



Pershing County Planning and Building Department

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Home Occupation Special Use Permit Application

Applicant or Representative: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ Email _____

Property Owner: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ Email _____

Professional Consultant: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ Email _____

Property Information

Property address or location: _____

Legal description of property (section, township, range): _____

Assessor's parcel number(s): _____

Regulatory Land Use District: _____

Total area of property (acres or square feet): _____

Project Information

Provide a detailed description of the proposed project: _____

Provide a time schedule for completion of the proposed project: _____

Describe the existing use of the property: _____

Describe the land uses of surrounding properties: _____

Describe the effect the project will have on surrounding properties: _____

List any state, federal, or other public agencies' approvals or permits required for the proposed project: _____

Infrastructure and Services

Describe how water will be provided: _____

Describe how sewage disposal will be provided: _____

Describe how electricity will be provided: _____

Describe how other necessary infrastructure and services will be provided (i.e. solid waste disposal, telephone service, etc.): _____

Describe the condition of existing roads which provide access to the project location: _____

Describe the effect the proposed project will have on existing road and traffic conditions: _____

Describe any new roads that will be built: _____

Applications must be entirely filled out and have all required attachments. Applications will not be processed until all information necessary to review and decide upon the application has been determined complete by the Planning Director.

Owner Affidavit

State of _____)

)

ss:

County of _____)

I, _____
being duly sworn, depose and say that I am an owner* of property involved in this petition and that the foregoing statements and answers herein contained and the information herewith submitted are in all respects complete, true and correct to the best of my knowledge and belief. I understand that no assurance or guarantee can be given by members of the Planning Department.

*Owner refers to the following: (Please check the appropriate box.)

- Owner
- Corporate Officer/Partner (Provide copy of record document indicating authority to sign).
- Power of Attorney (Provide copy of Power of Attorney).
- Owner Agent (Provide copy of record document indicating authority to sign).
- Letter from Government Agency with Stewardship

Signed

Address

Subscribed and sworn to before me
this ____ day of _____, _____.

Notary public in and for said county and state.

(Notary Stamp)

My commission expires: _____