

## 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.: _____	
Project Name:			
Project Description:			
Project Address:			
Project Area (acres or square feet):			
Project Location (with point of reference to major cross streets <b>AND</b> area locator):			
Assessor's Parcel No.(s):	Parcel Acreage:	Assessor's Parcel No.(s):	Parcel Acreage:
Indicate any previous Washoe County approvals associated with this application: Case No.(s).			
<b>Applicant Information</b> (attach additional sheets if necessary)			
<b>Property Owner:</b>		<b>Professional Consultant:</b>	
Name:		Name:	
Address:		Address:	
Zip:		Zip:	
Phone:		Phone:	
Fax:		Fax:	
Email:		Email:	
Cell:		Cell:	
Other:		Other:	
Contact Person:		Contact Person:	
<b>Applicant/Developer:</b>		<b>Other Persons to be Contacted:</b>	
Name:		Name:	
Address:		Address:	
Zip:		Zip:	
Phone:		Phone:	
Fax:		Fax:	
Email:		Email:	
Cell:		Cell:	
Other:		Other:	
Contact Person:		Contact Person:	
<b>For Office Use Only</b>			
Date Received:		Initial:	
County Commission District:		Planning Area:	
CAB(s):		Master Plan Designation(s):	
		Regulatory Zoning(s):	

# Property Owner Affidavit

**Applicant Name:** HENDRICKS LIVING TRUST.

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, MARK HENDRICKS TRUSTEE - HENDRICKS LIVING TRUST  
(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): 050-450-16

Printed Name MARK S. HENDRICKS

Signed [Signature]

Address 3075 HOLLY LN

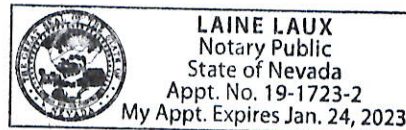
WASHOE VALLEY, NV. 89704

(Notary Stamp)

Subscribed and sworn to before me this  
8 day of September, 2021.

[Signature]  
Notary Public in and for said county and state

My commission expires: 01/24/2023



\*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

# 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)?

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.

3. How are you planning to integrate the main dwelling and secondary dwelling to provide architectural compatibility of the two structures?

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?

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?

7. Is the subject property part of an active Home Owners Association (HOA) or Architectural Control Committee?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, please list the HOA name.
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8. Are there any restrictive covenants, recorded conditions, or deed restrictions (CC&Rs) that may prohibit a detached accessory dwelling on your property?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, please attach a copy.
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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?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, please provide information on the secondary unit.
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10. List who the service providers are for the main dwelling and accessory dwelling:

	Main Dwelling	Accessory Dwelling
Sewer Service		
Electrical Service		
Solid Waste Disposal Service		
Water Service		



# ACCEPTANCE OF CONDITIONS AND APPROVAL FOR DOMESTIC WATER WELL USE FOR AN ACCESSORY DWELLING

Physical Address of Domestic Well Parcel:

3075 Holly Ln.

Located in the County of: Washoe

County Assessor Parcel Number: 050-450-16

I, M. Steven Hendricks, the owner of the above-referenced parcel of land, fully understand and accept the conditions listed below and upon which this approval is made.

1. The combined water use from the well for the main residence and any accessory dwelling shall not exceed two (2) acre-feet per year as provided in Chapter 534.180 of the Nevada Revised Statutes (NRS).
2. A totalizing meter shall be installed near the discharge of the well that provides water to the main residence and the accessory dwelling. The State of Nevada, not Washoe County, is the responsible party in determining meter type and placement. The State's phone number is 775-684-2800. This meter shall be easily accessible for meter reading by the Nevada State Engineer staff and maintained in good working order and shall be installed to measure all water pumped from the well for the purposes of this approval. No water shall be used by the accessory dwelling until the meter has been installed.
3. The main residence and any accessory dwelling shall remain on the same parcel as determined by the County Assessors' records, or this authorization shall be rescinded.
4. Water usage measurements from the totalizing meter must be submitted by the parcel owner to Nevada State Engineer no later than January 31<sup>st</sup> of each calendar year.
5. The "Acceptance of Conditions and Approval for Domestic Water Well Use for an Accessory Dwelling" form (available from the State of Nevada Division of Water Resources website) regarding accessory dwellings shall be completed and returned to WCDWR for approval, and WCDWR will send the request to the Nevada State Engineer. The Nevada Division of Water Resources will determine the final agreement with the owner of the property.

Subscribed and sworn to before me this 8 day

of September, 2021

[Signature]  
Signature of Notary Public Required

Signed

[Signature]  
Permittee or Agent

Address

3075 Holly Ln  
Street Address or PO Box

WASHOE VALLEY NV 89704  
City, State, ZIP Code

Notary Public in and for the County of Washoe

Phone

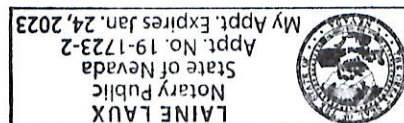
775-219-6393

State of Nevada

E-mail

SHENDRICKSPD@GMAIL.COM

My commission expires 01/24/2023



Notary Stamp or Seal Required

## Approval of Local Governing Body or Planning Commission

This request to allow an accessory building to be served by a domestic well is hereby approved subject to the notarized agreement on the reverse side of this form.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Title \_\_\_\_\_

Agency \_\_\_\_\_

Date \_\_\_\_\_

Phone Number \_\_\_\_\_

**After approval, please send original to:**

**State Engineer  
Nevada Division of Water Resources  
901 South Stewart Street  
Suite 2002  
Carson City, NV 89701**





SOUTH ELEVATION



SOUTH ELEVATION



WEST ELEVATION



EAST ELEVATION



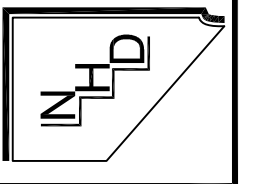
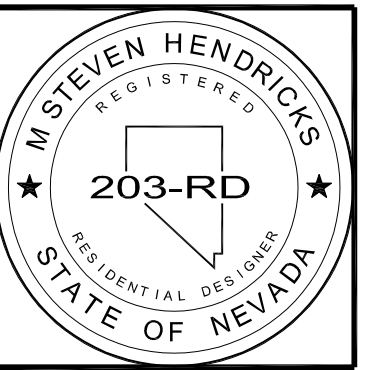
NORTH ELEVATION

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 (775) 302-2692 fax  
 nevadahomedesign@gmail.com  
 nevadahomedesign.com  
 P.O. Box 19708  
 Reno, NV 89511  
 www.nevadahomedesign.com

**Nevada Home Design L.L.C.**  
 Residential Designers

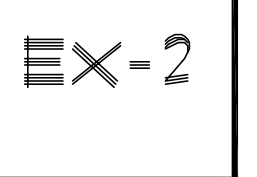



EXISTING ELEVATIONS

KIM & STEVE HENDRICKS

DATE: 9-10-2021  
 JOB NO.: 21-999  
 PROJECT LOCATION:  
 3075 HOLLY LN.  
 WASHOE VALLEY, NV.

SHEET NUMBER







(E) FLOOR PLAN NORTH  
 SCALE: 1/4" = 1'-0"

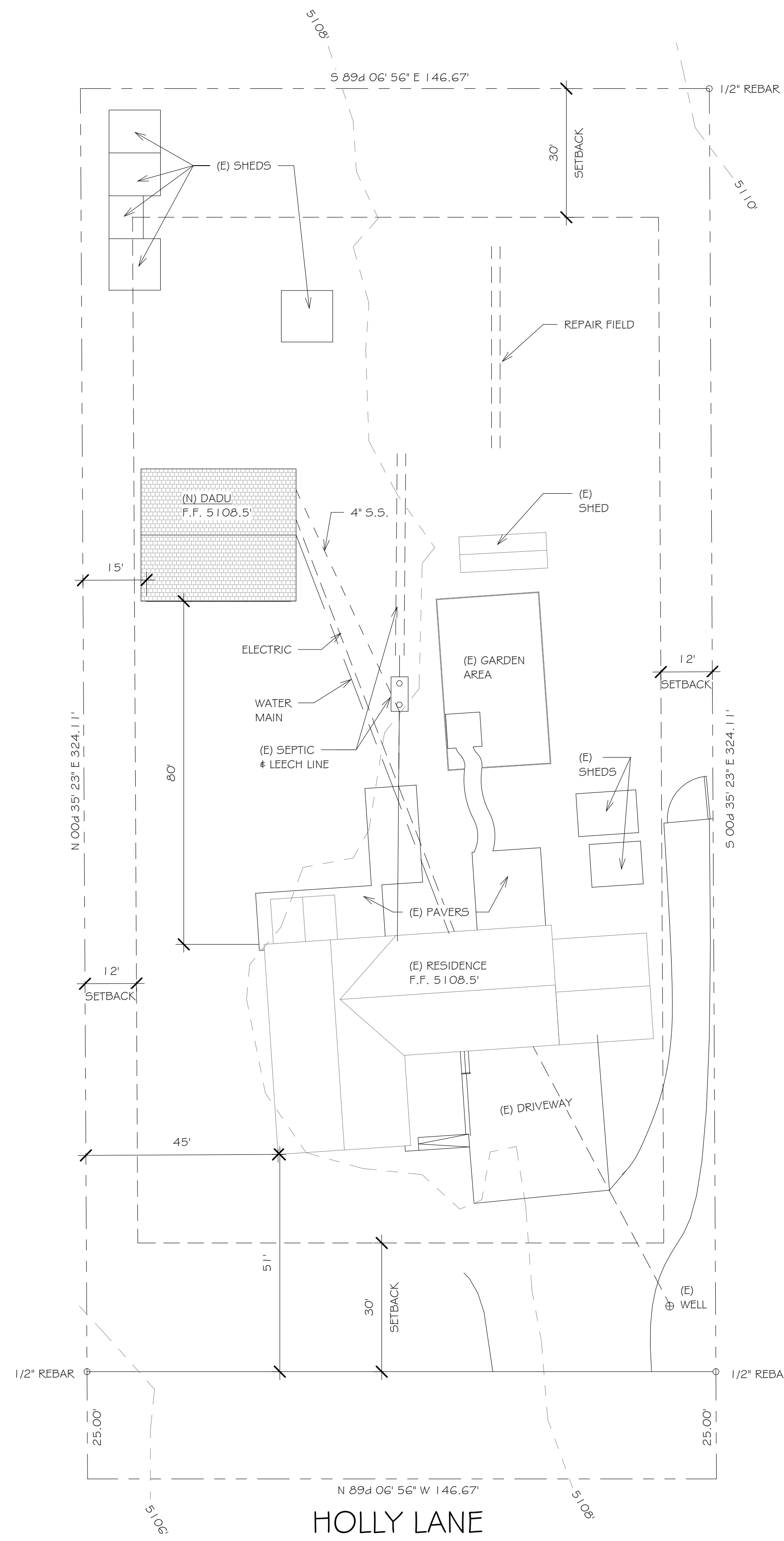
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 (775) 219-6393  
 (775) 302-2692 fax  
 nevadahomedesign@gmail.com  
 nevadahomedesign.com  
 P.O. Box 19708  
 Reno, NV 89511



**EXISTING FLOOR PLAN**  
**KIM & STEVE HENDRICKS**

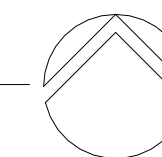
DATE: 9-10-2021  
 JOB NO.: 21-999  
 PROJECT LOCATION:  
 3075 HOLLY LN.  
 WASHOE VALLEY, NV.



1 Site  
1" = 20'-0"

APN: 050-450-16

NORTH

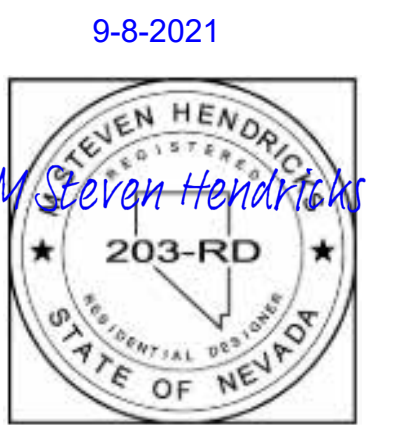


LIST OF DRAWINGS

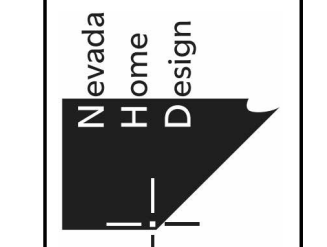
A-1	SITE PLAN
A-2	FLOOR PLAN
A-3	ELEVATIONS

DATE: Issue Date  
JOB NO.: 2199  
PROJECT LOCATION:  
3075 Holly Ln  
Washoe Valley, NV

SHEET  
NUMBER  
A-1



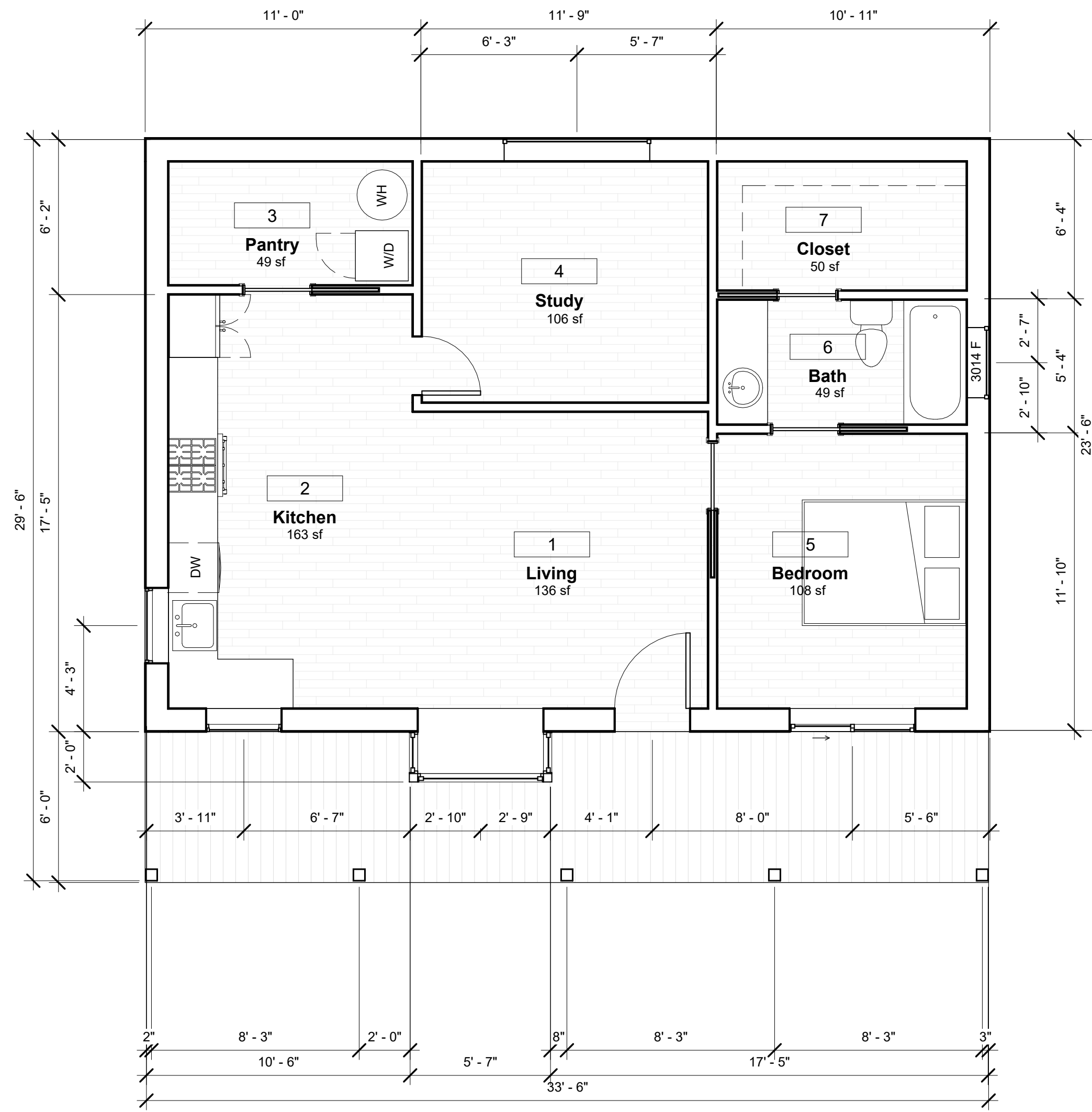
9-8-2021



Nevada Home Design L.L.C. (775) 219-6393  
nevadahomedesign@gmail.com  
Residential Designs  
www.nevahomedesign.com  
P.O. Box 19108  
Reno, NV, 89511

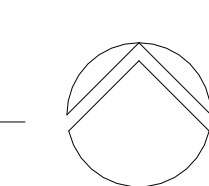
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1 Floor Plan  
1/4" = 1'-0"

(E) RESIDENCE LIVING AREA = APPROX. 1650 sq. ft.  
(N) DADU LIVING AREA = 787 sq. ft. (47%)



REVISIONS

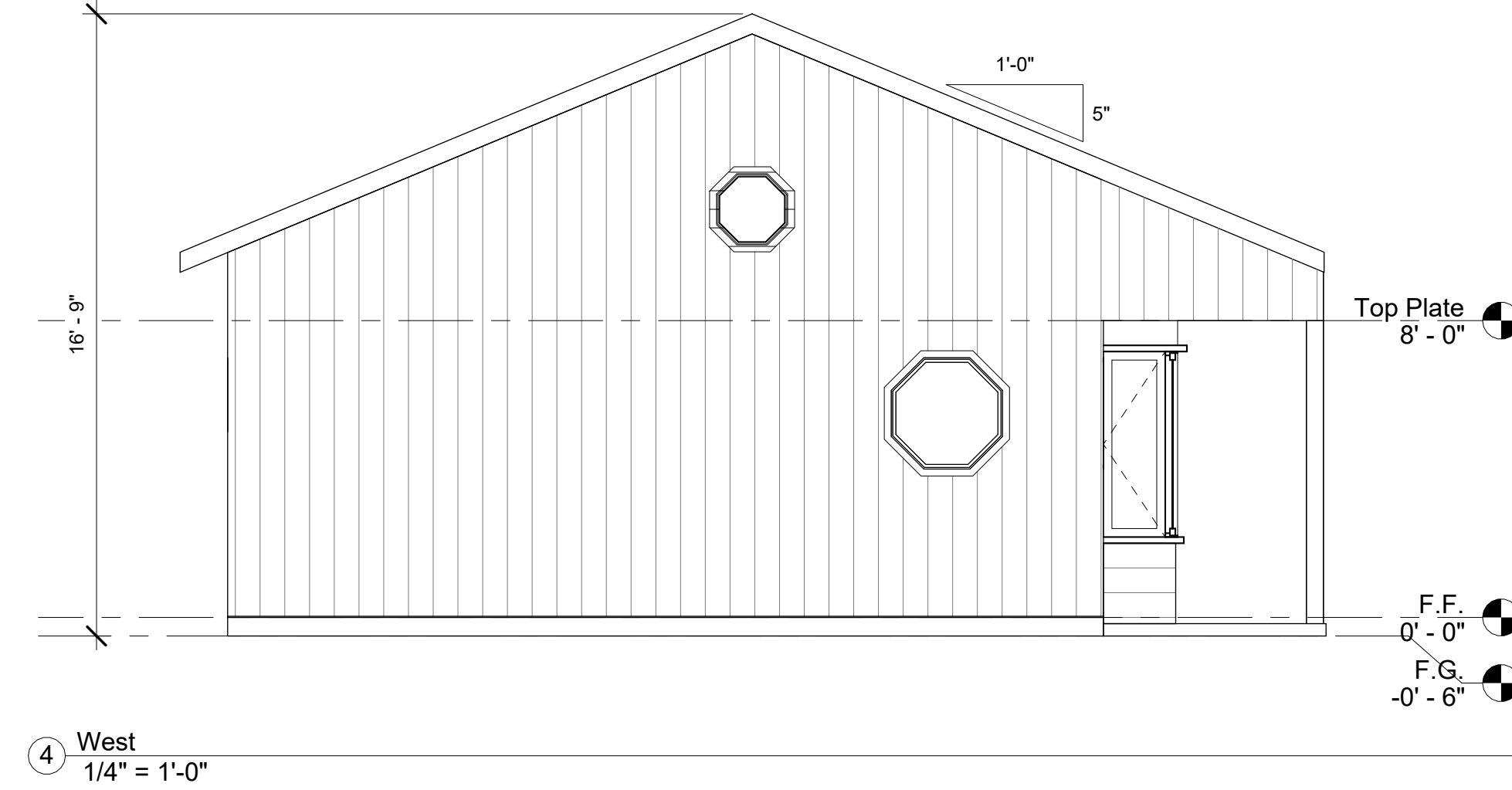
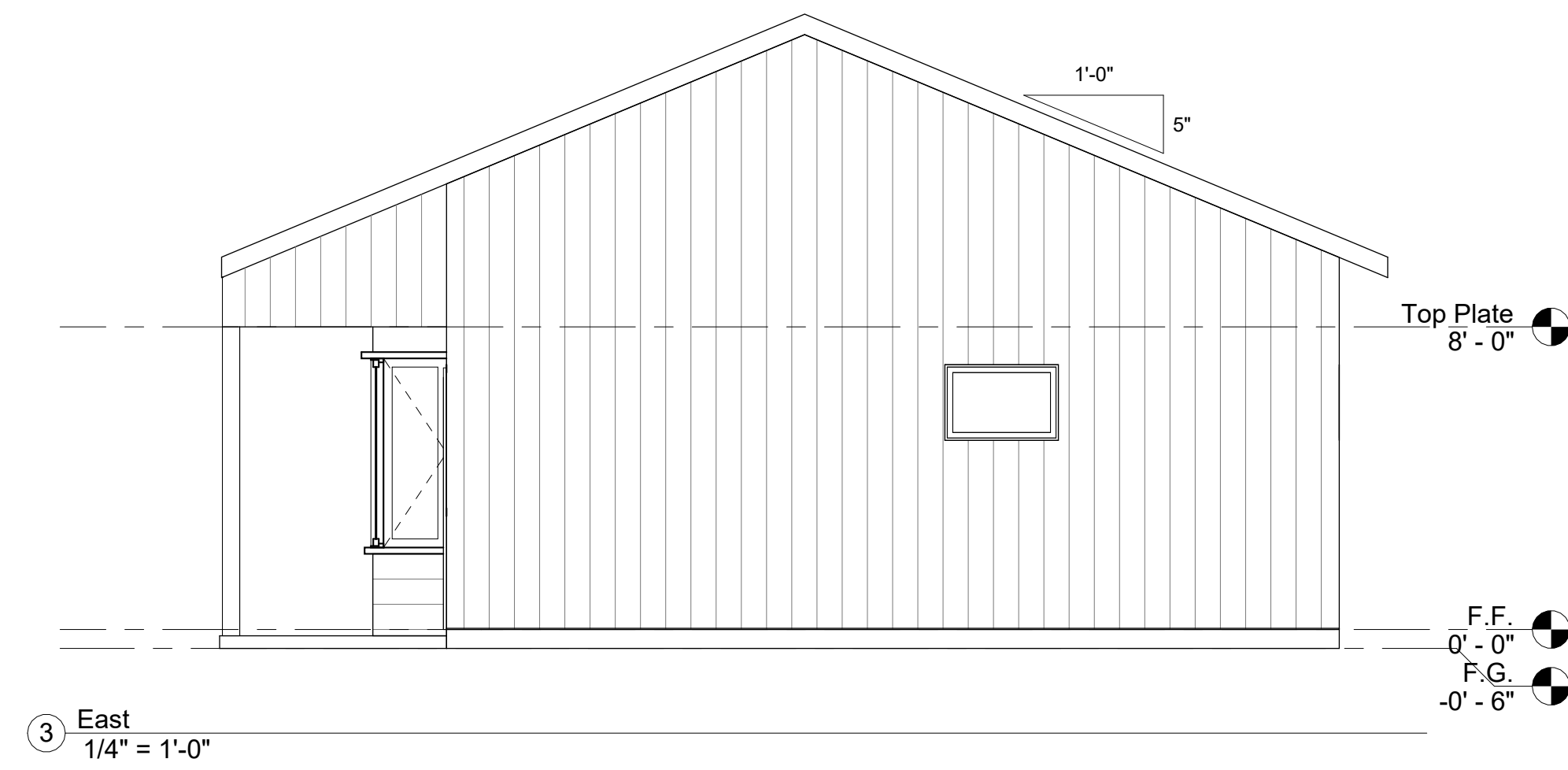
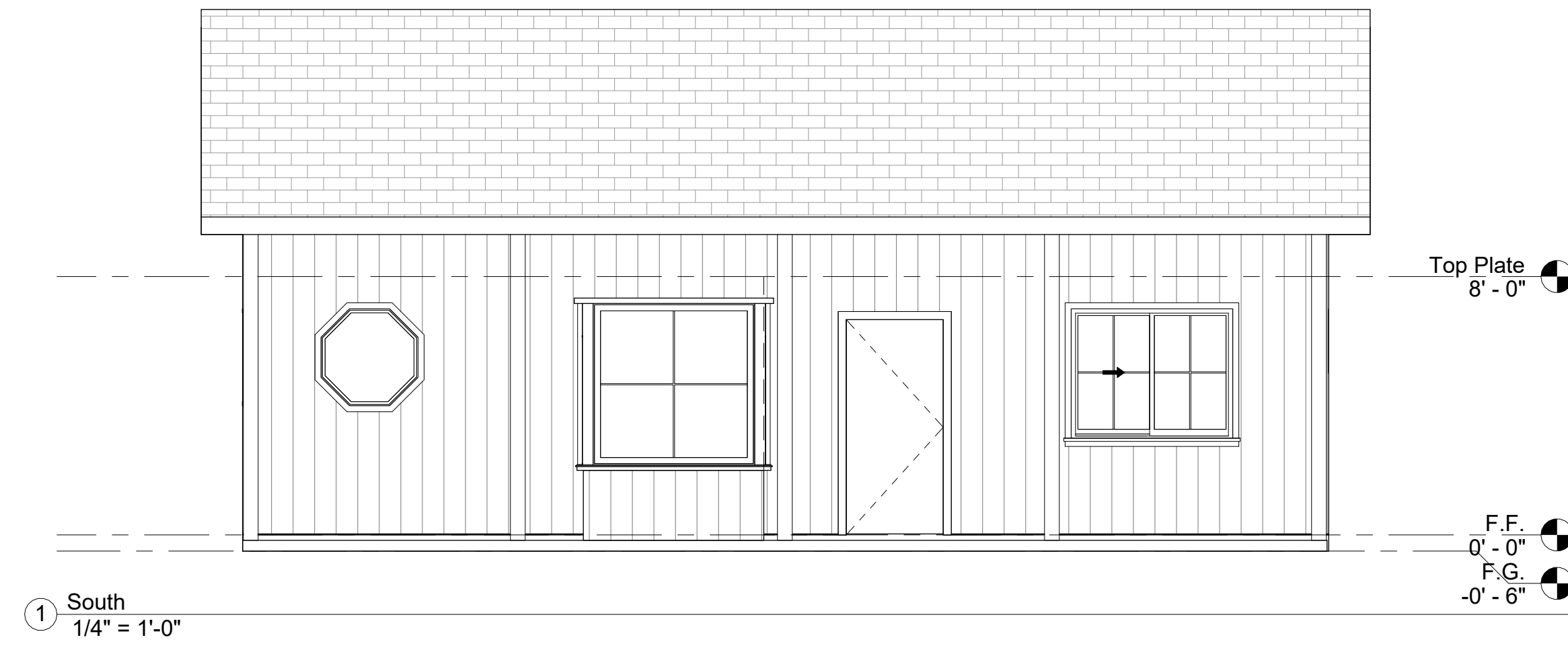
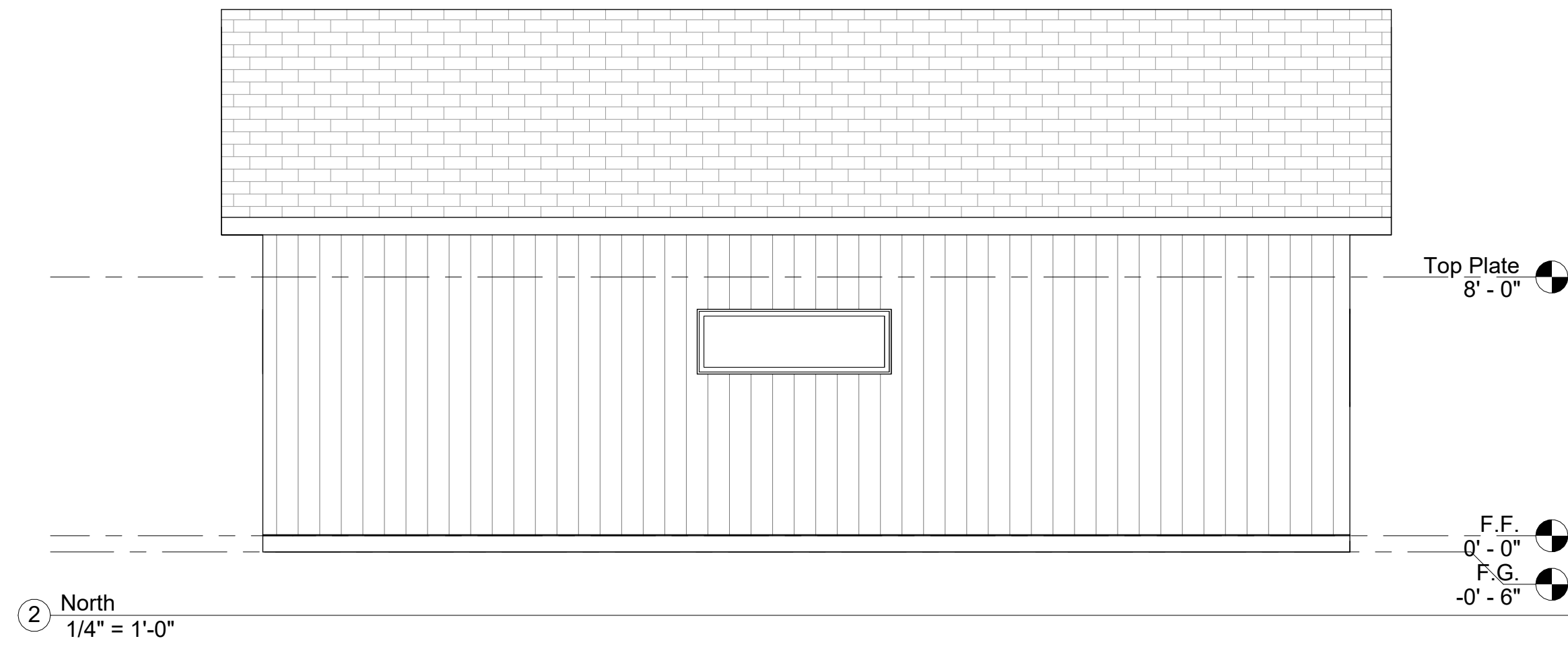
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 www.nevahomedesign.com



FLOOR PLAN  
 A NEW GUEST HOUSE for  
 STEVE & KIM HENDRICKS

DATE: 08-2021	SHEET NUMBER: A-2
JOB NO: 2109	
PROJECT LOCATION: 3075 Holly Ln	
Worksheet: 08/21/21	



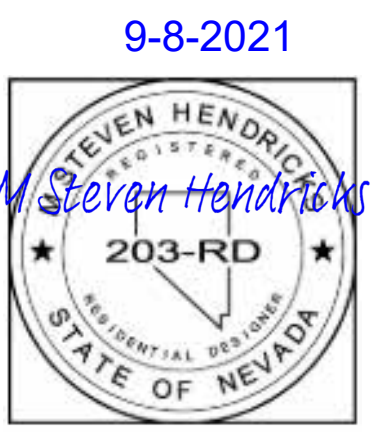
- 1 ASPHALT SHINGLES:  
MATCH (E) STYLE & COLOR
- 2 SIDING:  
MATCH (E) STYLE & COLOR
- 3 WINDOWS: "AMSCO" VINYL  
MATCH (E) COLOR
- 4 FASCIA:  
PAINT TO MATCH (E) COLOR

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Reno, NV, 89511

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ELEVATIONS  
A NEW GUEST HOUSE for  
STEVE & KIM HENDRICKS

DATE: 9-8-2021  
JOB NO.: 2199  
PROJECT LOCATION:  
3075 Holly Ln.  
Washoe Valley, NV

SHEET NUMBER  
A-3