

Proof of Sewer (If on community sewer system letter from entity on letter head).

If application meets code requirements, a Development Permit is issued. The applicant then delivers approved, sealed plans to the NM Construction Industry Division (CID) for building permit.

City Water need to provide approved Certificates.)	
Applicant must provide proof of permit or legal non-conforming status of all existing structures/improvements on property prior to submitting permit.	
Plans applicant to provide 4 copies 11"x17" to scale Site Plan (Birds eye-view of what is on the property including all existing & proposed structures, required setbacks, well, septic, driveway length & width). Plans labeled with studio, casita, or guest house will not be accepted. Survey plats will not be accepted as site plans. Provide setback as per Table 7-A of the SLDC Vicinity Map + Written Directions to the site Floor Plan Foundation Plan (signed & sealed by a NM Professional Engineer) Water harvesting plan less than 2,500 sq. ft. shall install rain barrels, cisterns, or other water catchment basins to capture 85% of roofed area. (Show on Site Plan) Fire Sprinkler Plan (if applicable).	

Slope Analysis (If applicable, slope analysis must be provided in the following increments signed & sealed by NM Professional Engineer)

0-15% 15-20% 20-25% 25-30% 30+%

Helpful Hints

- ✓ Provide the properties gate code on the development application so the Code Enforcement Officers can access the property.
- ✓ Please let our office know if you have loose dogs in your yard prior to inspection.
- ✓ Read the plat notes on your approved survey to check if you need fire sprinklers.
- ✓ Driveway should be dimensioned on site plan. (length, width, turnaround)
- ✓ Road must be a minimum of 18' wide. Driveway must be a minimum of 14' wide. If your road or driveway does not meet these standards, please contact us at 505-986-6225. (fire department will not approve otherwise)

Forms included in packet Documents available at Santa Fe County Documents applicant to provide Plans applicant to provide

<u>Notes</u>	<u>Notes</u>
SLDC Regulations Zoning Community Overlay District Density Density Maximum height Accessory Dwelling Unit Setback front property line Setback side & rear property line Flood zone setback	Important Phone Numbers• Santa Fe County Land Use, 100 Catron St, STE 2102, 505-986-6225 http://www.santafecountynm.gov• State Engineers Office, 407 Galisteo Bataan Memorial Building 505-827- 6175 (Well Permit)• State Environment Department 2540 Camino Edward Ortiz, 505-827- 1840 (Septic Permit)• Santa Fe County Fire Prevention 4 Fire Place, 505-995-6523• Construction Industries Division (CID) 2550 Cerrillos Road, 505-476-4700• Santa Fe County Utilities, 505-992-9870• Manufactured Housing Division, 505-476-4770



BUILDING AND DEVELOPMENT SERVICES AND SANTA FE COUNTY FIRE PREVENTION DIVISION DEVELOPMENT PERMIT APPLICATION



Applicant Name: (Present &/or Former Names) Development Perm	it Number Project Manager/Type/Date Received
Development Fees Paid I Y I N Amount: Fire Impact Fee Paid (Additional Fire Inspections will be charged For official use only	a minimum \$25.00 fee)
Type of Developme (Indicate all that Site Dev. Plan Conceptual Plan Conceptual Use Residential Bldg. Plan Lot Line Adj. Summary Rev Sub. Major Sub. Minor Sub. Com. Sub Wildland Hazard Rating: Moderate High Very High Ext Fire Protection Water Source: Fire Hydrant Draft Hydrant Pond O	apply) Commercial Bldg. Plan 🗆 Accessory Structure 🗆 Driveway D. □Sprinkler/Alarm □ Mobile Home □Solar Other reme □ N/A Fire District
PROPERTY OWNER INFORMATION: First Name:	Last Name:
Mailing Address:	Zip:
Rural address of Project:	
Written Directions to Project Site:	
	0.1
Gat	
	Address
Contractor / Company Name: Cell Phone: () Work Phone () -	
PROJECT DESCRIPTION: Section: Township: Range: Commission District UPC Number: Plat Book Warranty Deed Instrument #: Date Recorded: Subdivision Acreage: Estimated Completion Date:	Parcel ID: Date Recorded: Page: Date Recorded: Name: Valuation: Total: Total: Total: Total Roofed Area Sq. Ft: All Weather Access: □ Yes □ No* (* <i>Access improvements required</i>) Legal Access: □ Yes □ No (* <i>Floodplain Dev. Permit required</i>) o Water Restrictions: □ Yes* □No Book Page Meter Reading: Meter Type Unit of Measure: Required: □ Yes □ No Rain barrels Required: □ Yes □ No
Owner Acknowledgment or Authorized Representative: Signature: By signing I acknowledge all information is true and accurate, and I author my property as related to this permit application. I agree and I understand the Santa Fe County Fire Prevention Division from requiring additional com- as adopted by the Board of County Commissioners.	ize Santa Fe County staff to conduct necessary inspections on that the issuance of any subsequent permits does not prevent
Type of Permit Issued:	Date:
Approved By:	Date:
Redlines 🗆 Yes 🗆 No Inspections Conducted: 🗆 Initial 🗆 Pre-Fi	nal 🗆 Final Certificate of Completion 🗖 Yes 🖾 No

Hot Water Re-Circulation System Development Affidavit

I/WE ______, being the owner(s) of tract/lot located in Section _____, Township _____North, Range _____East, N.M.P.M., and more commonly listed as having County Rural Address _______, Santa Fe County, New Mexico, being first duly sworn and under oath, do hereby swear or affirm the following:

- 1. The undersigned are owners of the above referenced lot; and
- 2. The Warranty Deed submitted with Development Permit Application No. ______, is a true an accurate description of above referenced lot; and
- As the owner(s), agent(s), or assign(s), agree that the development listed in item No.2 above shall be constructed in accordance with Santa Fe County Code, Ordinance No. Ordinance 2006-03 which requires that the following be included in said development: (circle one)
 - i. a hot water re-circulating system with time and temperature controls; or
 - ii. on-demand circulations system; or
 - iii. centrally located water heaters; or
 - iv. point of use water heaters; or
 - v. short hot-water line run distances; or
 - vi. smaller diameter piping; or
 - vii. "instant" hot fixtures; or
 - viii. super insulation methods; or
 - ix. other device or design approved by the Land Use Administrator
- 4. Furthermore, I/WE agree that this Affidavit will act as a codicil to the Warranty Deed associated with all conveyances and documents if the property is transferred in the future.

Owner's Signature

Owner's Signature

The foregoing instrument was acknowledged before me by the person(s) whose name(s) appear above, on this ______ day of ______, 20____

Notary Public

My Commission Expires



Fire Prevention Division

Fire Apparatus Access Driveway Turnarounds and Turnouts

Single Residential Lot

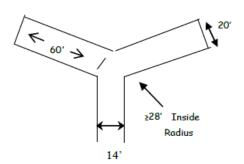
- Fire apparatus access driveways shall have an approved, all weather driving surface, capable of supporting the imposed load of fire apparatus.
- Driveways shall be located within 150'-0" of the furthest portion of the exterior of each structure.
- Dead-end driveways in excess of 150'-0" in length shall be provided with Emergency Vehicle Turnarounds.
- Emergency Vehicle Turnarounds shall not be located within the collapse zone of any existing or proposed structure. The collapse zone is a horizontal distance surrounding any existing or proposed structure equal to the structure maximum height, in feet, multiplied by 1.5.
- Driveways in excess of 250'-0" in length and less than 20'-0" in width **may require** Turnouts in addition to Turnarounds.
- Emergency Vehicle Turnarounds shall remain vacant at all times.

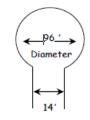
The following is a list of distance, width, and height requirements related to residential Driveways, Emergency Vehicle Turnarounds and Turnouts:

- The minimum driveway width shall be 14'-0", not including ditches.
- The minimum unobstructed vertical clearance shall be 13'-6" across all of any driveway.
- The minimum radius for any inside corner or curve shall be 28'-0".
- The maximum slope of the Turnaround shall not exceed 10% in grade.
- The maximum slope of the driveway shall not exceed 15% in grade.



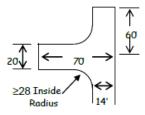
Emergency Vehicle Turnarounds

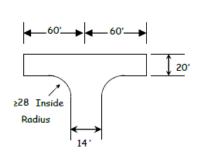




Driveway Cul-de-sac

Driveway Y Turn

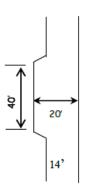




Driveway Hammerhead

Driveway Alternative Hammerhead





Driveway Turnout Requirement



REQUEST FOR MANUFACTURED HOUSING PERMIT ALL FIELDS MUST BE COMPLETED OR REQUEST WILL BE DENIED (PLEASE PRINT)

Company Name:		License No:							
Contact No:	Fax No:								
Email Address:									
HOMEOWNERS INSTALLING HOME OR FOUNDATION WILL REQUIRE A TEST (\$50) & DIVISION ACKNOWLEDGEMENT									
Owners Name (Print):	elephone No.:								
Owners Email Address (if applicable):									
Owners Address:									
City :	Zip:	County:							
Site Address:									
City :	Zip:	County:							
MH Park Name (if applicable):									
Directions to location (Please be specific):									

MOBILE HOME INFORMATION ALL FIELDS MUST BE COMPLETED

Manufacturer:	Size:x		New	Used		LP Gas:YN			
Number of Units:	Single Wide		Double Wide Triple Wide						
Serial #(s):				HUD Mob bel #(s):	pile Home (Built prior to 06/15/1976)				
Sold By:	Dealer License No.:								

TYPE OF PERMIT

Prior Plan approval on all Permanent Foundation and Alternative Systems requires a New Mexico Licensed Engineer or Manufacturer Design as required by Manufactured Housing Rules and Regulations 14.12.5.11(s).

□ Installation \$6	65		Permanent Foundation \$65						□ Installation & Foundation \$65					
Alternative Sys		□ AFS		MAGNU		RD	OLIVER			SAC				
(Check One)	Vecto	r 🗆	□ SURE SAFE □			ound Xi2	2	□ Cor	ncrete Xi2		Asphalt Xi2		
*All Installation/ Installation & Foundation Permits														
	Pleas	e specify th	ne licer	nse numb	er for t	he contrac	tor con	npleting	g the sco	ope of work	-			
Blocking:	S	ewer:	W	ater	Ele	ctrical : Gas		∃as:	Foundation:		Ot	her	:	
	Altera	ation, Mod	ificatio	n, Repair	s $65 ($	Plan Revie	ew Req	uired *): Pleas	e check one	1			
Pressure Tes	st 🗆	Merc Te	c Test 🛛 Roofing*			🗆 Stuce	□ Stucco* □			Door* Like for Like?Y!				
□ Solar (Roof)*	*	Gas Yard	l Line	🗆 Sidii	ng*	🗌 Skirti	ng*	🗆 Wi	ndow*	Like for Lil	ke?	Y _	N	
Electrical		HVAC	Other (Specify):											
Misc. Permits and fees														
Refurbishing \$120						ddition	al Inspec	ction \$65	5					
Gas Conversion (Plumbing Only) \$15. Please specify type of work performing														
 Air pressure for gas line 				Replacement of Orifices										
Department Use Only														
Check No: Money Order N					No:			1	Amount:					

