# Community Services Department Planning and Development DETATCHED ACCESSORY DWELLING ADMINISTRATIVE REVIEW APPLICATION



Community Services Department Planning and Development 1001 E. Ninth St., Bldg A Reno, NV 89520

Telephone: 775.328.3600

### 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	S	itaff Assigned Case No.:		
Project Name:				
Knight Ferry Family Trust Gue	the second se			
Description: The garage is not	designed for automo	se of approx. 780 sq. ft. with an obile parking but instead will for s vill be rafter storage above the li	storage of snow	
Project Address:20025 Mt. Ro	ose Highway			
Project Area (acres or square fe	et):5.79 Acres			
Project Location (with point of r Southeast of the intersection of				
Assessor's Parcel No.(s):	Parcel Acreage:	Assessor's Parcel No(s):	Parcel Acreage:	
048-062-05	5.79			
Section(s)/Township/Range:				
Indicate any previous Wash Case No.(s). Building permit for		s associated with this applicance.	tion:	
Applicant	Information (atta	ach additional sheets if necessar	у)	
Property Owner:		Professional Consultant:		
Name:Knight Ferry Family Tru	ıst	Name: George K. Trowbridge		
Address: 1299 Ocean Ave. Ste	ə. 333	Address:1325 Airmotive Way Ste. 285		
Santa Monica, CA Zip: 90401		Reno, NV	Zip: 89502	
Phone: 310-451-0744	Fax:	Phone:775-322-5997 ex. 12	Fax:	
Email: JJacobs@goodfriendja	cobs.com	Email:gktarch@gmail.com		
Cell: 310-367-4989	Other:	Cell: 775-741-4704	Other:	
Contact Person: Jeffery Jacob	s	Contact Person:George Trowbridge		
Applicant/Developer:		Other Persons to be Contacted:		
Name:Same		Name:		
Address:		Address:		
	Zip:		Zip:	
Phone:	Fax:	Phone:	Fax:	
Email:		Email:		
Cell:	Other:	Cell:	Other:	
Contact Person:		Contact Person:		
	For Office	e Use Only		
Date Received:	Initial:	Planning Area:		
County Commission District:		Master Plan Designation(s):		
CAB(s):		Regulatory Zoning(s):	n na poskunda (* 1920) 1930 - 1930 - 1930 - 1930 - 1930 - 1930 - 1930 - 1930 - 1930 - 1930 - 1930 - 1930 - 1930	

### **Property Owner Affidavit**

### Applicant Name: \_\_\_\_\_\_ JEFFREY JACOBS

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 Jeffrey Jacobs

(please print name)

being duly swom, 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.)

Assessor Parcel Number(s): 048-062-05

Printed Name Jeffrey Jacobs			
Signed THE and			
Address 1299 OCEAN AVE. #333			
SANTA MONICA, CA 90401			
Subscribed and sworn to before me this day of day of, 2019. (Notary Stamp)			
LOS Angeles, Calibriania Notary Public in and for said county and state My commission expires:			
*Owner refers to the following: (Please mark appropriate box.)			
<ul> <li>Corporate Officer/Partner (Provide copy of recorded document indicating authority to sign.)</li> <li>Power of Attorney (Provide copy of Power of Attorney.)</li> </ul>			
<ul> <li>Owner Agent (Provide notarized letter from property owner giving legal authority to agent.)</li> <li>Property Agent (Provide copy of record document indicating authority to sign.)</li> <li>Letter from Government Agency with Stewardship</li> </ul>			

February 2014

#### **CALIFORNIA JURAT WITH AFFIANT STATEMENT**

**GOVERNMENT CODE § 8202** 

See Attached Document (Notary to cross out lines 1–6 below) See Statement Below (Lines 1–6 to be completed only by document signer[s], not Notary) See a thehed Signature of Document Signer No. 1 Signature of Document Signer No. 2 (if any) 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 Subscribed and sworn to (or affirmed) before me County of LDS Angele on this 19 day of Ebrand by (1)(and (2) Name(s) of Signer(s) proved to me on the basis of satisfactory evidence RENEE GRAY LALANNE to be the person(s) who, appeared before me. Notary Public - California Los Angeles County Commission # 2194938 My Comm, Expires Apr 30, 2021 Signature ature of Notary Public Seal Place Notary Seal Above OPTIONAL Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. **Description of Attached Document** Title or Type of Document: \_\_ Document Date: \_\_\_\_ Number of Pages: Signer(s) Other Than Named Above:

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### 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)?

5,823 sq. ft.

- 2. What is the size of the detached accessory dwelling unit or proposed detached accessory dwelling unit (exclude size of garage)?
- 1140 780 sq. ft. of livable area and 780 sq. ft. of rafter storage for collectable small musical instruments and sports memorabilia. Rafter storage is accessed with pull down ladders.
- 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 Guest House building form, roof slope and exterior finishes will all match the existing residence.

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

Water service is provided by Mount Rose Water Company. Waste water disposal will be a septic system.

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

A new asphalt driveway spur will be connected to the existing driveway.

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

Two uncovered parking spaces are provided.

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

Late 2019 or early 2020.

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 new Guest House will not be visible from any adjacent parcels.

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.

There is no HOA for this property.	

10. Are there any restrictive covenants, recorded conditions, or deed restrictions (CC&Rs) that may prohibit a detached accessory dwelling on your property?

	3	No	If yes, please attach a copy.	
				-

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 is no attached or detached accessory dwelling on this 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	Mount Rose Water Company



ENLARGED PLAN SCALE: 1" = 10'-0"



- 1. CONSTRUCTION SHALL MEET THE REQUIREMENTS OF THE 2012 I.R.C., 2012 I.E.C.C., WASHOE COUNTY BUILDING & PLANNING DEPARTMENTS AND ANY APPLICABLE C.C. &R.'S WITHIN THIS SUBDIVISION.
- 2. FIELD VERIFY EXISTING SITE GRADES AND
- CONDITIONS.
- 3. FIELD VERIFY ALL UTILITY LOCATIONS -CONNECTIONS SHALL BE MADE IN ACCORDANCE WITH ALL APPLICABLE CODES & REQUIREMENTS.
- 4. ALL PREFABRICATED PRODUCTS SHALL BE INSTALLED PER MANUF. SPECIFICATIONS.
- 5. STRUCTURAL DETAILS AND CALCULATIONS HAVE BEEN PREPARED FOR THIS PROJECT & ARE AN INTEGRAL PART OF THE CONSTRUCTION DOCUMENTS.

# SITE LEGEND

.....EXISTING CONTOURS



FINISH CONTOURS

FINISH GRADES

BUILDING ENVELOPE LINES

DRAINAGE SLOPE - 2% MIN.

## SITE NOTES:

- 1. GEOTECHNICAL ENGINEER SHALL EXAMINE SITE AFTER EXCAVATION AND PRIOR TO SETTING ANY CONCRETE FORMS. GEOTECHNICAL ENGINEER'S RECOMMENDATIONS CONCERNING FOOTING DEPTH, COMPACTION, ETC. SHALL BE FOLLOWED.
- 2. ALL (N) WALKS, DRIVES AND PATIOS NOTED ON SITE PLAN SHALL BE 4" CONCRETE (4000 PSI MIN.) W/ #3 BARS @ 18" O.C. EA. WAY, CHAIRED TO MID-SLAB 0/6" TYPE-II BASE, COMP. TO 95%
- 3. CARE SHALL BE TAKEN THAT ALL VEGETATION IN DEVELOPED AREAS IS PROTECTED DURING CONSTRUCTION. ALL VEHICLES & MATERIAL STORAGE SHALL BE RESTRICTED TO DRIVE AREA.
- 4. RETAIN ALL STONES FROM EXCAVATION, LARGER BOULDERS SHALL BE PLACED RANDOMLY IN PLANTER AREAS.
- 5. SITE GRADES SHALL FALL A MINIMUM OF 6" WITHIN THE FIRST 10' FROM THE STRUCTURE. 6. IF ROCK RIP-RAP IS USED IT SHALL BE GRADED FROM 3/4" TO D SIZE, MIN. 4" DEPTH 4 PLACED AS A MIXED AGGREGATE

	DRAWING INDEX
A-1	SITE PLAN, DRAWING INDEX
A-2	FOUNDATION PLAN
Д-3	MAIN FLOOR PLAN
A-4	UPPER FLOOR FRAMING PLAN
A-5	UPPER FLOOR PLAN
A-6	ROOF FRAMING PLAN
<b>∠</b> -7	BUILDING SECTION
A-8	EXTERIOR ELEVATIONS
ମ ଏ-୨	EXTERIOR ELEVATIONS
SDI	STRUCTURAL DETAILS
SD2	STRUCTURAL NOTES / SCHEDULES & DETAILS
SD3	STRUCTURAL DETAILS
ME-1	MECHANICAL/ Electrical plans

DATE: 2-25-19 REVISIONS ົບິດີ 132 REN (77 (77 *O* C ы I C 2 -C  $\overline{\mathbf{N}}$  $\cap$ 









	CONC. SLAB	

MAIN FLOOR PLAN	A.
$SCALE: 1/4" = 1' - \emptyset"$	$\bigcirc$

LIVING AREA APPROX. 1,140 SQ. FT. GARAGE AREA APPROX, 180 SQ, FT.



























2-27-19 Revisions			
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1325 AIRMOTIVE WAY, STE. 285 RENO, NEVADA 89502 (775)322-5997 (775)322-6288 FAX	www.GTArchitects.com GKTArch@gmail.com		
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NEW GUEST HOUSE KNIGHT FERRY FAMILY TRUST	20025 MT. ROSE HGWY. WASHOE COUNTY, NEVADA		
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 $\frac{\text{MEST ELEVATION}}{\text{SCALE: 1/4" = 1'-0"}}$ 



