

*This institution is an equal opportunity provider*  
City of New Meadows \* P.O. Box 324 \* New Meadows, Idaho 83654  
Phone (208) 347-2171 \* Fax (208) 347-2384

July 17, 2014

Bill Brown  
PO Box 325  
New Meadows, ID 83654

Mr. Brown –

Thank you for contacting New Meadows City Hall in reference to your idea of creating an automobile salvage / wreck yard off of South End Road.

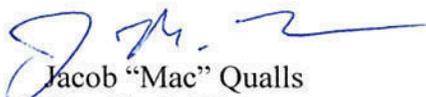
If the property is located within the Industrial Zone identified on the Official New Meadows City Zoning Map, then your application for the salvage yard is considered a conditional use and would need to follow the New Meadows Zoning Code and Idaho Land Use Law.

Assuming that the property is the old lot that was previously used by ABT Towing, Denny Buys – this property had been zoned Residential-3 and currently is zoned as such. A Zoning Amendment would need to be applied for, again following the New Meadows Zoning Code and Idaho Land Use Law.

The New Meadows Zoning Code can be found online a [www.newmeadowssidaho.us](http://www.newmeadowssidaho.us). I have included the following:

- Zone Change Application
- Conditional Use Permit Application
- Section 7 – R-3 Residential District
- Section 11 – Industrial District
- Section 13 - Conditional Use Permits
- Section 20 – Amendments
- Zoning Map & Zoning Map Ordinance
- Resolution 210-2014 Land Use Related Hearing Procedures

Thanks!

  
Jacob "Mac" Qualls  
City Clerk / Treasurer

CC: P&Z Commission, New Meadows City Council, New Meadows City Attorney, Don Horton,  
New Meadows Public Works

# City of New Meadows Application for Zone Change or Amendment / Annexation / Subdivision / P.U.D.

Name of Development: \_\_\_\_\_ Date: \_\_\_\_\_  
 Name of Developer: \_\_\_\_\_ Name of Owner: \_\_\_\_\_  
 Contact Phone #: \_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Contact Phone #: \_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_

Reason for Application:  Zone Change  Zone Amendment  Annexation  Subdivision  PUD  
 Legal Description of Property: \_\_\_\_\_  
 Current Zoning of Property: \_\_\_\_\_

APPLICATION PROCEDURE: At a minimum, the application shall contain the following information before application is to be accepted:

1.  Name, address and phone number of applicant
2.  Name, address and phone number of owner or stake holder
3.  Legal Description of the property
4.  Description of existing use
5.  Description of proposed use
6.  Site Plan (drawn to scale which shows the property that is under consideration, location of all improvements and the specific information concerning the request)
7.  Brief narrative describing the development
8.  Certificate of Ownership (the certification of a reputable Title Insurance Company licensed under the laws of the State of Idaho as to the ownership of the property and of any interest shown therein of record.)
9.  A list of all property owners and their mailing address within a 300 foot radius from external property boundaries of the subject property. (This information must be from a licensed Title Agency in the State of Idaho)
10.  Elevations of each building site (if applicable)
11.  Determination of flood plain limits
12.  Description of water course alterations or diversion structures (if applicable)
13.  Certified by a registered professional engineer that flood proofing and elevations are correct and comply with Section 5 of Ordinance #288-04
14.  Availability of public facilities such as streets, sewage, water, etc. to support the proposed uses
15.  Compatibility of the allowable uses with the surrounding areas
16.  Notarized Affidavit of Legal Interest (if applicable)
17.  ALL applicable application fees (applicant to be invoiced for all postage, advertisements, legal review, engineering review during the process)

Description	Fee	Fee Collected (Official Use Only)
Zone Change or Amendment	\$750	
Subdivision Pre-Application	\$100	
Subdivision Preliminary Plat 9 or less	\$750 + \$10 per lot	
Subdivision Preliminary Plat 10 or more	\$1500 + \$10 per lot	
Subdivision Final Plat	All Costs Incurred	
P.U.D. <10	\$500 + \$10 per lot	
P.U.D. >10	\$1000 + \$10 per lot	
Annexation	\$750	

The date of the public hearing will be established by the Administrator upon acceptance of a completed application and review.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# City of New Meadows Application for Zone Change or Amendment / Annexation / Subdivision / P.U.D.

## CHECKLIST

*(TO BE COMPLETED BY ADMINISTRATOR)*

	Yes	No
1. Application:		
a) Letter of explanation	<input type="checkbox"/>	<input type="checkbox"/>
b) Name of applicant	<input type="checkbox"/>	<input type="checkbox"/>
c) Legal Description	<input type="checkbox"/>	<input type="checkbox"/>
d) Map of Area	<input type="checkbox"/>	<input type="checkbox"/>
e) Drawings to Scale showing shape and size	<input type="checkbox"/>	<input type="checkbox"/>
f) Signatures	<input type="checkbox"/>	<input type="checkbox"/>
g) Filing Fee	<input type="checkbox"/>	<input type="checkbox"/>
h) Affidavit of Legal Interest	<input type="checkbox"/>	<input type="checkbox"/>
2. Lot Size-Specific Condition	<input type="checkbox"/>	<input type="checkbox"/>
3. Height, size or location of buildings – Specific Conditions	<input type="checkbox"/>	<input type="checkbox"/>
4. Set Back – Specific Conditions	<input type="checkbox"/>	<input type="checkbox"/>
5. Vehicle Access Points	<input type="checkbox"/>	<input type="checkbox"/>
6. Street Modification	<input type="checkbox"/>	<input type="checkbox"/>
7. Off Street Parking	<input type="checkbox"/>	<input type="checkbox"/>
8. Signs-Specific Condition	<input type="checkbox"/>	<input type="checkbox"/>
9. Diking, fencing, screening landscaping or other facilities to protect adjacent property	<input type="checkbox"/>	<input type="checkbox"/>
10. Open Spaces – Specific Conditions	<input type="checkbox"/>	<input type="checkbox"/>
11. Site Report form S. W. District Health with appropriate written approval	<input type="checkbox"/>	<input type="checkbox"/>
12. Written approval from regulatory agencies	<input type="checkbox"/>	<input type="checkbox"/>
13. Location of existing or proposed Public Utilities	<input type="checkbox"/>	<input type="checkbox"/>
14. Copy of Restrictive Covenants	<input type="checkbox"/>	<input type="checkbox"/>
15. Certified Letters to Adjacent property	<input type="checkbox"/>	<input type="checkbox"/>
16. Fire Protection (Uniform Fire Code)	<input type="checkbox"/>	<input type="checkbox"/>
17. Home-Based Occupations		
a) Participation/Employees	<input type="checkbox"/>	<input type="checkbox"/>
b) Character of activity	<input type="checkbox"/>	<input type="checkbox"/>
c) On premise client/patron contact	<input type="checkbox"/>	<input type="checkbox"/>
d) Traffic generation	<input type="checkbox"/>	<input type="checkbox"/>
e) Noise	<input type="checkbox"/>	<input type="checkbox"/>
f) Equipment / Restriction	<input type="checkbox"/>	<input type="checkbox"/>
g) Parking	<input type="checkbox"/>	<input type="checkbox"/>
h) Prohibited Uses	<input type="checkbox"/>	<input type="checkbox"/>

Notes: \_\_\_\_\_

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# City of New Meadows

## Conditional Use Permit Application

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Name: \_\_\_\_\_  
 Month/Day/Year (Applicant)

Mailing Address: \_\_\_\_\_

Phone: \_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_  
 (Owner or Stakeholder of Valid Option)

Mailing Address: \_\_\_\_\_

Phone: \_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Location: \_\_\_\_\_ Lot/Block Number: \_\_\_\_\_

**APPLICATION PROCEDURE:** At a minimum, the application shall contain the following information before application is to be accepted:

1.  Name, address and phone number of applicant
2.  Name, address and phone number of owner or stake holder
3.  Legal Description of the property
4.  Description of existing use
5.  Zone District
6.  Description of proposed variance or conditional use
7.  Site Plan (drawn to scale which shows the property that is under consideration, location of all improvements and the specific information concerning the request)
8.  Objective narrative stating the reasoning for a variance or conditional use and the justification of the request
9.  Certificate of Ownership (the certification of a reputable Title Insurance Company licensed under the laws of the State of Idaho as to the ownership of the property and of any interest shown therein of record.)
10.  A list of all property owners and their mailing within a 300 foot radius from external property boundaries of the subject property. (This information must be provided by and certified to by a licensed Title Company doing business in Adams County)
11.  ALL applicable application fees (applicant to be invoiced for all postage, advertisements, legal review, engineering review after process)

	Fee:	Paid:
Conditional Use Permit-Residential	\$100	
Conditional Use Permit-Non-Residential	\$250	

The date of the public hearing will be established by the Administrator upon acceptance of a completed application and review.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner of Record Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# City of New Meadows

## Conditional Use Permit Application

### CONDITIONAL USE CHECKLIST (TO BE COMPLETED BY ADMINISTRATOR)

	Yes	No
1. Application:		
a) Letter of explanation	<input type="checkbox"/>	<input type="checkbox"/>
b) Name of applicant	<input type="checkbox"/>	<input type="checkbox"/>
c) Legal Description	<input type="checkbox"/>	<input type="checkbox"/>
d) Map of Area	<input type="checkbox"/>	<input type="checkbox"/>
e) Drawings to Scale showing shape and size	<input type="checkbox"/>	<input type="checkbox"/>
f) Signatures	<input type="checkbox"/>	<input type="checkbox"/>
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2. Lot Size-Specific Condition	<input type="checkbox"/>	<input type="checkbox"/>
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5. Vehicle Access Points	<input type="checkbox"/>	<input type="checkbox"/>
6. Street Modification	<input type="checkbox"/>	<input type="checkbox"/>
7. Off Street Parking	<input type="checkbox"/>	<input type="checkbox"/>
8. Signs-Specific Condition	<input type="checkbox"/>	<input type="checkbox"/>
9. Diking, fencing, screening landscaping or other facilities to protect adjacent property	<input type="checkbox"/>	<input type="checkbox"/>
10. Open Spaces – Specific Conditions	<input type="checkbox"/>	<input type="checkbox"/>
11. Site Report form S. W. District Health with appropriate written approval	<input type="checkbox"/>	<input type="checkbox"/>
12. Written approval from regulatory agencies	<input type="checkbox"/>	<input type="checkbox"/>
13. Location of existing or proposed Public Utilities	<input type="checkbox"/>	<input type="checkbox"/>
14. Copy of Restrictive Covenants	<input type="checkbox"/>	<input type="checkbox"/>
15. Notification to Adjacent property owners by Clerk	<input type="checkbox"/>	<input type="checkbox"/>
16. Fire Protection (Uniform Fire Code)	<input type="checkbox"/>	<input type="checkbox"/>
17. Home-Based Occupations		
a) Participation/Employees	<input type="checkbox"/>	<input type="checkbox"/>
b) Character of activity	<input type="checkbox"/>	<input type="checkbox"/>
c) On premise client/patron contact	<input type="checkbox"/>	<input type="checkbox"/>
d) Traffic generation	<input type="checkbox"/>	<input type="checkbox"/>
e) Noise	<input type="checkbox"/>	<input type="checkbox"/>
f) Equipment / Restriction	<input type="checkbox"/>	<input type="checkbox"/>
g) Parking	<input type="checkbox"/>	<input type="checkbox"/>
h) Prohibited Uses	<input type="checkbox"/>	<input type="checkbox"/>

Notes: \_\_\_\_\_

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