

NEVADA COUNTY COMMUNITY DEVELOPMENT AGENCY
PLANNING DEPARTMENT
ERIC ROOD ADMINISTRATION BUILDING
950 Maidu Avenue, Suite 170
Nevada City, California 95959-8617
Phone: (530) 265-1222 FAX: (530) 265-9851

**REQUEST FOR AN EARLY CONSULTATION WITH THE
FIRE PROTECTION PLANNER**

A Fire Planner Consultation is a formal request for a consultation and/or site visit from the County CDF Fire Protection Planner. The purpose of an early consultation is to assist the applicant in developing a fire protection or some practical effect plan prior to submitting a formal land use or building permit application. The information you submit in this request will assist the Fire Protection Planner in preparing for your consultation. The Fire Protection Planner will contact you within 10 working days to arrange for an appointment.

Applications must include the following:

- The attached Land Use Application form, signed and completed.
- The required County filing fees, based on most current fee schedule.
- A project description, submitted on a separate page, typed. The project description should be as specific as possible, defining your proposal and the type of information requested. Please include the following information:
 - Distance from access point of the project to the closest through road
 - Any existing water storage on the property (water tanks, pools, ponds, etc.)
 - Number and type of structures involved (commercial, residential, agricultural, etc)
 - Travel distance from access to the project, to the closest fire station.
 - If applicable, travel distance from nearest public fire hydrant to the access for the project
 - Types of vegetation located on site (timber, oak woodlands, etc.)
- Vicinity map and/or site plan of project.

Check as applicable:

Written comments requested: Yes No

Review will be based on the information you provide, the accuracy and thoroughness of your project description, research of County records and resource documents, and a site visit if warranted. Fees for Fire Planner Consultations are established by resolution of the Board of Supervisors.

Fire Planner Consultations within the Nevada County Consolidated Fire District should be requested directly from that district and are billed at their current fees. Please contact Vern Canon, B/C Fire Marshal, at (530) 274-4707 to request a Fire Planner Consultation for properties within the Nevada County Consolidated Fire District.

**NEVADA COUNTY PLANNING DEPARTMENT
LAND USE APPLICATION**

Please print or type in black ink

Type of application(s) for which you are applying:

- | | | |
|---|---|--|
| <input type="checkbox"/> Tentative Map | <input type="checkbox"/> Ordinance Amendment | <input type="checkbox"/> Certificate of Compliance |
| <input type="checkbox"/> Use Permit | <input type="checkbox"/> Zone Change | <input type="checkbox"/> Voluntary Merger |
| <input type="checkbox"/> Development Permit | <input type="checkbox"/> General Plan Amendment | <input type="checkbox"/> Home Business |
| <input type="checkbox"/> Administrative Dev. Permit | <input type="checkbox"/> Variance | <input type="checkbox"/> Temporary Commercial Permit |
| <input type="checkbox"/> Boundary Line Adjustment | <input type="checkbox"/> Setback Easement | <input type="checkbox"/> Management Plan |
- Other (specify): **Fire Planner Consultation**

PROJECT DESCRIPTION: *see attached*

Assessor's Parcel No(s): _____

Applicant Name(s): _____

Applicant Mailing Address: _____

Telephone #: () _____ E-Mail: _____ FAX#: _____

Property Owners Full Names: _____

Property Owner Mailing Address: _____

Telephone #: () _____ E-Mail: _____ FAX#: _____

Name of Representative (if applicable): _____

Address of Representative: _____

Telephone #: () _____ E-Mail: _____ FAX#: _____

Site address(es): _____ Acreage(s): _____

Water Source: _____ Method of Sewage Disposal: _____

I hereby acknowledge that I have read the instructions for filing this application and state under penalty of perjury that the information provided on all attached documents is correct.

Signature of () Property Owner(s) or () Authorized Representative*

_____ Date: _____

_____ Date: _____

***Representative may sign application if a Letter of Authorization from the owner(s) is provided.**

**NEVADA COUNTY PLANNING DEPARTMENT
ROAD & DRIVEWAY INFORMATION FORM**

Note: A road serves more than two parcels. A driveway serves two parcels or less.

ROADS

1. List all roads that provide access to this site.

<u>ROAD NAME</u>	<u>ACTUAL WIDTH</u>	<u>RECORDED R/W WIDTH</u>
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a. _____

b. _____

2. What kind of surfacing does each road have (gravel, pavement, dirt)?

a. _____

b. _____

3. Do any of the roads have a slope in excess of 16%? If so, explain:

4. Who maintains your access road(s) (County, private Road Association, property owners)?

5. Is your road a dead-end road? If so, what is its length (to your driveway)?

DRIVEWAY

6. What is the length of your driveway from the access road? _____

7. What is the surfacing of your driveway? _____

8. Does your driveway slope exceed 16%? If so, explain:
