

Ap 2022-003

Boise County Planning and Zoning Department

413 Main Street, PO Box 1300
Idaho City, Idaho 83631
Phone: 208-392-2293
www.boisecounty.us



MASTER PUBLIC HEARING APPLICATION

RECEIVED
03 abb
MAY 02 2022

BOISE COUNTY
PLANNING & ZONING

TYPE OF APPLICATION: (PLEASE CHECK ALL THAT APPLY.)

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> APPEAL | <input type="checkbox"/> DEVELOPMENT AGREEMENT | <input type="checkbox"/> SUBDIVISION, FINAL |
| <input type="checkbox"/> COMPREHENSIVE PLAN
TEXT AMENDMENT | <input type="checkbox"/> PLANNED UNIT
DEVELOPMENT | <input type="checkbox"/> SUBDIVISION, VACATION |
| <input type="checkbox"/> COMPREHENSIVE PLAN
MAP AMENDMENT | <input type="checkbox"/> PLANNED COMMUNITY | <input type="checkbox"/> SUBDIVISION, AMENDED
PLAT |
| <input type="checkbox"/> ROAD NAME CHANGE | <input type="checkbox"/> CONDITIONAL USE PERMIT | <input type="checkbox"/> VARIANCE |
| | <input type="checkbox"/> SUBDIVISION, PRELIMINARY | <input type="checkbox"/> OTHER _____ |

HEARING BEFORE: BOARD OF COUNTY COMMISSIONERS P&Z COMMISSION

PROJECT NAME: Crowfoot Range

SITE INFORMATION:

(This information can be found on the Assessor's property information assessment sheet.)

Quarter: NE 1/4 Section: 30 Township: 6N Range: 2E Total Acres: 40.8

Subdivision Name (if applicable): Avimor Planned Community Lot _____ Block: _____

Site Address: 18454 N. McLeod Way City: Garden City

Tax Parcel Number(s): RP06N02F303060 Current Land Use: Agriculture

PROPERTY OWNER:

Name: _____

Address: _____

City: _____ State: _____

Telephone: _____ Fax: _____

Email: _____

APPLICANT:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email: _____

I consent to this application, I certify this information is correct, and allow Planning and Zoning staff to enter the property for related site inspections. I agree to indemnify, defend and hold harmless Boise County and its employees from any claim or liability resulting from any dispute as to the statements contained in this application or as to the ownership of the property, which is the subject of this application.

N/A

Signature: All Owner(s) of Record _____ Date _____

I consent to this application, I certify this information is correct, and allow Planning and Zoning staff to enter the property for related site inspections. I agree to indemnify, defend and hold harmless Boise County and its employees from any claim or liability resulting from any dispute as to the statements contained in this application or as to the ownership of the property, which is the subject of this application.

Signature: [Handwritten Signature] Date: 5-2-22

Signature: Applicant Appellant Date _____

NOTE: THIS APPLICATION MUST BE SUBMITTED WITH THE APPROPRIATE APPLICATION FORM

EXHIBIT

1

1 of 3

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NOTICE OF RECONSIDERATION or APPEAL

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The Planning and Zoning staff is available to discuss this application and answer questions. Upon receipt of the required materials the Planning & Zoning Administrator will stamp the application received and review the application for completeness. Once the application is deemed complete a public hearing will be scheduled with the Boise County Commissioners. It is recommended that the Applicant review the Unified Land Use Ordinance #2016-01 (ULO), as amended September 23, 2018, prior to submittal. This Ordinance along with application materials are located on the County website at www.boisecounty.us.

ULO #2016-01, Chapter 2, Section 2.10

Any decision or action may be appealed as set forth in this Ordinance. The appellant shall be an affected person as defined in Idaho Code §67-6521(1)(a). Any request for reconsideration or appeal must be filed on an application as provided by the Planning and Zoning Department, such request for reconsideration or appeal must identify specific deficiencies in the decision for which reconsideration or appeal is sought, and must otherwise comply with Idaho Code §67-6535(2)(b).

To expedite the review of your application, please be sure to address each of the following items.

Reconsideration or Appeal of decision by:

_____ Administrator
 X Planning and Zoning Commission
_____ Board of County Commissioners

I, Terri Pickens Manweiler, of the firm, do hereby request a reconsideration, or an appeal, of the decision issued in:

- Case Name and File Number (if applicable): Crowfoot Range CUP #2021-007
- On the following described parcel of land:
 - A) Parcel Number: RP06N02F303060
 - B) Address of Parcel (if applicable): _____
- The grounds for this reconsideration, or appeal, are: (Specifically identify the part of the written decision you disagree with AND how the Administrator, Commission, or Board erred in their decision. Attach additional sheets if necessary.)
See attached memorandum in support.

retained by

- I hereby affirm that I am a party affected by the above-mentioned decision. The address of my affected property is located in Boise County and my mailing address is 398 S. 9th St. Ste. 240, P.O. Box 915, Boise, ID 83702.

Dated: This 2 day of May, 20 22


Appellant

Reconsideration or Appeal Fees: \$300.00

PUBLIC HEARING DATE SET: _____
PUBLIC HEARING TIME: _____ LOCATION: _____

THIS BOX TO BE COMPLETED BY THE PLANNING AND ZONING DEPARTMENT	
FILE # <u>Ap 2022-003</u>	Rec'd Date: <u>5-3-2022</u>
Fee paid: <u>\$300-</u>	Date: <u>5-3-22</u>
Payment type: <u>Check</u>	Number: <u>5196</u>
Receipt #: <u>759516</u>	Are application materials attached? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
ACCEPTED BY <u>AC, JA</u>	Date: <u>17 May 2022</u>