: MATCH (E) RESIDENCE

- 2 R.S. WOOD FASCIA COLOR: MATCH (E) RESIDENCE
- 3 PROJECTED FOAM STUCCO CORNICE DETAIL COLOR: MATCH (E) RESIDENCE
- 4 STUCCO FINISH (BODY) COLOR: MATCH (E) RESIDENCE
- 5 MANUFACTURED THIN BRICK VENEER COLOR: MATCH (E) RESIDENCE
- PROJECTED FOAM STUCCO SILL DETAIL COLOR: MATCH (E) RESIDENCE
- 7 STANDARD LIGHT FIXTURE -VERIFY MOUNTING HEIGHT
- 8 DECORATIVE PRECAST COLUMN COLOR: MATCH (E) RESIDENCE
- 9 PRE FINISHED METAL GUTTERS AND DOWNSPOUTS COLOR: MATCH ADJACENT SURFACE
- (10) DECORATIVE LIGHT FIXTURE VERIFY MOUNTING HEIGHT
- 11 SECTIONALGARAGE DOOR -COLOR: MATCH (E) RESIDENCE
- (12) 6"x14" GALVANIZED METAL FOUNDATION VENT PER WUI 2012 COLOR TO MATCH ADJACENT SURFACE
- (13) SKYLIGHT COLOR: VELUX





SHEET

A3.1







## ELEVATION KEYNOTES



- 10 DECORATIVE LIGHT FIXTURE -VERIFY MOUNTING HEIGHT
- (11) SECTIONALGARAGE DOOR -COLOR: MATCH (E) RESIDENCE
- (12) 6"x14" GALVANIZED METAL FOUNDATION VENT PER WUI 2012 COLOR TO MATCH ADJACENT SURFACE
- 13 SKYLIGHT COLOR: VELUX





SHEET

A3.2