



# NEIGHBORHOOD MEETING LIST REQUEST

**LIST FEE: \$26.50 (Includes Tax) – COUNTY PROVIDES MAILING LABELS**

Payment will be requested when the labels have been generated.

## GENERAL INFORMATION:

If applying for one of the uses listed below, a Neighborhood Meeting is required. The meeting allows neighbors to learn more about your proposed project before the public hearing. All registered Neighborhood Associations and property owners within the required buffer area (300'/1000'/1200'/2640'/5280') need to be invited to your meeting. See ACC 8-7A-5C (1), (2), (3) & (4) for uses and districts requiring the 1000', 1200', 2640', and 5280' notification.

**According to Ada County Code, the neighborhood meeting must be held either:**

- On a weekend between the hours of 10 a.m. and 7 p.m.,
- Or a weekday between 6 p.m. and 8 p.m.

*\*Meetings cannot be conducted on holidays, holiday weekends, or the day before or after a holiday or holiday weekend.*

**The meeting must be held at one of the following locations:**

- The Subject Property;
- The nearest available public meeting place (Examples: fire stations, libraries, community center, etc.)
- An office space within a 1-mile radius of the subject property

The meeting cannot take place more than **six (6) months** prior to the acceptance of the application and the application will not be accepted before the neighborhood meeting is conducted. You are required to send written notification of your meeting, allowing a "reasonable amount of time" before your meeting for property owners to plan to attend. Contacting and/or meeting individually with residents will not fulfill Neighborhood Meeting requirements.

### APPLICATION TYPE (check all that apply):

### BRIEF DESCRIPTION (Required):

- ☐ Conditional Use
- ☐ Expansion of Extension of a Nonconforming Use
- ☐ Subdivision (Sketch Plat and/or Preliminary Plat)
- ☐ Variance
- ☐ Zoning Ordinance Map Amendment


## SITE INFORMATION:

SITE ADDRESS: _____		CITY: _____	
SECTION: _____	TOWNSHIP: _____	RANGE: _____	
SUBDIVISION NAME: _____		LOT(S): _____	BLOCK(S): _____
TAX PARCEL NUMBER(s): _____		CURRENT ZONING DISTRICT: _____	

### PROPERTY OWNER (Please Print):

### CONTACT (Please Print):

NAME: _____	NAME: _____
ADDRESS: _____	ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____	CITY: _____ STATE: _____ ZIP: _____
TELEPHONE: _____ FAX: _____	TELEPHONE: _____ FAX: _____
EMAIL: _____	EMAIL: _____

## OFFICE USE ONLY

PROJECT #:	RECEIVED BY:
DATE:	DATE STAMPED: <input type="checkbox"/>