



# Planning & Zoning Department

## Master Application

<b>Staff Use Only</b>	
Project Name:	Terrace Falls Estates
File Number:	ANN-219-21
Related Applications:	SPP-094-21

### Type of Application

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Annexation        | <input type="checkbox"/> Planned Unit Development/MPC   |
| <input type="checkbox"/> Appeal                       | <input type="checkbox"/> RV Park                        |
| <input type="checkbox"/> Building & Site Design       | <input checked="" type="checkbox"/> Subdivision         |
| <input type="checkbox"/> Comprehensive Plan Amendment | <input type="checkbox"/> Short                          |
| <input type="checkbox"/> Conditional Use Permit       | <input checked="" type="checkbox"/> Preliminary         |
| <input type="checkbox"/> Development Agreement        | <input type="checkbox"/> Final                          |
| <input type="checkbox"/> Modification                 | <input type="checkbox"/> Condo                          |
| <input type="checkbox"/> Home Occupation              | <input type="checkbox"/> Temporary Use Permit           |
| <input type="checkbox"/> Daycare                      | <input type="checkbox"/> Fireworks Stand                |
| <input type="checkbox"/> Kennel License               | <input type="checkbox"/> Vacation                       |
| <input type="checkbox"/> Commercial                   | <input type="checkbox"/> Variance                       |
| <input type="checkbox"/> Mobile Home Park             | <input type="checkbox"/> Zoning Map/Ordinance Amendment |
| <input type="checkbox"/> Legal Non-Conforming Use     | <input type="checkbox"/> Other: _____                   |

**You must attach any corresponding checklists with your application or it will not be accepted**

Applicant Name: Cleve & Murvelle Cushing Trust Phone: 208-860-4283

Applicant Address: 4681 W. Moon Lake Drive Email: clevecushing@gmail.com

City: Meridian State: ID Zip: 83646

Interest in property:  Own  Rent  Other: \_\_\_\_\_

Owner Name: Cushing Family Trust Phone: \_\_\_\_\_

Owner Address: Same as above Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contractor Name (e.g., Engineer, Planner, Architect): David A. Bailey

Firm Name: Bailey Engineering, Inc. Phone: 208-938-0013

Contractor Address: 1119 E. State Street, Ste. 210 Email: dbailey@baileyengineers.com

City: Eagle State: ID Zip: 83616

**Subject Property Information**

Address: E. Locust Lane  
 Parcel Number(s): R2886601100 ~~R2886600000~~ Total acreage: 48.52 Zoning: RS-12  
 Type of proposed use:  Residential  Commercial  Industrial  Other: \_\_\_\_\_  
 Project/Subdivision Name: Terrace Falls Estates  
 Description of proposed project/request: Request for Annexation and a single family residential subdivision  
 Proposed Zoning: RS-12 Acres of each proposed zone: 48.52

**Development Project Information (if applicable)**

Lot Type	Number of Lots	Acres
Residential	97	27.07 ac Lots/ 8.60 ac Roads
Commercial	0	N/A
Industrial	0	N/A
Common (Landscape, Utility, Other)	8	3.96 ac
Open Space	13	6.19 ac
<b>Total</b>	<b>118</b>	<b>45.82 ac</b>

**Please answer all questions that are relevant to your project**

Minimum square footage of structure: N/A Maximum building height: N/A  
 Minimum property size (s.f.): 12,000 Average property size (s.f.): 13,360  
 Gross density: 2.12 DU/AC Net density: ~~2.43 DU/AC~~ 3.58 du/ac  
 Type of dwelling proposed:  Single-family Detached  Single-family Attached  
 Duplex  Multi-family  Condo  Other: \_\_\_\_\_  
 Proposed number of units: 97  
 Total number of parking spaces provided: N/A  
 % of open space/common area: Usable: 6.19 AC/12.76% Gross: 10.15 AC/20.92%

**Completed applications and checklists can be sent to: [pzall@cityofnampa.us](mailto:pzall@cityofnampa.us)**

**Authorization**

Print applicant name: Cleve Cushing  
 Applicant signature:  Date: 9/3/2021

**City Staff**

Received by: JKW Received date: 9/3/21