



ZONING CLEARANCE PROCESS

DEVELOPMENTS EXEMPT FROM ZONING CLEARANCE PROCESS BUT ARE REQUIRED TO OBTAIN A BUILDING PERMIT ARE: FENCES OVER SIX FEET, WALLS OVER 4 FEET, CAR PORTS, ROOFING, REMODELING, STUCCOING AND RE-PLASTERING

APPLICANT RECEIVES ZONING CLEARANCE APPLICATION
Planning Dept
(505) 737-6440

STATE ENVIRONMENTAL DIVISION SEPTIC PERMIT
NM State Environment Dept
(505) 758-8808

STATE ENNGINEERS DEPARTMENT WELL PERMIT
NM State Engineer's Office
(505) 827-6120

COUNTY ASSESSORS OFFICE DEEDS, MAPS, INFORMATION SHEET
Assessor's Office
(505) 737-6360

NEIGHBORHOOD ASSOCIATION STAGECOACH, UPPER LAS COLONIAS, LINDA VISTA
Planning Dept
(505) 737-6440

WATER & SANITATION DISTRICT

PROOF OF UTILITIES KIT CARSON ELECTRIC COOPERAVTIVE INC.
(505) 751 9064

COUNTY DEPARTMENT APPROVALS

RURAL ADDRESSING
Office of Emergency Management
(505) 737-6450

EMERGENCY MANAGEMENT FLOOD PLAIN, DEFENSIBLE SPACE
Office of Emergency Management
(505) 737-6451

COUNTY SOLID WASTE DEPARTMENT
(505) 737-6336

COUNTY PUBLIC WORKS DEPARTMENT ACCESS PERMIT
Hours of Operation
7:30a.m. - 4:00p.m.
Monday through Friday
(505) 737-6470

APPLICATION SUBMITTED TO PLANNING DEPARTMENT
5-10 DAY REVIEW PERIOD

REVIEW OF SUBMITTALS: SITE PLAN, 5-YEAR HISTORY OF PROPERTY AFFIDAVIT, ALL INFORMATION CORRECT

FEES PAID

SITE VISIT OF PROPERTY POSTING OF ZONING CLEARANCE

APPLICATION APPROVED

BUILDING PERMIT MUST BE SUBMITTED



Must be Posted on Site

For Office Use:
 Reviewed by _____
 Signature _____
 Date _____

Taos County, N.M. Planning Department Zoning Clearance

Application No. _____ Fee \$50.00 Date _____

* If the applicant is not the owner of the property, then a copy of a contract for sale or lease between applicant and owner, or a notarized letter consenting to this application must be submitted from the Owner of Record. A legal Description of the Land can be obtained from the Assessors office and MUST be presented with this application. Copy of DEED is required with application.

NAME OF APPLICANT: _____ Owner: _____ Yes or NO _____

ADDRESS: _____ (CITY) _____ (STATE) _____ (ZIP CODE) _____

Physical Address _____

PHONE: _____
(HOME) (WORK) (OTHER)

Please Select Development Type: Residence _____ Garage _____ Addition _____ Other _____

Directions to Development Site: _____

A Site plan will be required with this application along with additional attachments and approvals determined by the Planning Department. The information needed for review is as follows:

Square Footage the development _____ Proposed Height of development _____

*Slope of development of property _____ % *Slope of road to property _____ %

Land is Vacant _____ Yes or NO _____

DEED Restrictions or Covenants _____ Yes or _____ No (If Yes please Attach Copy)

Driveway to property _____ Yes or No _____ (If No a Driveway/Access Permit may be required from the Taos County Road Department or the State Highway Department). Please attach a copy.

Neighborhood Association _____ Yes or No _____ (If Yes please list Name _____)
Vista Linda, Stage Coach or Upper Los Colonias Neighborhood Association's must be contacted prior to application.

Utilities _____ Yes or No _____ (Kit Carson Approval _____)

*Note: A licensed contractor or engineer may determine Slope and where there is uncertainty, the Planning department reserves the right to determine the slope of the property. Topographic maps are required and can be obtained from the Emergency Management Department.

Signatures or applications from other departments may be required prior to acceptance of this application by the Planning Department: Additional Fees may be required.

1. Rural Addressing Application _____ Yes or No _____ (Please Submit Copy)
2. Flood Plain Permit _____ Yes or No _____ (See Emergency Manager and Please Submit Copy)
3. Defensible Space Fire Plan _____ Yes or No _____ (See Emergency Manager and Please Submit Copy)
4. Well Permit _____ Yes or No _____ (Please Submit Copy)
5. Liquid Waste Permit _____ Yes or No _____ (Please Submit Copy)
6. Water & Sanitation District _____ Yes or No _____ (Please Submit Copy)
7. Approval From Taos County Solid Waste Department _____ DATE _____
8. Approval From Taos County Public Works Department 120 Herdner Road _____ DATE _____

If a permit(s) is issued pursuant to this application, the terms and conditions of the permit(s) shall be based on the information provided by the applicant. Changes in the use of the permitted activities that are not consistent with the terms and conditions of the permit(s) or this application may be considered a violation of this permit(s). The applicant here by declares that all the information provided on this application and any submitted attachments(s) for the purposes of obtaining a permit, are correct and complete. The applicant acknowledges that providing false information to a governmental agency is punishable as perjury in the second degree, as well as being punishable under any other applicable state or Federal Laws. I Authorize Taos County to conduct inspections on the property related to this permit.

Applicant Signature _____ Date _____



Zoning Clearance # ZC-_____

Building Permit # CO-_____

Zoning Clearance

APPLICATION

SITE ZONING VERIFICATION

Reviewed & Completed By:

_____ Reviewer

_____ Date



5 YEAR HISTORY OF PARCEL AFFIDAVIT

Applicant Name: _____ Telephone Number: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Present legal description of property: Township _____ Range _____ and Section: _____

On the space below describe the history of and previous division of land of which this parcel is a portion, covering the previous five years (If the history is unknown by the property owner a title search may be required, as well as warranty deed and/or recorded plat.)

Jurat: I _____, do solemnly swear that the above Account is true in all respects.

SIGN HERE: _____

NOTARY: Subscribed and sworn to me before me at _____

This _____ day of _____, 20 _____

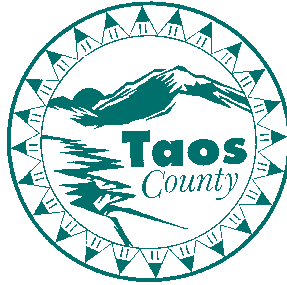
Title _____

(SEAL)

**COUNTY OF TAOS
STATE OF NEW MEXICO**

DAN BERRONE
LARRY SANCHEZ
ANDREW CHAVEZ
NICKLOS E. JARAMILLO
JOE MIKE DURAN

DISTRICT I
DISTRICT II
DISTRICT III
DISTRICT IV
DISTRICT V



ADAM BAKER COUNTY MANAGER

**OFFICE OF
PLANNING DEPARTMENT
E-911 – RURAL ADDRESSING**

JOE MEDINA, OEM SPECIALIST

105 ALBRIGHT STREET, SUITE – O
TAOS, NM 87571

OFFICE: (505) 737-6452
FAX: (505) 737-6449
E-MAIL: joe_medina@taoscounty.org

ADDRESSING FEE \$35.00 REVIEW FEE \$10.00

RURAL ADDRESS APPLICATION

**THIS INFORMATION IS NECESSARY TO OBTAIN TELEPHONE AND POWER HOOK-UPS.
THE INFORMATION IS USED BY EMERGENCY RESPONSE PERSONNEL VIA THE TAOS
COUNTY E-911 SYSTEM.**

DATE: _____
Permit No. _____

CURRENT PHONE NUMBER (____) - ____ - _____

NAME: _____ (Last) _____ (First) _____ (Initial)

SPOUSE: _____ (Last) _____ (First) _____ (Initial)

CURRENT MAILING ADDRESS:

(Street) (P.O. Box)

(City) (State) (Zip)

Home Owner _____ Renter _____ Renters Name _____

House _____ Mobile Home _____ Commercial _____ Residential _____

In order to properly process your request, a staff person may have to conduct a site visit in order to verify or determine the true distance of road, road name, adjacent lot/house numbers, and/or other relevant data. A measurement may be taken that determines the number that you will be assigned (For example: one and a half miles is #150 or 8/10's of a mile is #80). All odd numbers will be assigned to one side of the road and all even numbers to the other. Please describe how we will find your driveway (start with the closest named road): please use back of sheet or separate sheet of paper to draw a sketch if needed. _____

Which side of the road is your driveway on Right Left or North East South West (please circle one)

Does your driveway originate off of a county road? Yes _____ No _____
If yes, do you have a Taos County Driveway and / or Excavation permit? Yes _____ No _____
Does your driveway originate off of a State Highway? Yes _____ No _____
If yes, do you have a State Highway Access Permit? Yes _____ No _____
Does your driveway originate off of a Forest Service Road? Yes _____ No _____
If yes, do you have a Special Use Permit (SUP) from the forest service? Yes _____ No _____

OFFICE USE ONLY: _____
(HOUSE #) (ROAD NAME)

(ESN #) (LATITUDE) (LONGITUDE) (Signature) (DATE ENTERED INTO DATABASE)

DAN BERRONE
LARRY SANCHEZ
ANDREW CHAVEZ
NICKLOS E. JARAMILLO
JOE MIKE DURAN

DISTRICT I
DISTRICT II
DISTRICT III
DISTRICT IV
DISTRICT V



105 ALBRIGHT STREET, SUITE - O
TAOS, NM 87571

OFFICE: (505) 737-6451
FAX: (505) 737-6449
CELL: (505) 770-7899

FLOODPLAIN QUESTIONNAIRE AND INFORMATION FORM

THE FOLLOWING INFORMATION IS REQUIRED IN ORDER TO PROPERLY ASCERTAIN WHETHER OR NOT YOUR PROPOSED BUILDING SITE REQUIRES FURTHER REVIEW BY THE FLOODPLAIN MANAGER. IF YOU ANSWER "YES" OR "DON'T KNOW" TO QUESTIONS 2-5 BELOW YOUR PERMIT WILL NEED FURTHER REVIEW AND YOU MUST COMPLETE THE SECOND PAGE!!!

Date: _____

Zoning Application No.: _____

Name of OWNER / AGENT / BUILDER / DEVELOPER (circle one)

MAILING ADDRESS

Telephone: _____

Regarding the property located in and around the proposed development area located at (physical address):

_____, more particularly described as $\frac{1}{4}$, $\frac{1}{4}$, Section _____, Township _____, Range _____

in Taos County, New Mexico:

Please answer the following questions.

1. Is this property located within a subdivision?

____ YES ____ NO

If yes please provide the following:

Subdivision Name _____ Lot No. _____ Block No. _____

Was the subdivision subject to Floodplain review and approval by the floodplain manager?

____ YES ____ NO (if yes, please provide documentation)

2. Are there natural or man-made surface water sources (river, stream, lake, pond, or acequia) located on or within 100 feet of the property on which you intend to build? (if yes, please circle one)

____ YES ____ NO ____ DON'T KNOW

3. Are there any arroyos or dry stream beds within the property on which you intend to build?

____ YES ____ NO ____ DON'T KNOW

4. To your knowledge, has the property in question ever been subject to flooding?

____ YES ____ NO ____ DON'T KNOW

5. Is your property located within a flood hazard area?

____ YES ____ NO ____ DON'T KNOW

If you answered yes or no, please attach copy of Federal Insurance Rate Map indicating location and panel number for verification or attach Elevation Certificate.

By my signature below, I certify that the information provided above is true and correct and further understand that falsifying this document constitutes criminal intent.

Applicant Signature: _____

FOR AN ADDITIONAL FEE YOU MAY REQUEST THAT THE FLOODPLAIN MANAGER COMPLETE THIS FORM FOR YOU.

Date: _____

Zoning Application No.: _____

The property located at _____
_____, more particularly described as _____ ¼, _____ ¼, Section _____, Township _____, Range _____
_____ in Taos County, New Mexico is located on the following Flood Insurance Rate Map or
Floodway Map:

Taos County Community Number: _____ Panel Number: _____

Date of the FIRM or Floodway Map _____

The property is located in zone _____

The property / main building on the property:

IS NOT located in a Special Flood Hazard Area. No further review is necessary.

OR

IS located in a Special Flood Hazard Area. Please complete the following:

The base flood elevation at the property is _____, NGVD 1929

The base flood elevation at the property is _____ feet above the highest adjacent
grade.

**ADDITIONAL REVIEW AND/OR A SITE VISIT MAY BE NECESSARY AND A FLOODPLAIN
DEVELOPMENT PERMIT WILL BE REQUIRED FOR THIS PROJECT.**

**FEDERAL LAW REQUIRES THAT A FLOOD INSURANCE POLICY BE OBTAINED AS A CONDITION
OF A FEDERALLY-BACKED MORTGAGE OR LOAN THAT IS SECURED FOR THE BUILDINGS.
FLOOD INSURANCE IS AVAILABLE IN TAOS COUNTY. PLEASE CONTACT YOUR LENDER FOR
MORE INFORMATION**

The location of the buildings cannot be made on the map. A copy of the map is attached for
your information.

**Note: This information is based on a Flood Insurance Rate Map or Floodway Map of the
TAOS COUNTY area. The information on this form does not imply that the referenced
property will or will not be free from flooding or flood damage. A property not in a Special
Flood Hazard Area may be damaged by a flood greater than the 100 year storm or from a
local drainage problem not shown on the map. This form does not create liability on the
part of TAOS COUNTY, or any officer or employee thereof, for any damage that results
from reliance on information contained on this form.**

THIS PROJECT HAS MET THE REQUIREMENTS FOR FL OR N MANAGEMENT AND MAY BE PERMITTED.

FLOODPLAIN MANAGER

THIS PROJECT LOCATION HAS BEEN DETERMINED TO BE IN AN IDENTIFIED SPECIAL FLOOD HAZARD
AREA AND WILL REQUIRE A FLOODPLAIN PERMIT PRIOR TO A BUILDING PERMIT BEING ISSUED.

FLOODPLAIN MANAGER

FOR OFFICE USE ONLY

THIS APPLICATION FOR ZONING CLEARANCE WAS REVIEWED BY:

(PRINT NAME)

(DATE)

IT IS HEREBY DETERMINED THAT THIS APPLICATION IS HEREBY

(APPROVED OR DENIED)

(STAFF PERSON'S SIGNATURE)



INFORMATION REQUIRED ON SITE PLAN: Name of Road, Drive-way location, Property dimensions, Total Acreage, Location of proposed and existing structures, Utility easements, Location of well and septic tank; the location of lakes, rivers, streams, irrigations ditches, ponds and intermittent streams (arroyos). Show distances from all structures to property boundaries, show distances from your well location to all septic tanks within 1000 feet of your well. Show distances from your septic tank to all water sources, this includes neighborhood wells, lakes, rivers, ponds etc... Show electrical lines, either buried or overhead. Show gas lines; show the direction of water run-off. You must show address of all adjacent properties. **NOTE: The side plan does not have to be to scale, but it must be a fairly accurate description of you proposal.**

