**Carson City Planning Division**
**108 E. Proctor Street• Carson City NV 89701**
**Phone: (775) 887-2180 • E-mail:** planning@carson.org

**FOR OFFICE USE ONLY:**

# LAND DIVISION MAP

**FEE: $750.00**

☐ Application Form (1 original + 5 copies)
☐ Written Project Description
☐ 6 folded copies of Tentative Map (1 Original + 5 copies)
☐ Fee (to be paid at the time of submittal)
☐ Proof of taxes paid to date
☐ CD containing application data (pdf format)

**Application Reviewed and Received By:**

_____

**Submittal Deadline: See attached PC application submittal schedule.**

## FILE # LDM - 12 -

**APPLICANT**

**MAILING ADDRESS, CITY, STATE, ZIP**

**PHONE #** **FAX #**

**E-MAIL ADDRESS**

**ENGINEER**

**MAILING ADDRESS, CITY, STATE ZIP**

**PHONE #** **FAX #**

| Project's Assessor Parcel Number(s): | Street Address | ZIP Code |
|---|---|---|

| Project's Current Master Plan Designation | Project's Current Zoning | Nearest Major Cross Street(s) |
|---|---|---|

1. **REQUEST:** In accordance with the provisions of Title 17 of the Carson City Municipal Code, an application is hereby made for a Land Division Map on property situated at: _____

2. If the Land Division Map calls for development over a period of years, a schedule showing recordation dates for the various phases of the final maps is shown below: _____

3. **ACKNOWLEDGMENT OF OWNER/APPLICANT:** (a) I certify that the foregoing statements are true and correct to the best of my knowledge and belief. (b) I agree to fulfill all conditions established by the Board of Supervisors.

Owner/Applicant's Signature Date

PROPERTY OWNER'S AFFIDAVIT

I, _____, being duly deposed, do hereby affirm that I am the record owner of the subject property, and that I have knowledge of, and I agree to, the filing of this application.

Signature Address Date

Use additional page(s) if necessary for other names.

STATE OF NEVADA )
COUNTY )

On_____, 2_____, _____, personally appeared before me, a notary public, personally known (or proved) to me to be the person whose name is subscribed to the foregoing document and who acknowledged to me that he/she executed the foregoing document.

Notary Public

**NOTE:** If your project is located within the historic district, airport area, or downtown area, it may need to be scheduled before the Historic Resources Commission, the Airport Authority, and/or the Redevelopment Authority Citizens Committee prior to being scheduled for review by the Planning Commission. Planning Division personnel can help you make the above determination.

# LAND DIVISION MAP
# SUBMITTAL CHECKLIST

The tentative submittal packet must include all of the following information. Packets which do not contain this information may not be scheduled on the next available Planning Commission agenda.

It is up to the applicant to ensure that all required information is submitted in order for staff and the Planning Commission to make a proper recommendation.

| YES | NO | | |
|---|---|---|---|
| ____ | ____ | 1. | The name and address of the owner, surveyor, date of map, and surveyor's stamp. |
| ____ | ____ | 2. | Map entitled "Tentative Map of Division into Large Parcels" placed in the lower right-hand corner. |
| ____ | ____ | 3. | Adjacent land uses, zoning, and ownership abutting the project. |
| ____ | ____ | 4. | North arrow, scale and all sheets numbered. |
| ____ | ____ | 5. | Vicinity map. |
| ____ | ____ | 6. | Location of existing structures or note stating no structures. |
| ____ | ____ | 7. | Location of all existing wells, septic tanks, and leach fields or a note indicating none on site. |
| ____ | ____ | 8. | Structure setbacks to be noted on plat. |
| ____ | ____ | 9. | The development shall be described by 40 acre subdivision section, township and range. |
| ____ | ____ | 10. | The location, size and acreage of each lot and total acreage of the land to be divided. |
| ____ | ____ | 11. | The lot layout and lot lines of the proposed land division. |
| ____ | ____ | 12. | Number, size, square footage, and use of proposed parcels. Parcels are to be numbered consecutively and the dimensions of all parcels are to be shown. |
| ____ | ____ | 13. | Description of the land and the owner's interest in the land proposed to be divided by an affidavit of ownership. |
| ____ | ____ | 14. | Existing and proposed circulation patterns including the location of all public and private streets, name and width of streets and the location of adjoining streets. |
| ____ | ____ | 15. | Locations, widths and names of all roads or easements of access which exist or are proposed. |
| ____ | ____ | 16. | Size and location of all public utility easements proposed and existing. |
| ____ | ____ | 17. | Existing roads or access easements not intended to be dedicated. |
| ____ | ____ | 18. | Any existing easements for irrigation or drainage, and any normally continuously flowing watercourses. |

| YES | NO | |
|---|---|---|
| ____ | ____ | 19. Location of all natural drainage features to be shown. |
| ____ | ____ | 20. Show site topography. |
| ____ | ____ | 21. An indication of methods of sewage disposition to be used. |
| ____ | ____ | 22. A map showing a 100-year flood plan, as determined by recognized methods, for those areas subject to flooding; show earthquake fault lines through the proposed development. |
| ____ | ____ | 23. Certificates per Carson City and Nevada Revised Statutes (NRS) requirements. |
| ____ | ____ | 24. Proof that no tax is delinquent by placing a certificate by the city treasurer to this effect on the plat. |
| ____ | ____ | 25. Application complete: _____ Date: _____ |
| ____ | ____ | 26. Assessor's parcel numbers will be issued within seven working days from the recording of the final map. |

**NOTE:** It is the applicant's responsibility to ensure all requirements of NRS 278.4713 through 278.4725 are met.