



Elmore County Land Use & Building Department

2280 American Legion Blvd, Mountain Home, ID 83647
Phone: (208) 587-2142ext. 502 Fax: (208) 587-2120

Application for a Comprehensive Plan Amendment \$750 + Additional Consult Fees

This application must be typed or filled out in ink. Please use additional sheets if necessary. The Land Use & Building Department does not accept faxed applications. Please refer to Title 7 Chapter 3 Section 7-3-16 of the Elmore County Zoning and Development Ordinance and Idaho Statute 67-6509 for Comprehensive Plan Amendment procedures.

Applicant:

Name _____ **Phone/Fax/Email** _____

Street Address _____ **City, State, Zip** _____

Property Owner(s):

Name _____ **Phone/Fax/Email** _____

Street Address _____ **City, State, Zip** _____

1. Attach and reference a statement/narrative of all relevant factors and conditions pertaining to the request including why the amendment is necessary. State how the proposed amendment relates to the availability of public facilities, and compatibility with the surrounding area. State how the amendment will not be detrimental to the public health, safety and welfare of the County. Provide a redlined copy of the proposed changes to the Comprehensive Plan. If an amendment pertains to a certain piece of property or an amendment is requested to one of the Comprehensive Plan Maps please complete the following:

2. Legal Description of property: _____

3. Current Land Use: _____ Proposed Land Use: _____

4. Adjacent properties have the following Zoning and Land uses:

North zoning designation: _____ Uses: _____

East zoning designation: _____ Uses: _____

South zoning designation: _____ Uses: _____

West zoning designation: _____ Uses: _____

Maps for items 4 through 16 may be combined provide clarity is maintained.

5. Are there any know hazards on or near the property (such as canals or watercourses, hazardous material spills, soil/water contamination, etc.)? yes no If yes, describe and provide exact location including map designating the site and identify hazard: _____

6. Are there hazardous materials and/or or wastes involved in the existing operation, the proposed operation, and/or generated off site and brought onto the property? yes no If yes, describe and provide exact location including a map designating the site and identify materials and/or waste:

7. Is any part of this property located within a floodway or floodplain? yes no

Floodplain map number: _____ Provide floodplain map with site indicated.

8. Is any part of this property located within an area of city impact? yes no If yes, include map designating the site.

9. Is any part of this property located within an airport hazard zone? yes no If yes, include map designating the site.

10. Are there any special conditions, such as hillside, area of critical concern, community development overlay, wildlife habitat, etc., associated with this property? yes no

11. Include 15 copies of a vicinity map at a scale of 1" = 100' and on 8.5" X 11" reduction that includes but is not limited to the following:

- _____ Closest identifiable community (Mtn Home, Hammett, etc) or landmark (river, mtn, etc.)
- _____ Property lines.
- _____ Thoroughfares.
- _____ Existing and proposed zoning.
- _____ Zoning of surrounding property.
- _____ Other items as required by the Director.

12. Include 15 copies of a contour map at a scale of 1" equals 100' and one 8½" x 11" reduction with contour lines at 5' intervals for 10% or less land sloping and at 2' intervals for 10% or more land sloping.

13. Include 15 copies of a complete site plan at a scale of 1" equals 100' and one 8½"x 11" reduction showing the following:

- _____ Scale; north; arrow; applicants and property owners names; plan preparer; project; legal description.
- _____ Length in feet of property boundary(ies) and size (acreage and square feet) of property.
- _____ All existing structures which will remain and proposed structures, labeled as to existing and proposed uses and structures identified (shop, barn, shed, etc).
- _____ Existing vegetation, labeled as to remain or be removed

____ Locations, widths, and surface types of all existing and proposed adjacent and on-site streets/roads.

____ Locations, widths, and names of rights-of-way, easements, watercourses, etc.

____ Locations and sizes of existing and proposed loading areas, docks, ramps, parking areas with stalls shown.

14. Submission with this application of an Environmental Impact Statement (EIS) or an Environmental Assessment (EA) may be required at the discretion of the Land Use and Building Director, Planning and Zoning Commission or Board of County Commissioners.

15. Any additional information as required by the Director, Commission or Board.

16. Application shall include a list of property owners or purchasers of record and their addresses within a minimum 1000' radius of the entire property to be rezoned or for which the amendment will apply. The Director may extend the radius due to the scope of the project or if the project is in sparsely populated areas. Said radius shall be 15 miles in the M2, Heavy Industrial, Zone (Simco Road industrial area). Said list shall be obtained from the Land Use and Building Department.

*Radius extended to _____ miles/feet.

The owner and/or applicant affirms:

- (1) This application is completed in its entirety to include all required information and the information contained herein is true and correct as of the date it is received in the Land Use & Building Department
- (2) This application must be submitted with a development agreement application.
- (3) The applicant also verifies that all information contained herein is true and correct and that the application is complete. _____ (initial) The applicant understands his/her/their, or a representative having authority to legally bind the applicant, attendance at any hearing/meeting for which their application is on an agenda is mandatory. The applicant understands failure to attend any such meeting/hearing may at best result in a delay in any decision or may cancel the public hearing.
- (4) A neighborhood meeting must be conducted prior to submitting the application. Requirements for neighborhood meetings are outline in the Elmore County Zoning and Development Ordinance Title 7 Chapter 3 Section 7-3-3.
- (5) A public hearing will be scheduled once the Director accepts and deems the application complete. Incomplete applications will be returned to the applicant. The Land Use & Building Department **will not** hold applications indefinitely at the applicant's request. The applicant agrees to pay all current fees at the time the application is accepted and deemed complete by the director.
- (6) By signing this application, the applicant agrees to pay all fees incurred by County consultants including but not limited to the County Engineer, County Surveyor and Legal Counsel.
- (7) By signing this application, the applicant agrees to pay all extra fees incurred by the County for time, postage, mileage and publication of this application.

Property Owner Signature Date

Applicant Signature Date

Agency Comments & Signatures

The agency signatures below do not guarantee approval from the Elmore County Land Use & Building Department Director, Elmore County Planning and Zoning Commission or Elmore County Board of Commissioners. The agencies listed below will be notified of any public hearing. Elmore County Land Use & Building Staff will inform the applicant of the desired agency signatures prior to application submittal. The signature from the Highway District will only approve the access point for the private road. The Highway District may have additional requirements or comments for future development.

➤ **Central District Health:** _____
(208-580-6003)

Comments: _____

➤ **Highway District:** _____
(MHHD 208-587-3211) (GFHD 208-366-7744) (AHD 208-864-2115)

Comments: _____

➤ **Fire District:** _____
(MHRFD 208-587-2117) (Oasis 208-796-2115) (GFFD 208-599-0000) (BGRFD 208-834-2511) (AFD 208-864-2182)

Comments: _____

For Administrative Use Only

File Number: CPA- _____

Fee: \$750+Additional Consult Fees _____ Date Paid: _____

Receipt Number: _____

Date Accepted: _____ By Director: _____

Referral Needed: Y / N. If yes, what? _____