### 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: Rankin riding arena				
Project Build 120' x 200' riding arena, 24,000 square feet. Description:				
Project Address: 3000 Rhode	es Road, Reno, Neva	da 89521		
Project Area (acres or square feet): 11 acres				
Project Location (with point of re	Project Location (with point of reference to major cross streets AND area locator):			
3000 Rhodes Road / C	orner of Rhode	es Road and Paddlewh	eel Lane	
Assessor's Parcel No.(s):	Parcel Acreage:	Assessor's Parcel No.(s):	Parcel Acreage:	
017-372-26	11 acres			
а. Т	10,27	(2DR)(RR)		
Indicate any previous Washoe County approvals associated with this application: Case No.(s).				
Applicant Inf	ormation (attach	additional sheets if necess	ary)	
Property Owner:		Professional Consultant:		
Name: Wayne Rankin		Name:		
Address: 3000 Rhodes Road		Address:		
Reno, Nevada	Zip: 89521	Zip:		
Phone: 775-771-6100	Fax:	Phone: Fax:		
Email: Wayne Rankin@gmail.com Email:		Email:		
Cell: 775-771-6100	Other:	Cell: Other:		
Contact Person: Wayne Contact Person:				
Applicant/Developer:		Other Persons to be Contacted:		
		Name: Monty Martin		
Address:		Address: 4591 Longley Lane, Suite#9		
	Zip:	Reno, Nevada	Zip: 89502	
Phone:	Fax:	Phone: 775-849-3773	Fax:	
Email:		Email: Monty@triplemconstruction.us		
Cell: Other:		Cell: 775-745-1161 Other:		
Contact Person:		Contact Person: Monty		
	For Office	Use Only		
Date Received:	Initial:	Planning Area:		
County Commission District:		Master Plan Designation(s):		
CAB(s):		Regulatory Zoning(s):		

#### Property Owner Affidavit

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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	)		
l.	Watne	Rankin	

(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): 017-372-26

Printed Name Signed

KenoiNY 89521 Address 3000 ac

Subscribed and sworn to before me this 15th day of 2021 JUNIC

Notary Public in and for said county and state

My commission expires: 11/22/2022

\*Owner refers to the following: (Please mark appropriate box.)

- Owner
- Corporate Officer/Partner (Provide copy of record document indicating authority to sign.)
- Dever 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

(Notary Stamp)



### Administrative Permit Application Supplemental Information

(All required information may be separately attached)

1. What is the type of project or use being requested?

# Indoor riding arena

2. What section of the Washoe County code requires the Administrative permit required?

Riding arena is significantly larger than the primary residence

3. What currently developed portions of the property or existing structures are going to be used with this permit?

# Existing outdoor riding arena

4. What improvements (e.g. new structures, roadway improvements, utilities, sanitation, water supply, drainage, parking, signs, etc.) will have to be constructed or installed and what is the projected time frame for the completion of each?

## See site plan

5. Is there a phasing schedule for the construction and completion of the project?



6. What physical characteristics of your location and/or premises are especially suited to deal with the impacts and the intensity of your proposed use?

Area is historically agriculture. Horse and cattle raising and training. Proposed riding arena similar to nearby structures.

7. What are the anticipated beneficial aspects or effect your project will have on adjacent properties and the community?

## No equestrian events / Personal use only.

8. What will you do to minimize the anticipated negative impacts or effect your project will have on adjacent properties?



9. Please describe any operational parameters and/or voluntary conditions of approval to be imposed on the administrative permit to address community impacts.

## Will operate as a low noise facility.

10. How many improved parking spaces, both on-site and off-site, are available or will be provided? (Please indicate on site plan.)

This arena is for personal use, parking is not an issue.

11. What types of landscaping (e.g. shrubs, trees, fencing, painting scheme, etc.) are proposed? (Please indicate location on site plan.)

No additional landscaping proposed. Existing trees and shrubbery will partly screen building from Rhodes Road.

12. What type of signs and lighting will be provided? On a separate sheet, show a depiction (height, width, construction materials, colors, illumination methods, lighting intensity, base landscaping, etc.) of each sign and the typical lighting standards. (Please indicate location of signs and lights on site plan.)

## See site plan and building plans

13. Are there any restrictive covenants, recorded conditions, or deed restrictions (CC&Rs) that apply to the area subject to the administrative permit request? (If so, please attach a copy.)

☑ NO

14. Utilities:

a. Sewer Service	septic system on site
b. Water Service	well on site

For most uses, the Washoe County Code, Chapter 110, Article 422, Water and Sewer Resource Requirements, requires the dedication of water rights to Washoe County. Please indicate the type and quantity of water rights you have available should dedication be required:

c. Permit #	N/A	acre-feet per year	
d. Certificate #	N/A	acre-feet per year	
e. Surface Claim #	N/A	acre-feet per year	
f. Other, #	N/A	acre-feet per year	

Title of those rights (as filed with the State Engineer in the Division of Water Resources of the Department of Conservation and Natural Resources):



### Administrative Permit Application Supplemental Information for Care of the Infirm

(All required information, to include the physician's signed affidavit, is considered a public record and will be treated as such by Washoe County. Information may be attached separately)

1. Name of the Infirm:



2. Name of Nevada licensed physician identifying the need for on-premise care and the physician's estimate as to the length of on-premise care required (attach physician's signed affidavit, form on page 11):

N/A

3. Name(s) of the Caregiver(s):

N/A

4. Describe the type and size of recreational vehicle or self-contained travel trailer that is proposed for use as a temporary residence of the caregiver. (Attach a site map showing the proposed location.)

N/A

- 5. Describe the arrangements/methods proposed for the temporary provision of:
  - a. Water Service:

N/A

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b. Sewage (Sanitary Sewer) Service:

N/A

c. Garbage (Solid Waste) Service:

N/A

d. Electricity:

N/A

#### e. Natural Gas:

N/A

6. What will you do to minimize the anticipated negative impacts or effect your waiver will have on adjacent properties?



7. What types of landscaping (e.g. shrubs, trees, fencing, painting scheme, etc.) are proposed? (Please indicate location on site plan.)

No additional landscaping proposed. Existing trees and shrubbery will partley screen building from Rhodes Road.

8. Are there any restrictive covenants, recorded conditions, or deed restrictions (CC&Rs) that apply to the area subject to the administrative permit request? (If so, please attach a copy.)

□ Yes N/A	D No	NIA

9. Community Services (provided and nearest facility):

a. Fire Station	N/A
b. Health Care Facility	N/A
c. Elementary School	N/A
d. Middle School	N/A
e. High School	N/A
f. Parks	N/A
g. Library	N/A
h. Citifare Bus Stop	N/A

