Mono County Community Development Department

PO Box 347 Mammoth Lakes, CA 93546 760.924.1800, fax 924.1801 commdev@mono.ca.gov

Planning Division

PO Box 8 Bridgeport, CA 93517 760.932.5420, fax 932.5431 www.monocounty.ca.gov

DIRECTOR REVIEW APPLICATION

APPLICATION #	FEE \$
DATE RECEIVED	RECEIVED BY
RECEIPT # CHECK	# (NO CASH)

APPLICANT/AGENT Craig Nixon/Wanda Selb	oach - Nixon	
ADDRESS Box 2073, 104 5th St	CITY/STATE/ZIP Hawthorne NV 89415	
TELEPHONE (775) 945-2119	E-MAILcraignixon@sbcglobal.net	
OWNER, if other than applicant		
ADDRESS	CITY/STATE/ZIP	
TELEPHONE ()	E-MAIL	
DESCRIPTION OF PROPERTY:		
Assessor's Parcel # 19-040-04 General	Plan Land Use Designation Single Family Residence	
PROPOSED USE : Applicant(s) should describe the proposed project in detail, using additional sheets if necessary. Note: An incomplete or inadequate project description may delay project processing.		
Temporary use of an RV on property during summ	ner months. RV to be removed during winter months.	
Parcel is in designated avalanche area making it p	prohibitive for permanent construction.	
Prior Director Review for this property approved 2	010	
	S	
I CERTIFY UNDER PENALTY OF PERJURY THAT I am: Legal owner(s) of the subject property (all individual owners must sign as their names appear on the deed to the land), corporate officer(s) empowered to sign for the corporation, or owner's legal agent having Power of Attorney for this action (a notarized "Power of Attorney" document must accompany the application form), AND THAT THE FOREGOING IS TRUE AND CORRECT.		

Signature

Signature

07-MaAC4-2018
Date

RECEIVED

Mono County Community Development Department

P.O. Box 347 Mammoth Lakes, CA 93546 (760) 924-1800, fax 924-1801 commdev@mono.ca.gov

Planning Division

P.O. Box 8 Bridgeport, CA 93517 (760) 932-5420, fax 932-5431 www.monocounty.ca.gov

PROJECT INFORMATION

(To be completed by applicant or representative)

NOTE: Please answer all questions as accurately and completely as possible to avoid potential delays in processing. Attach additional sheets if necessary.

	<u> </u>
I.	TYPE OF PROJECT (check any permit(s) requested):
	Director Review Use Permit Lot Line Adjustment Land Division (4 or fewer)
	☐ Subdivision ☐ Specific Plan ☐ Variance ☐ General Plan Amendment
	Other
	APPLICANT Craig Nixon/Wanda Selbach - Nixon
	PROJECT TITLE _ Director Review Permit, temporary use of RV in seasonal Hazard area
	LOT SIZE (sq. ft/acre) 10,000 ASSESSOR'S PARCEL # 19-040-04
	PROJECT LOCATION Lot 44, Glacier Drive, Virginia Lakes Subdivision
	Has your project been described in detail in the project application? Yes 🚨 No 🖵
	Please Specify:
	Number of Units 1 - RV Building Height / # of floors trailer
	Number of Buildings 1-RV Density (units/acre) 30ft RV
	2011010 (411110) 4010)
	Total lot coverage/impervious surface (sq. ft. & %) lot 10,000 sqft
	a. Buildings (first-floor lot coverage /sq. ft. & %) RV 240 sqft.
	b. Paved parking & access (sq. ft. & %)
	Landscaping/screening and fencing:
	a. Landscaping (sq. ft. & %) n/a
	b. Undisturbed (sq. ft. & %) n/a
	Total parking spaces provided:
	a. Uncovered ²
	b. Covered n/a
	c. Guest/Handicapped_n/a
П.	SITE PLAN
щ.	Are all existing and proposed improvements shown on the Plot Plan (see attached Plot
	Plan Requirements)? Yes No 🗆
ш.	ENVIRONMENTAL SETTING
	Use one copy of the Tentative Map or Plot Plan as needed to show any necessary
	information. Attach photographs of the site, if available.

1.	VICINITY MAP: Attach a copy of assessor's parcel pages or a vicinity map showing the subject property in relation to nearby streets and lots or other significant features.
2.	EXISTING DEVELOPMENT:
٦.	Vacant If the site is developed, describe all existing uses/improvements such as
	structures, roads, etc. Does the Plot Plan show these uses? Yes 🔊 No 🗆 existing driveway upon purchase of property in 1999, septic tank installed 2010
3.	ACCESS/CIRCULATION: Name of Street Frontage(s) Glacier Drive
	Paved Dirt No existing access Are there any private roads, drives or road easements on/through the property? Yes No No
	Has an encroachment permit been submitted to Public Works or Caltrans? Yes \(\bigcap\) No \(\bigcap\) Does the property have any existing driveways or access points? Yes \(\bigcap\) No \(\bigcap\) Are any new access points proposed? Yes \(\bigcap\) No \(\bigcap\)
	Does the Plot Plan show the driveways or access points? Yes No
	Describe the number and type of vehicles associated with the project 2 private vehicles + RV
4.	ADJACENT LAND USES:
	A. Describe the existing land use(s) on adjacent properties. Also note any major man-made or natural features (i.e., highways, stream channels, number and type of structures, etc.). <u>LAND USE</u> <u>LAND USE</u>
	North Forest Service Property South Glacier Drive/Private Property across road
	East Private Property - RV use West Private Property
	B. Will the proposed project result in substantial changes in pattern, scale or character of use in the general area? Yes \(\subseteq \) No \(\subseteq \) If YES, how does the project propose to lessen potential adverse impacts to surrounding uses? other surrounding properties have RV usage
5	SITE TOPOGRAPHY:
3.	Is the site on filled land? Yes \(\sigma\) No \(\sigma\) Describe the site's topography (i.e., landforms, slopes, etc.) \(\sigma\) natural slope
6.	DRAINAGES:
	A. Describe existing drainage ways or wetlands on or near the project site (i.e., rivers, creeks and drainage ditches 12" or deeper and/or within 30' of the property)
	B. Are there any drainage easements on the parcel? Yes \(\bigcup \) No \(\bigcup \)
	C. Will the project require altering any streams or drainage channels? Yes \(\bigcup \) No \(\bigcup \) If YES, contact the Department of Fish and Game for a stream alteration permit. IF YES TO ANY OF THE ABOVE, show location on plot plan and note any alteration or work to be done within 30 feet of the stream or drainage.
7	VECETATION.
	VEGETATION: A. Describe the site's vegetation and the percentage of the site it covers (map major areas of vegetation on the Plot Plan) Plane trees, grass, natural vegetation 70%, existing driveway 30%
	B. How many trees will need to be removed? 0

		Has the site been used for the production of agricultural crops/trees or grazing/pasture
	E	land in the past or at the present time? Yes \(\begin{align*}\Quad \text{No } \Bigsilon \\ \text{Is landscaping/planting of new vegetation proposed? Yes \(\begin{align*}\Quad \text{No } \Bigsilon \\
8.		LDLIFE:
	A.	Will the project impact existing fish and wildlife? Yes No Salar N
	В.	Are there any unique, rare or endangered animal species on site? Yes 🔲 No 💆
9.	CU	ILTURAL RESOURCES:
	A.	Are there any cemeteries, structures or other items of historical or archaeological interest on the property? Yes No Specify
10	מוס	TE GRADING:
10.		Will more than 10,000 square feet of site area be cleared and/or graded?
		Yes No If YES, how much?
		Will the project require any cuts greater than 4' or fills greater than 3'? Yes \(\bigcap\) No \(\bigcap\)
	C.	Will the project require more than 200 cubic yards of cut or fill? Yes No 1 If YES, how much? If YES to A, B or C, contact the Department of Public Works for a grading permit.
	D.	Will site grading of 10% or more occur on slopes? Yes \(\bigs\) No \(\bigs\)
		Note any measures to be taken to reduce dust, prevent soil erosion, or the discharge of earthen material off site or into surface waters Project does not disturb existing landscape
	-	
11.		R QUALITY:
		Will the project have wood-burning devices? Yes No If YES, how many?
		What fuel sources will the proposed project use? Wood D Electric D Propane/Gas D
	C.	Will the proposal cause dust, ash, smoke, fumes or odors in the vicinity? Yes \(\sigma\) No \(\Sigma\)
12.		SUAL/AESTHETICS:
	A.	How does the proposed project blend with the existing surrounding land uses? Adjacent properties have RV placement
		Will blend in well with adjacent properties
	_	
	в.	How does the proposed project affect views from existing residential/commercial developments, public lands or roads? Project will not affect any views.
	c.	If outdoor lighting is proposed, describe the number, type and location no outdoor lighting
	-	
13.		TURAL HAZARDS:
	A.	Is the site known to be subject to geologic hazards such as earthquakes, landslides,
		mudslides, ground failure, flooding avalanche or similar hazards? Yes \(\Delta\) No \(\Delta\) (Circle applicable hazard[s]).
	B.	Will any hazardous waste materials such as toxic substances, flammables or explosives
		be used or generated? Yes No 🖸
	C.	Does the project require the disposal or release of hazardous substances? Yes No No
	D.	Will the project generate significant amounts of solid waste or litter? Yes 🔲 No 🔀

	E.	Will there be a substantial change in existing noise or vibration levels? Yes \(\begin{align*} \text{No } \bigset{\Delta} \\ \text{If YES to any of the above, please describe } \(\begin{align*} \text{No } \bigset{\Delta} \\ \text{No } \\ \text{No } \bigset{\Delta} \\ \text{No } \\
		More on back
14.		OTHER PERMITS REQUIRED: List any other related permits and other public approvals required for this project, including those required by county, regional, state and federal agencies: Encroachment Permits from Public Works or Caltrans. Stream Alteration Permit from Department of Fish and Game 404 Wetland Permit from Army Corps of Engineers Grading Permit from Public Works Building Permit from County Building Division Well/Septic from County Health Department Timber Land Conversion from California Department of Forestry Waste Discharge Permit from Lahontan Regional Water Quality Control Board Other
IV.		SERVICES
	1.	Indicate how the following services will be provided for your project and the availability of service. Electricity RV batteries, Generator Underground Overhead (Show location of existing utility lines on Plot Plan)
		Road/Access existing - Glacier Drive
		Water Supply Existing - Virginia Lakes Water
		Sewage Disposal Existing Septic installed 2010 - permitted
		Fire Protection Existing protection for the area
		School District n/a
:	2.	If an extension of any of the above is necessary, indicate which service(s), the length of extension(s), and the infrastructure proposed_n/a
infor infor that used	rma rma th	FICATION: I hereby certify that I have furnished in the attached exhibits the data and ation required for this initial evaluation to the best of my ability, and that the ation presented is true and correct to the best of my knowledge and belief. I understand his information, together with additional information that I may need to provide, will be a y Mono County to prepare a Specific Plan in compliance with state law. Date
For_	_	

NOTE: Failure to provide any of the requested information will result in an incomplete application and thereby delay processing.





