Boise County Planning and Zoning Department

413 Main Street, PO Box 1300

Idaho City, Idaho 83631 Phone: 208-392-2293 www.boisecounty.us



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

MASTER PUBLIC **HEARING APPLICATION**

 APPEAL COMPREHENSIVE PLAN TEXT AMENDMENT COMPREHENSIVE PLAN MAP AMENDMENT ROAD NAME CHANGE 	DEV DEV PLA CON	ELOPMENT AGREEMEN NNED UNIT 'ELOPMENT NNED COMMUNITY NDITIONAL USE PERMIT DIVISION, PRELIMINAR'	SUBDI SUBDI PLAT VARIA	VISION, FINAL VISION, VACATION VISION, AMENDED NCE <u></u>
HEARING BEFORE: 🗌 BOA	RD OF COUNTY	COMMISSIONERS 🗌 F	&Z COMMISSION	N
PROJECT NAME:				
SITE INFORMATION:				
(This information can be foun	d on the Assessor's	property information asses	ssment sheet.)	
Quarter:	Section:	Township:	Range:	_ Total Acres:
Subdivision Name (if applicab	le):		Lot:	_ Block:
Site Address:				
Tax Parcel Number(s):		Current Land Use:		
PROPERTY OWNER: Name:		APPLICANT: Name:		
Address:		Address:		
City:	State: Zip	: City:	State:	Zip:
Telephone:	Fax:	Telephone:	Fax:	

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.

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.

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

Email:

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

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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 My Commission expires on:	Date	

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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 Amended Unified Land Use Ordinance #2024-02 (ULO) prior to submittal. This Ordinance along with application materials are located on the County website at www.boisecounty.us.

ULO #2024-02, 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		
Owner: Email:		
		SS:
		Zip Code:
Applicant (if different):		
Email:		
		ss:
City:	State:	Zip Code:
Engineering Firm:		
Contact Person:		
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 Mortgagee 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. Unrecorded new deeds, one for each new parcel, with new legal descriptions.
- 9. 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.
- 10. A public hearing will be scheduled with the Board, including public notice requirements as required for a new subdivision per the ULO.
- 11. Proof all property taxes are paid in full, including pre-paid taxes for all properties. (Day of recording)

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 <u>#</u>

I,	_, do hereby certify that Notice of Public Hearing was
posted in accordance with the Boise Co	unty Amended Unified Land Ordinance #2024-02, Section
2.4.D.2 on the day of	, 20, meeting the requirement of at
least ten (10) days prior to the public h	earing 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)	
Public in and for the State, personally a identified to me to be the person whose acknowledged to me that s/he executed	, 20, before me, the undersigned, a Notary appeared, known or a name is subscribed to the foregoing instrument and the same. hereunto set my hand and seal on the date last above