

Community Services Department  
Planning and Building  
AMENDMENT OF CONDITIONS  
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.

<b>Project Information</b>		Staff Assigned Case No.: <u>WAC21-0001</u>	
Project Name: <u>LOMBARDI LANE PARCEL MAP</u>			
Project Description: <u>SPLIT AN EXISTING 24 ACRE PARCEL INTO 4 SEPARATE PARCELS</u>			
Project Address: <u>0 LOMBARDI LANE</u>			
Project Area (acres or square feet): <u>24 ACRES</u>			
Project Location (with point of reference to major cross streets AND area locator): <u>APPROXIMATELY 2680 FT SOUTH OF THE INTERSECTION OF LONE TREE LN. &amp; FROST LN.</u>			
Assessor's Parcel No.(s):	Parcel Acreage:	Assessor's Parcel No.(s):	Parcel Acreage:
<u>041-190-11</u>	<u>24.023 ACRES</u>		
Indicate any previous Washoe County approvals associated with this application: Case No.(s). <u>WTFM20-0009</u>			
<b>Applicant Information</b> (attach additional sheets if necessary)			
<b>Property Owner: (AGENT)</b>		<b>Professional Consultant:</b>	
Name: <u>LOMBARDI LANE PARTNERS LLC</u>		Name: <u>MST SURVEYING</u>	
Address: <u>1100 CALIFORNIA AVE.</u>		Address: <u>10650 SANTA FE RD.</u>	
<u>RENO, NV</u> Zip: <u>89509</u>		<u>RENO, NV.</u> Zip: <u>89508</u>	
Phone: <u>775-690-7978</u> Fax: <u>775-828-2115</u>		Phone: <u>775-544-7817</u> Fax: <u>775-677-8408</u>	
Email: <u>STEVE.TACHOMES@GMAIL.COM</u>		Email: <u>MSTSURVEYING@HOTMAIL.COM</u>	
Cell: <u>775-690-7978</u> Other:		Cell: <u>775-544-7817</u> Other:	
Contact Person: <u>STEVE RYCKEBOSCH</u>		Contact Person: <u>MIKE TALONEN</u>	
<b>Applicant/Developer:</b>		<b>Other Persons to be Contacted:</b>	
Name: <u>LOMBARDI LANE PROPERTIES LLC</u>		Name:	
Address: <u>1100 CALIFORNIA AVE.</u>		Address:	
<u>RENO, NV</u> Zip: <u>89509</u>		Zip:	
Phone: <u>775-690-7978</u> Fax: <u>775-828-2115</u>		Phone: Fax:	
Email: <u>STEVE.TACHOMES@GMAIL.COM</u>		Email:	
Cell: <u>775-690-7978</u> Other:		Cell: Other:	
Contact Person: <u>STEVE RYCKEBOSCH</u>		Contact Person:	
<b>For Office Use Only</b>			
Date Received:	Initial:	Planning Area:	
County Commission District:		Master Plan Designation(s):	
CAB(s):		Regulatory Zoning(s):	

# Property Owner Affidavit

**Applicant Name:** LOMBARD LANE PARTNERS

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, STEVE RYCKEBOSCH  
(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): 041-190-11

Printed Name STEVE RYCKEBOSCH

Signed \_\_\_\_\_

Address 1100 CALIFORNIA AVE RENO NV 89511

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

(Notary Stamp)

\_\_\_\_\_  
Notary Public in and for said county and state

My commission expires: \_\_\_\_\_

\*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

# Amendment of Conditions Application Supplemental Information

(All required Information may be separately attached)

## Required Information

1. The following information is required for an Amendment of Conditions:
  - a. Provide a written explanation of the proposed amendment, why you are asking for the amendment, and how the amendment will modify the approval.
  - b. Identify the specific Condition or Conditions that you are requesting to amend.
  - c. Provide the requested amendment language to each Condition or Conditions, and provide both the *existing* and *proposed condition(s)*.

① AMEND THE CONDITIONS TO OFFICIALLY CHANGE THE ENGINEERING CONDITIONS OF APPROVAL TO REMOVE THE 36 FT. EASEMENT REQUIREMENTS AS APPLIED TO OTHER PARCELS.  
② AMEND THE CONDITION FROM WASHOE COUNTY PARKS DELETING THE REQUIREMENT FOR A 30' WIDE PUBLIC TRAIL EASEMENT, PER DISCUSSIONS WITH SOFA & LEGAL.

2. Describe any potential impacts to public health, safety, or welfare that could result from granting the amendment. Describe how the amendment affects the required findings as approved.

NO POTENTIAL IMPACTS TO PUBLIC HEALTH, SAFETY OR WELFARE.