

Boise County Planning and Zoning Department

413 Main Street, PO Box 1300

Idaho City, Idaho 83631

Phone: 208-392-2293

www.boisecounty.us



AFFIDAVIT OF LEGAL INTEREST and Letter of Authorization

_____, "Owner" whose address is _____
_____, City _____ State _____ Zip _____

As owner of property more specifically described as:

HEREBY AUTHORIZES _____ as Agent to represent and act for the Owner in making application for and receiving and accepting on Owners behalf, any permits or other action by the Boise County Board of Commissioners, Boise County Planning and Zoning Commission, Boise County Planning and Zoning Staff, and or other Boise County Departments relating to the modification, development, planning, platting, re-platting, improvements, use or occupancy of land in Boise County, Idaho. Owner agrees that; Owner is or shall be deemed conclusively to be fully aware of and to have authorized and/or made any and all representations or promises contained in said application of any Owner information in support thereof, and shall be deemed to be aware of and to have authorized any subsequent revisions, corrections or modifications to such materials. Owner acknowledges and agrees that; Owner shall be bound and shall abide by the written terms or conditions of issuance of any such named representative, whether actually delivered to Owner or not. Owner agrees that no modification, development, platted or re-platting, improvement, occupancy, or use of any structure or land involved in the application shall take place until approved by the appropriate official of Boise County, Idaho, in accordance with applicable codes and regulations.

Owner agrees to pay any fines and be liable for any other penalties arising out of failure to comply with the terms of any permit or arising out of any violation of applicable laws, codes, or regulations applicable to the action sought to be permitted by the application authorized herein.

Under penalty of perjury, the undersigned swears that the foregoing is true and , if signing on the behalf of a corporation, partnership, limited liability company or other entity, the undersigned swears that this authorization is given with the appropriate approval of such entity, if required.

OWNER:

_____ (Signature of Owner)	_____ (Print Name)	_____ (Title)
_____ (Signature of Owner)	_____ (Print Name)	_____ (Title)
_____ (Signature of Owner)	_____ (Print Name)	_____ (Title)
_____ (Secretary or Corporate Owner)	_____ (Print Name)	

NOTARY STATE OF IDAHO) ss
COUNTY OF _____) (seal)

SUBSCRIBED and sworn to before me by _____
on this ____ day of _____, 20__.

Notary Public Date
My Commission expires on: _____

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PARTIAL PLAT AMENDMENT APPLICATION

PPA # _____

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 #2024-01 (ULO) prior to submittal. This Ordinance along with application materials are located on the County website at www.boisecounty.us.

ULO #2024-01, Section 5.19, Amendments/Vacation of Subdivision Plats or Parts Thereof:

Any person desiring to amend or vacate an existing subdivision plat or any part thereof in whole lots or which otherwise requires County approval, shall apply to the Board. Said person shall be the owner of record of the parcels proposed for vacation, or be authorized by the owner of record to petition the Board. Said application shall include and/or be subject to:

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

SECTION I: PERSONAL AND PROPERTY RELATED DATA

Owner: _____
Email: _____
Phone: () _____ Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Applicant (if different): _____
Email: _____
Phone: () _____ Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Engineering Firm: _____
Contact Person: _____ Phone: () _____
Address: _____ Email: _____
Surveyor: _____ Phone: () _____

Location and size:

Property Address: _____

Parcel Number(s): _____

Section: _____ Township: _____ Range: _____ Total Acreage of Parcel: _____

Assessor Exemptions (i.e. agriculture, timber, etc.): No: _____ Yes: _____ list: _____

Reason for request to amend plat: _____

Is property currently mortgaged? Y/N (if yes, Certificate of Acceptance of Mortgage is required on plat)

I consent to this application, I certify this information is correct and I authorize the Boise County Planning & Zoning Department staff and its designated inspection agent to enter the property for any site inspection or compliance purposes as long as this application and a conditional use permit are in effect. 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.

• Applicant Signature: _____

Date: _____

I, the undersigned, am the owner of the referenced property and do hereby give my permission to _____ to be my agent and represent me in the matters of this application. I consent to this application, I certify this information is correct and I authorize the Boise County Planning & Zoning Department staff and its designated inspection agent to enter the property for any site inspection or compliance purposes as long as this application and a conditional use permit are in effect. 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.

• Owner Signature: _____

Date: _____

SECTION II: ITEMS REQUIRED

1. Latest recorded deed to the property.
2. Application complete & signed; including Affidavit of Legal Interest and Letter of Authorization, if applicable, filed with the Administrator.
3. Application fees paid in full in accordance with the current fee schedule; including any/all applicable fees (i.e. publication costs).
4. A statement of circumstances surrounding the issue as to why the plat should be amended.
5. A legal description of the platted area or property to be amended.
6. The names of all persons affected by the amendment of the plat.
7. Draft 11" x 17" copy of the proposed plat amendment.
8. Proof all property taxes are paid in full, including pre-paid taxes for all properties. (see attached form)
9. Unrecorded new deeds, one for each new parcel, with new legal descriptions.
10. Amended Plat, labeled "Amended Plat of XXX Subdivision", that complies with the following:
 - Vicinity Map, Date of survey, and North Arrow;
 - Map scale adequate to depict all parcels (show Bar Scale);
 - Legend with a description for all weights and symbols used;
 - All bearings and distances for all property lines. Include Basis of Bearing and CP&F Reference.
 - All known easements shown with their instrument numbers;
 - All existing physical access points shown;
 - Adequate access easements for each parcel meeting ULO standards;
 - Property Descriptions-the new legal descriptions for each parcel;
 - Surveyor's Certification-Signature block with statement and stamp;
 - Date of plat.
 - Electronic form: either in DXF or DWG format, using Coordinate System of NAD 1983 State Plane Idaho West FIPS 1103 Feet, and identify two public land ties on the plat or ROS, and including GPS references, if available.
11. A public hearing will be scheduled with the Board, including public notice requirements as required for a new subdivision per the ULO.

SECTION III: STAFF ANALYSIS

SECTION IV: BOARD FINDINGS OF FACT, CONCLUSIONS, CONDITIONS AND ORDER

SECTION V: BOARD ACTION dated: _____
APPROVED **DENIED**

THIS BOX TO BE COMPLETED BY THE PLANNING AND ZONING DEPARTMENT	
FILE # _____	Rec'd Date: _____
Fee paid: _____	Date: _____
Payment type: _____	Receipt Number: _____
	Are application materials attached? Yes ____ No ____
ACCEPTED BY _____	Date: _____

STATEMENT OF PROOF OF PUBLIC HEARING POSTING
For Application # _____

I, _____, do hereby certify that Notice of Public Hearing was posted in accordance with the Boise County Amended Unified Land Ordinance #2024-01, Section 2.4.D.2 on the _____ day of _____, 20____, meeting the requirement of at least ten (10) days prior to the public hearing date. A photo of said posting is attached as Exhibit A, per Section 2.4.D.2.f.

Dated: _____

Typed/printed Applicant Name

Applicant Signature

STATE OF IDAHO)
) ss.
County of _____)

On this _____ day of _____, 20____, before me, the undersigned, a Notary Public in and for the State, personally appeared _____, known or identified to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that s/he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on the date last above written.

Notary Public for Idaho
Residing at _____
Commission expires _____

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PROOF OF PROPERTY TAXES PAID

Owner: _____	
Email: _____	
Phone: () _____	Mailing Address: _____
City: _____	State: _____ Zip Code: _____
Applicant (if different): _____	
Email: _____	
Phone: () _____	Mailing Address: _____
City: _____	State: _____ Zip Code: _____

Location and size:			
Property Address: _____			
Parcel Number: _____	Section: _____	Township: _____	Range: _____
Parcel Number: _____	Section: _____	Township: _____	Range: _____
Parcel Number: _____	Section: _____	Township: _____	Range: _____
Parcel Number: _____	Section: _____	Township: _____	Range: _____
Assessor Exemptions (i.e. agriculture, timber, etc.): No: _____ Yes: _____			
list: _____			

I (we) am (are) applying for the following Land Use Action: (please check the appropriate one)

	Document	Rec'd
<input type="checkbox"/>	Agricultural Land Split	
<input type="checkbox"/>	Probate Estate or Court Order	
<input type="checkbox"/>	One-Time Split	
<input type="checkbox"/>	Property Line Adjustment	
<input type="checkbox"/>	Parcel Line-Vacation	
<input type="checkbox"/>	Subdivision Plat	

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• Applicant Signature: _____
Date: _____

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• Owner Signature: _____
Date: _____

BOISE COUNTY TREASURER’S OFFICE ONLY:

Proof of Paid Taxes, Current and Estimated Taxes-as required by Boise County Ordinance #2024-01, is attached for the above Parcel(s)

TREASURER (DEPUTY) signature

Date