

City of Reno
Planning Division

BOUNDARY LINE ADJUSTMENT PROCEDURES

Submittal Dates:

- Applications for boundary line adjustments are accepted until 3:00 p.m. on any regular business day.
- The contact person identified on the application will be sent an email acknowledging receipt of the application as complete.

Reviewing Bodies:

- The application and accompanying information will be circulated to various agencies for review.
- Following a 30 day review period, City staff will issue a letter to approve, deny or approve the request with conditions, which will be made available to the applicant.

Decisions:

- Any person aggrieved by the administrative decision may file an appeal. Appeals of the administrative decision must be made within 10 calendar days of the decision, by filing the appropriate form and fees with the City Clerk's office. The Administrator will place the appeal on the next available Hearing Examiner Officer (HEO) agenda commencing at least 14 days after the last day of the appeal period. The HEO has the authority to affirm, reverse or modify the administrative decision.

- The applicant or any aggrieved party may appeal the decision of the HEO to the City Council within 10 days of the HEO's decision by filing a notice of appeal with the City Clerk's office (334-2030) and paying any fees. If an appeal of the HEO decision has been filed, the Clerk will place the appeal on the next City Council agenda commencing at least 14 days after the last day of the appeal period. The public hearing will be noticed and advertised in accordance with RMC Section 18.06.208. The Council has the authority to affirm, reverse or modify the HEO decision. The decision of the Council is final.
- After the appeal period expires and/or a final decision is rendered by staff, the HEO or City Council to approve the boundary line adjustment, a building permit associated with the project may be issued.
- An applicant whose boundary line adjustment is finally denied cannot institute a new application on substantially the same project within twelve (12) months from the date of final action on the original application, **unless** the City Council has first determined that its original decision was based on an error, lack of information, a misrepresentation of the facts, or that there has been a substantial change in the subject property, or the administrator has determined that there has been a substantial change in the project or an amendment to applicable provisions of Title 18.

Fee Reimbursement:

Reimbursements for incomplete, withdrawn or invalid applications are as follows:

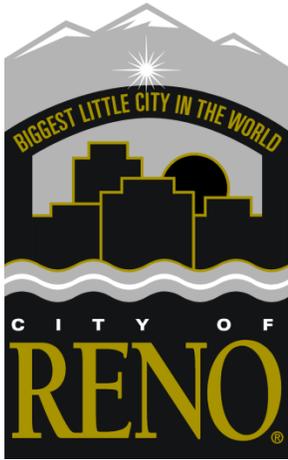
Administrative Review Cases:

<u>Case Progress</u>	<u>Amount of Refund</u>
• Case Setup	80%
• Research	25%
• Draft Decision Written	0%

BOUNDARY LINE ADJUSTMENT FINDING

Approval of a boundary line adjustment shall meet the requirements of NRS 278.475 and 278.477.

CITY OF RENO
APPLICATION FOR BOUNDARY LINE ADJUSTMENT



For Community Development Department Use Only:
CASE NUMBER:
COMPLETENESS:
RECEIVED:

PROJECT NAME: _____

PROJECT DESCRIPTION: _____

PROJECT ADDRESS: _____

PROPERTY SIZE: _____ ASSESSOR'S PARCEL NO(S).: _____

ZONING - EXISTING: _____

MASTER PLAN - EXISTING: _____

EXISTING LAND USE: _____

PROPERTY OWNER(S)

NAME: _____

ADDRESS: _____

PHONE: _____

APPLICANT/DEVELOPER(S)

NAME: _____

ADDRESS: _____

PHONE: _____

E-MAIL ADDRESS: _____

PERSON TO CONTACT REGARDING APPLICATION:

NAME: _____

(IF SAME AS OWNER OR APPLICANT, PLEASE INDICATE)

ADDRESS: _____

PHONE: _____

E-MAIL ADDRESS: _____

The City of Reno will direct all mail on this project to the contact person designated above.

The above information is required.

APPLICANT AFFIDAVIT

I am the applicant and/or consultant/firm involved in this petition and the foregoing statements and answers herein contained and the information herewith submitted for _____ are in all respects complete, true, and correct to the best of my knowledge and belief. I declare under penalty of perjury that the foregoing is complete, true and correct for development case number BLA_____ (to be filled in by City of Reno staff).

Executed on _____, in _____, _____
(date) (City) (State)

Company: _____

Name: _____

Title: _____

Signed: _____

STATE OF NEVADA)
) ss
COUNTY OF WASHOE)

On this _____ day of _____, 20____, _____(name) personally appeared before me, a Notary Public in and for said County and State, known to me to be the applicant and/or consultant/firm involved in this petition who acknowledged to me that they are authorized to and did execute the above instrument on behalf of said application.

Notary Public

**CITY OF RENO
BOUNDARY LINE ADJUSTMENT
APPLICATION**

Map Name: _____

Assessor's Parcel Number: _____ Existing Zoning: _____

Existing Use of Each Parcel: _____

Surveyor: _____

Address: _____

Phone Number: _____ Nevada R.L.S.# _____

The Record of Survey Map shall include:

- 1) City of Reno jurat as follows:

City of Reno Certificate

The undersigned certifies that this map has been reviewed and approved by the City of Reno.

PLANNING MANAGER

DATE

- 2) The location of all existing structures and access easements.

BOUNDARY LINE ADJUSTMENT APPLICATION CHECKLIST

Applicant Complete and Correct	Item No.	ITEMS REQUIRED FOR GENERAL APPLICATION CHECKLIST
<input type="checkbox"/>	1	Application Form(s)
<input type="checkbox"/>	2	Owner's Affidavit, Applicant Affidavit (original signatures)
<input type="checkbox"/>	3	Legal Description. (Legal descriptions <u>must</u> include original signature and be wet stamped by a State of Nevada professional land surveyor)
<input type="checkbox"/>	4	Record of Survey to be filed
<input type="checkbox"/>	5	8 ½" x 11" Zoning/Vicinity Map
<input type="checkbox"/>	6	8 ½" x 11" Site Plan (showing property lines, existing buildings, fences, existing and proposed construction, etc.)
<input type="checkbox"/>	7	24" x 36" Non-Colored Display Map
<input type="checkbox"/>	8	Supporting Information
<input type="checkbox"/>	9	Check or Money Order
<input type="checkbox"/>	10	Title Report (must be dated within 90 days of submittal)
<input type="checkbox"/>	11	Digital copy of entire submittal on flash drive in PDF format
<input type="checkbox"/>	12	One original application package (unbound with two-hole punch at top)
<input type="checkbox"/>	13	One paper copy of application package (fold large maps to 9"x12" size)

_____(Applicants Initials) ***Applications with missing plans and checklists or missing components of plans and checklists, will be deemed incomplete and returned within three (3) days of application submittal. The applicant must consult with Community Development Staff prior to submitting an application without the above information to determine if the information may be eliminated for a particular application. Additional information may be requested during the review process.**