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 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	S	Staff Assigned Case No.:			
Project Name: Greenhale L Residence					
Description: Demo Description: Demo Description: Demo Description: Loo saft Delling as a Defacted Accessory Ovelling wint of 3347 Square feet					
Project Address: 2600	Holcomb	Ranch Lone	'		
Project Area (acres or square fe	et): 4.386				
Project Location (with point of re					
2600 Holcom	b Ranch Land	2			
Assessor's Parcel No.(s):	Parcel Acreage:	Assessor's Parcel No.(s):	Parcel Acreage:		
230-060-10	41,386				
Indicate any previous Wash	oe County approval	s associated with this applicat	ion:		
Case No.(s).			e s a a storigat d'an amb air Alberton e ann amh ann ann ann ann an Ann an Ann ann ann a		
Applicant Inf	ormation (attach	additional sheets if necess	ary)		
Property Owner:		Professional Consultant:			
Name: Ryon + Ashley	Greenhalgh	Name: JLS Dosiga			
Address: 200B Holeon		Address: Po Box 9365			
	Zip: 8951)	Truckee CA	Zip: 96162		
Phone: 775-691-3759	Fax:	Phone: \$30, 587-5232	Fax:		
Email: ryan@titanelec	dric, biz	Email:			
Cell: 691-3759	Other:	Cell:	Other:		
Contact Person: Rycn	Greenhalt	Contact Person: Joe <	harmen		
Applicant/Developer:	2	Other Persons to be Contacted:			
Name:		Name: J			
Address:	ner en seus mi so	Address:			
united to the major where wells	Zip:		Zip:		
Phone:	Fax:	Phone:	Fax:		
Email:	The Proposition of the Propositi	Email:			
Cell:	Other:	Cell:	Other:		
Contact Person:		Contact Person:			
For Office Use Only					
Date Received:	Initial:	Planning Area:	And the second s		
County Commission District:		Master Plan Designation(s):			
CAB(s):		Regulatory Zoning(s):			

Property Owner Affidavit

Applicant Name: Gounta	lal
)
requirements of the Washoe County Developm	ttal does not guarantee the application complies with all tent Code, the Washoe County Master Plan or the ling, or that the application is deemed complete and will
STATE OF NEVADA) COUNTY OF WASHOE) I, Right Granhald (please	print name)
being duly sworn, depose and say that I am the application as listed below and that the foregoin information herewith submitted are in all respects of	e owner* of the property or properties involved in this ag statements and answers herein contained and the complete, true, and correct to the best of my knowledge guarantee can be given by members of Planning and
(A separate Affidavit must be provided by	each property owner named in the title report.)
Assessor Parcel Number(s): 230-0(pc	0~10
	Signed Ryan Grape Lelgh Address 2600 B Holdon b Rouch
	VMOTHIM
Subscribed and sworn to before me this day of February, 2019	(Notary Stamp) ERIN D. THOMSON
Notary Public in and for said county and state	Notary Public - State of Nevada Appointment Recorded in Washoe County No: 17-2930-2 - Expires July 1, 2021
My commission expires: 1-1-2021	***************************************
*Owner refers to the following: (Please mark appro	opriate box.)
☐ Corporate Officer/Partner (Provide copy of	record document indicating authority to sign.)
☐ Power of Attorney (Provide copy of Power	• •
	n property owner giving legal authority to agent.)
Property Agent (Provide copy of record do	
☐ Letter from Government Agency with Stew	ardship

Property Owner Affidavit

Applicant Name: Greenhalg
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)
heing duly swarp dans de la de
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 Building.
(A separate Affidavit must be provided by each property owner named in the title report.)
Assessor Parcel Number(s): 230 - 060 - 10
Printed Name Ashley Greenhalgh Signed Agreenhalgh Address 2600 Holcomb Ranch Ln
Subscribed and sworn to before me this day of February, 2019 (Notary Stamp)
Notary Public in and for said county and state HIND. THOMSON Notary Public - State of Nevada Appointment Recorded in Washoe County
My commission expires: 7-1-202
*Owner refers to the following: (Please mark appropriate box.)
Owner Owner
artifer (Frovide copy of record document indicating authority to sign.)
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)?

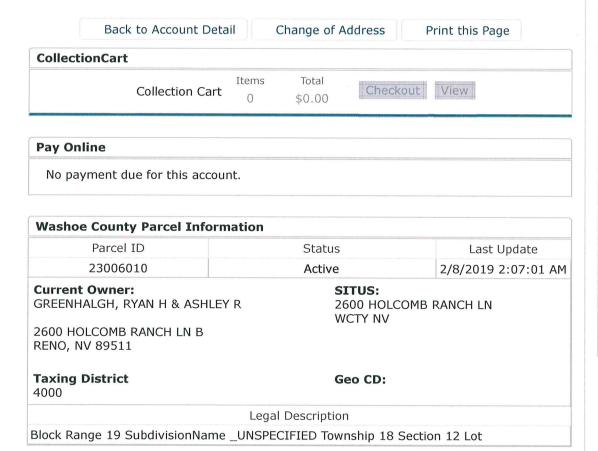
	3,347 square foot
2.	What is the size of the proposed detached accessory dwelling (exclude size of garage)? If a manufactured or modular home is the secondary dwelling, list the age and size of the unit.
	Owelling 600 of aproved studie 01-2727) garage 12' + 1500 sq
3.	How are you planning to integrate the main dwelling and secondary dwelling to provide architectural compatibility of the two structures?
	Existing Structures will be modified to match new dwelling
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?
	5 car garage to be constructed with new residuce
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?
	Existing sanctures to heremoved and replaced with Landscaping
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.
	Trying to redesignate existing NE Dwelling will re
Was	shoe County Planning and Building December 2018 TACHED ACCESSORY DWELLING ADMINISTRATIVE REVIEW APPLICATION SUPPLEMENTAL INFORMATION

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

	Main Dwelling	Accessory Dwelling	
Sewer Service	Septie	Septic	
Electrical Service	NVE.	NVE	
Solid Waste Disposal Service	Waste Managnet	Waste Maragnet	
Water Service	Well	Well	

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

Account Detail



Tax Bill (C	lick on desired	tax year for du	ue dates and fu	rther details	5)
Tax Year	Net Tax	Total Paid	Penalty/Fees	Interest	Balance Due
2018	\$5,603.77	\$5,603.77	\$0.00	\$0.00	\$0.00
2017	\$5,350.81	\$5,350.81	\$0.00	\$0.00	\$0.00
2016	\$5,357.04	\$5,357.04	\$0.00	\$0.00	\$0.00
2015	\$5,346.97	\$5,346.97	\$0.00	\$0.00	\$0.00
2014	\$5,316.30	\$5,316.30	\$0.00	\$0.00	\$0.00
				Total	\$0.00

Disclaimer

- ALERTS: If your real property taxes are delinquent, the search results displayed may not reflect the correct amount owing. Please contact our office for the current amount due.
- For your convenience, online payment is available on this site.
 E-check payments are accepted without a fee. However, a service fee does apply for online credit card payments.
 See Payment Information for details.

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



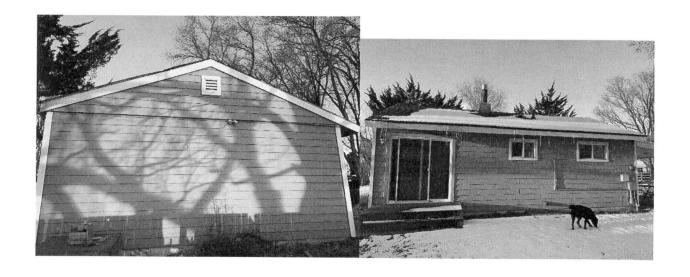
Installment Date
Information

Dwelling To Remain



West Elevation

South Elevation



East Elevation

North Elevation

Dwelling To Be Removed



East Elevation

South Elevation



West Elevation

North Elevation



(775) 328-2020

OWNER

(775) 328-6132 FAX

WASHOE COUNTY

Department of Building & Safety

"Dedicated to Excellence in Public Service"

BUILDING PERMIT

INSPECTION LINE (775) 325-8000 www.washoecounty.us/building

BUILDING & SAFETY

P.O. Box 11130 Reno, NV 89520-0027

Applied: 02/07/2019 Issued: 02/07/2019

Status: Issued Expire: 08/08/2020

Use Code:

Address: 2600 HOLCOMB RANCH LN

Location:

Parcel No: 230-060-10

Zonina:

Area: SOUTHWEST

GREENHALGH, RYAN H & ASHLEY R

2600 HOLCOMB RANCH LN # B

RENO, NV 89511

CONTRACTOR TITAN ELECTRICAL CONTRACTING INC

5450 MILL STREET RENO, NV 89502 License: 0069843

CONTACT RYAN

RYAN GREENHALGH

TITAN ELECTRICAL CONTRACTING INC 5450 MILL STREET

RENO, NV 89502

Permit No: **WBLD19-100401**

Permit Type: Special Inspection Permit

Type: Residential

Occupancy:

Phone 1: Phone 2:

Email:

Phone 1: Phone 2:

Phone 3:

Email:

Phone 1: 775-691-3759

Phone 2: Phone 3:

Email: RYAN@TITANELECTRIC.BIZ

Permit Description: TO DEMO ONE OF TWO EXISTING HOMES (SMALLER 400 SQF HOME) ON PARCEL - SEE NEW SFD PERMIT

WBLD19-100365

Valuation:

\$0.00

Occupancy		Туре		Sq Feet	Valuation	
				Totals		
FEES:	Building Fee:	\$0.00	Renewal Fee:	\$0.00	TOTAL FEES:	\$94.00
	Reinspection Fee:	\$0.00	Impact Fee:	\$0.00	PAYMENTS:	\$94.00
	Water Resources Fee:	\$0.00	Violation Fee:	\$0.00	BALANCE DUE:	\$0.00
	Plan Check Fee:	\$0.00	Regional Tech Fee:	\$0.00		
	Move/Alter Fee:	\$0.00	Other Fee:	\$94.00	RRIF & Health Fees to	be determined

Permission is hereby granted to do the work for the building described in this application, in accordance with the Rules, Regulations and Ordinances of the County of Washoe, along with the plans and specifications filed herewith.

IMPORTANT TIME DEADLINES: ____ (initial)

I UNDERSTAND THAT FINAL INSPECTION OR RENEWAL OF THIS PERMIT MUST BE MADE PRIOR TO THE EXPIRATION DATE OR NEW PLANS MUST BE SUBMITTED AND PERMIT FEES PAID PRIOR TO FINAL INSPECTION. PERMITS EXPIRE 18 MONTHS FROM THE DATE OF ISSUE, WITH NO GRACE PERIOD, IF THE DATE OF EXPIRATION FALLS ON A WEEKEND OR HOLIDAY, THE PREMIT MUST BE RENEWED ON THE LAST BUSINESS DAY PRIOR TO THE EXPIRATION. I UNDERSTAND THIS IS THE ONLY NOTICE I WILL RECEIVE FOR RENEWAL OF THE PERMIT AND KEEPING THE PERMIT RENEWED AND IN A VALID STATUS IS MY RESPONSIBILITY.

DISCLAIMERS: INDEMNIFICATION: ACKNOWLEDGMENTS BY PERMITTEE: ____ (initial)

I UNDERSTAND THAT THE INSPECTIONS PROVIDED BY WASHOE COUNTY ARE VERY LIMITED AND DO NOT COVER ALL OF THE WORK PERFORMED UNDER THE AUTHORITY OF THIS PERMIT. THE INSPECTIONS ARE OCCASIONAL SPOT CHECKS, MUCH LIKE AN AUDIT; THEREFORE MANY PARTS OF THE WORK ARE NOT INSPECTED. IF MORE INSPECTION IS DESIRED, A PRIVATE INSPECTOR MUST BE HIRED BY THE PERMITTEE. NEITHER THE INSPECTIONS BY THE COUNTY NOR THE CERTIFICATE OF OCCUPANCY CONSTITUTE A REPRESENTATION BY THE COUNTY THAT THE WORK WAS INSPECTED OR THAT THE WORK COMPLIES WITH COUNTY ORDINANCES.

I HEREBY AGREE TO DEFEND AND TO SAVE, INDEMNIFY AND KEEP HARMLESS THE COUNTY OF WASHOE AND ITS OFFICERS, EMPLOYEES AND AGENTS AGAINST ALL LIABILITIES, JUDGEMENTS, COSTS AND EXPENSES WHICH MAY ACCRUE AGAINST THE COUNTY IN CONSEQUENCE OF GRANTING OF THIS PERMIT OR CERTIFICATE OF OCCUPANCY, IN CONSEQUENCE OF THE COUNTY'S OWN NEGLIGENCE OR ITS OTHERS ACTS OR OMISSIONS WITH RESPECT TO THIS PERMIT OR A CERTIFICATE OF OCCUPANCY, OR IN CONSEQUENCE OF THE USE OR OCCUPANCY OF ANY WORK, SIDEWALK, SUB-SIDEWALK OR STREET, OR OTHERWISE BY VIRTUE THEREOF, AND WILL IN ALL THINGS STRICTLY COMPLY WITH THE CONDITIONS OF THIS PERMIT AND PROVISIONS OF THE RULES, REGULATIONS AND ORDINANCE OF THE COUNTY OF WASHOE.

ROUTE SLIP

Address: 2600 HOLCOMB RANCH LN

Permit No: WBLD19-100365

Location:

Permit Type: Residential New, Addition or Remodel Permit

Type: New Single Family

Occupancy:

Parcel No: 230-060-10

Use Code:

Applied: 02/05/2019

Issued:

Status: In Review

RRIF & Health Fees to be determined

Expire:

Inspection:

Special Use:

Variance No:

M.P.R No:

Zoning:

Area: SOUTHWEST Sewer: Septic

Water: Well

Census: 101 Single Family Dwelling

Units: 1 # Bldgs: 1

OWNER

GREENHALGH, RYAN H & ASHLEY R

2600 HOLCOMB RANCH LN # B

RENO, NV 89511

Phone 1: Phone 2:

Email:

CONTRACTOR

CONTACT

TITAN ELECTRICAL CONTRACTING INC

\$0.00

5450 MILL STREET RENO. NV 89502

RYAN GREENHALGH

Phone 2: Phone 3: Email:

Phone 1:

License: 0069843

Phone 1: 775-691-3759

Phone 2:

Phone 3:

Email: RYAN@TITANELECTRIC.BIZ

\$1.812.00

Permit Description:

NEW TWO STORY SINGLE FAMILY DWELLING 3,347 SQ FT / 3 BEDROOMS / 3.5 BATHROOMS / ATTACHED 5 CAR GARAGE 1,879 SQ FT / MECHANICAL AND STORAGE AREAS 870 SQ FT / ONE OF

THE EXISTING HOUSES TO BE DEMOED ON SEPERATE PERMIT

Valuation: \$428,597.12

Move/Alter Fee:

Occupa R-3 Res	sidential, one- and two-fan	nily,	Type VB	Factor 94.99	Sq Feet 3,347	Valuation \$317,931.53
	, miscellaneous port, Awning, Patio Cover		VB -	36.91 20.00 Totals	2,749 460 6,556	\$101,465.59 \$9,200.00 \$428,597.12
FEES:	Building Fee: Reinspection Fee:	\$3,048.59 \$0.00	Renewal Fee:	\$0.00	TOTAL FEES: PAYMENTS:	\$6,384.89 \$3,214.30
	Water Resources Fee: Plan Check Fee:	\$0.00 \$1,524.30	Violation Fee: Regional Tech Fee:	\$0.00 \$0.00	BALANCE DUE:	\$0.00

Applications for which no permit is issued within 180 days following the date of application shall expire by limitation, and plans and other data submitted for review may thereafter be returned to the applicant or destroyed by the building official. The building officially may extend the time for action by the applicant for a period not exceeding 180 days on a request by the applicant showing that circumstances beyond the control of the applicant have prevented action from being taken. No application shall be extended more than once. In order to renew action on an application after expiration, the applicant shall resubmit plans and pay a new plan review fee.

Other Fee:

