



# MASTER APPLICATION/PETITION REQUEST

ADA COUNTY DEVELOPMENT SERVICES

200 W. Front Street, Boise, Idaho 83702. www.adaweb.net phone: (208) 287-7900 fax: (208) 287-7909

### TYPE OF ADMINISTRATIVE APPLICATION:

- ACCESSORY USE\*
- FARM DEVELOPMENT RIGHT
- FLOODPLAIN PERMIT
- HILLSIDE DEVELOPMENT\*
- HIDDEN SPRINGS ADMINISTRATIVE
- HIDDEN SPRINGS SPECIAL EVENT
- MASTER SITE PLAN\*
- NONCONFORMING USE EXPANSION
- ONE TIME DIVISION
- PRIVATE ROAD
- PROPERTY BOUNDARY ADJUSTMENT
- SIGN PLAN
- TEMPORARY USE\*

### TYPE OF HEARING LEVEL APPLICATION:

- CONDITIONAL USE
- DEVELOPMENT AGREEMENT
- SUBDIVISION, PRELIMINARY\*
- PLANNED COMMUNITIES\*
- SUBDIVISION, SKETCH PLAT\*
- VACATION
- VARIANCE
- ZONING MAP AMENDMENT
- ZONING TEXT AMENDMENT

### TYPE OF HEARING LEVEL PETITION:

- COMPREHENSIVE PLAN MAP OR TEXT AMENDMENT PETITION CHECKLIST

### TYPE OF ADDENDA:

- APPEAL
- ADMINISTRATIVE MODIFICATION
- DEVELOPMENT AGREEMENT MODIFICATION
- FINAL PLAT
- TIME EXTENSION

### REQUIRED SUBMITTALS:

- CHECKLIST for applicable application(s). If multiple applications, do not duplicate submittals.
- \*SUPPLEMENTAL WORKSHEET REQUIRED

### SITE INFORMATION:

Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ Total Acres: \_\_\_\_\_  
 Subdivision Name: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_  
 Site Address: \_\_\_\_\_ City: \_\_\_\_\_  
 Tax Parcel Number(s): \_\_\_\_\_  
 Existing Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_ Area of City Impact: \_\_\_\_\_ Overlay  
 District(s) \_\_\_\_\_

### OFFICE USE ONLY

Project #.:	Planning Fees/GIS:	Engineering Fees:
Received By: _____ Date: _____ Stamped <input type="checkbox"/>		

<b>APPLICANT/AGENT:</b> (Please print)	<b>ADDITIONAL CONTACT if applicable:</b> (Please Print)
Name: _____	Name: _____
Address: _____ City: _____ State: _____ Zip: _____	Address: _____ City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____ Email: _____	Telephone: _____ Fax: _____ Email: _____
I certify this information is correct to the best of my knowledge.  _____	<b>ENGINEER / SURVEYOR if applicable:</b> (Please Print) Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Telephone: _____ Fax: _____ Email: _____
Signature: (Applicant) _____ Date _____	

<b>OWNER (S) OF RECORD:</b> (Please Print)	<b>OWNER (S) OF RECORD:</b> (Please Print)
Name: _____	Name: _____
Address: _____ City: _____ State: _____ Zip: _____	Address: _____ City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____ Email: _____	Telephone: _____ Fax: _____ Email: _____
I consent to this application, I certify this information is correct, and allow Development Services staff to enter the property for related site inspections. I agree to indemnify, defend and hold Ada County and its employees harmless 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 the application.  _____	I consent to this application, I certify this information is correct, and allow Development Services staff to enter the property for related site inspections. I agree to indemnify, defend and hold Ada County and its employees harmless 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 the application.  _____
Signature: All Owner (s) of Record _____ Date _____	Signature: All Owner (s) of Record _____ Date _____

**ALL OWNER(S) OF RECORD (ON THE CURRENT DEED) MUST SIGN (Additional Sheets are Available Online)**

**If the property owner(s) are a business entity, please include business entity documents, including those that indicate the person(s) who are eligible to sign documents.**