

# City of New Meadows Short Term RV Use Permit Application

**Permit Type:**

☐

Emergency

☐

Transitional

☐

Displacement

☐

Vacation

**Applicant Information:**

Applicant Name: \_\_\_\_\_

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

Physical Address for RV: \_\_\_\_\_

Applicant Phone Number: \_\_\_\_\_

RV License #: \_\_\_\_\_

RV License Expiration Date: \_\_\_\_\_

**Property Owner Information:**

☐

Same as applicant

Name: \_\_\_\_\_

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

Physical Address: \_\_\_\_\_

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

Property Zone: \_\_\_\_\_

**Complete the section below that pertains to the permit you are applying for.**

**E** Emergency Permit: due to: ☐ Fire ☐ Flood ☐ Wind ☐ Earthquake ☐ Other: \_\_\_\_\_

RV Location: ☐ My Property ☐ The Property of: \_\_\_\_\_

Please Initial:

\_\_\_\_ I have provided proof of the emergency (photos, contracts for repair, maintenance, etc.)

\_\_\_\_ I have provided written permission to place RV on a property other than my own.

\_\_\_\_ I understand the permit is valid for 30-90 days with one extension, if necessary.

\_\_\_\_ My RV will be occupied only by myself and immediate family.

\_\_\_\_ My RV will not be parked on any street.

\_\_\_\_ My RV will not be parked in any easement from November 1st - April 30th.

**T** Transitional Permit: (residing in RV while building a home)

Please Initial:

\_\_\_\_ I have provided a copy of my building permit.

\_\_\_\_ I have provided a copy of my building contract or manufactured home purchase agreement.

\_\_\_\_ I understand the permit is valid for 90-180 days with one 90-day extension, if necessary.

\_\_\_\_ My RV will be occupied only by myself and immediate family.

\_\_\_\_ My RV will not be parked on any street.

\_\_\_\_ My RV will not be parked in any easement from November 1st - April 30th.

**V** Vacation Permit: (family / friends residing in RV on my property for up to 14 days per visit)

Please Initial:

- \_\_\_\_ I have read, understand, and will comply with city code regarding RVs in the city limits.
- \_\_\_\_ This permit shall allow for up to 30 days of vacation RV use on my property in a 1-year period.
- \_\_\_\_ Visitors shall not remain for more than 14 consecutive days.
- \_\_\_\_ My property is set up for RV vacation use as per the zoning code.
- \_\_\_\_ The RV will not be parked on any street or easement.
- \_\_\_\_ The RV will not be connected to the City sewer system.
- \_\_\_\_ I will acquire an updated vacation permit each time an RV is occupied on my property.

**D** Displacement Permit: (unable to find adequate housing)

Please Initial:

- \_\_\_\_ My RV design and plan was approved by Planning & Zoning.
- \_\_\_\_ My RV will be placed in a residential zone.
- \_\_\_\_ I have a regular monthly source of income.
- \_\_\_\_ I have provided a statement of employment from a local employer or proof of income.
- \_\_\_\_ My RV is fully operational & will be tied to the City's water and sewer system.
- \_\_\_\_ My RV will comply with setbacks on the property.
- \_\_\_\_ My RV will be placed on a level pad of concrete or gravel.
- \_\_\_\_ I understand this permit is to be renewed every 90 days.
- \_\_\_\_ I will verify my housing search and income with each renewal.

Please provide a diagram showing where on the property the RV will be placed. Include current structures, cross roads, setbacks, and any other pertinent information: ☐ separate sheet provided

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## AFFIDAVIT OF LEGAL INTEREST

**(If required)**

[illegible]

I, \_\_\_\_\_, residing at \_\_\_\_\_,  
(name) (street address)  
\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, being first duly  
(city) (state) (zip code)

sworn upon oath, depose and say:

1. That I am the record owner of the property described on the attached, or have provided a purchase contract, and I grant my permission to:

\_\_\_\_\_, \_\_\_\_\_ to place an RV on  
(name) (address)

my property per the terms of this application and the Short Term RV Use Ordinance.

2. I agree to indemnify, defend and hold the City of New Meadows and its employees harmless from any claim or liability resulting from any dispute as to the statements contained herein or as to the ownership of the property which is the subject of the application.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

(signature)

SUBSCRIBED AND SWORN to before me the day and year first above written.

Notary Public of Idaho

Residing at:

My commission expires:

Receipt #

# City of New Meadows Short Term RV Use Permit Application

An RV Short Term Use Permit may be issued subject to the regulations contained in the New Meadows City Code and is hereby agreed that the use of RVs on private property be in accordance with the specifications stated in the City code and this application.

Applicant Signature: \_\_\_\_\_ Property Owner Signature: \_\_\_\_\_

## \*Office Use Only\*

Date Received: \_\_\_\_\_ Staff Initials: \_\_\_\_\_ Application Complete: ☐ Yes ☐ No  
Application ☐ Approved ☐ Denied Permit # Issued: \_\_\_\_\_  
Fee Paid \_\_\_\_\_ ☐ No Fee Receipt #: \_\_\_\_\_ Permit Expiration Date: \_\_\_\_\_

### **EMERGENCY**

30-90 days (one 30-90 day extension)

Date of initial Permit Issuance: \_\_\_\_\_  
Expiration Date of Permit: \_\_\_\_\_

Date of Extension: \_\_\_\_\_  
Expiration of Extension: \_\_\_\_\_

### **TRANSITIONAL**

90-180 days (one 90 day extension)

Date of initial Permit Issuance: \_\_\_\_\_  
Expiration Date of Permit: \_\_\_\_\_

Date of Extension: \_\_\_\_\_  
Expiration of Extension: \_\_\_\_\_

### **VACATION**

30 days annually - \$100 annually - non-refundable

Date of initial Permit Issuance: \_\_\_\_\_  
Expiration Date of Permit: \_\_\_\_\_

Dates of use: \_\_\_\_\_  
Dates of use: \_\_\_\_\_

Dates of use: \_\_\_\_\_  
Dates of use: \_\_\_\_\_

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

### **DISPLACEMENT**

90 days (90 day extension) Sunsets 2021 - \$300 per permit

Date of Council Approval: \_\_\_\_\_  
Date of initial Permit Issuance: \_\_\_\_\_  
Expiration Date of Permit: \_\_\_\_\_

Date of Council Approval: \_\_\_\_\_  
Date of Extension: \_\_\_\_\_  
Expiration of Extension: \_\_\_\_\_

Date of Council Approval: \_\_\_\_\_  
Date of Extension: \_\_\_\_\_  
Expiration of Extension: \_\_\_\_\_