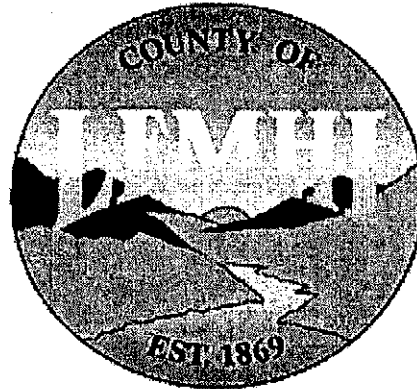


# Lemhi County Planning & Zoning



## *Lot Split Application*

200 Fulton Suite #204  
Salmon, Idaho 83467  
Phone: (208)756-6913 ext. 263  
Fax: (208)756-6915  
Email: [buildingdept@lemhcountyidaho.net](mailto:buildingdept@lemhcountyidaho.net)  
Website: [lemhcountyidaho.org](http://lemhcountyidaho.org)

## LOT SPLIT CHECKLIST

1.) There will be an initial fee of \$100.00 to begin the application process. This fee will be collected by the Planning and Zoning office. The location and size of the original parcel will determine how many splits will be allowed.

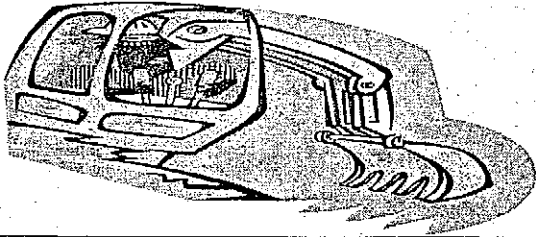
2.) Eastern Idaho Public Health will determine whether a septic can be put on each piece. By state law Eastern Idaho Public Health is required to charge an application fee plus an additional fee per lot created.

3.) You will be required to hire a surveyor who will survey the entire parcel and determine the legal description(s) of the splits. Surveying fees vary depending on the size and location of the property.

4.) The applicant or surveyor must circulate the lot split agency review & approval sheet and small scale development completion sheet to the various departments for approval, before submitting to Gary Goodman, Planning & Zoning Administrator.

5.) The final plat will be brought to the Planning & Zoning office to obtain signatures of the various officials who are required to give approval by signing the signature page of the plat.

6.) The plat will then be approved and recorded by the Planning & Zoning office with Lemhi County Clerk's Office. The small scale development completion sheet along with the deeds shall be filed with the plat.



# Lemhi County Development Permit

Parcel# \_\_\_\_\_

Corresponding  
Permit # \_\_\_\_\_

Site Address: \_\_\_\_\_

(if one has not been assigned a parcel # will suffice)

### Owner Information

Name: \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

### Type of Development

*Please mark the applicable development(s)*

New Construction  
(must fill out  
section below)

Lot Split

Lot Line  
Adjustment

Record of Survey

Residential

- New Construction
  - Single Family Dwelling
  - Multi-Family Dwelling
  - Addition
  - Alteration
  - Garage
    - Detached
    - Attached
  - Accessory structure
- Interior Remodel
- Manufactured/Modular Home
  - Permanent Foundation
  - Pier set up
- Home Occupation
- Other: \_\_\_\_\_

Commercial

- New Construction
  - Multi-Family Dwelling
  - Addition
  - Alteration
  - Storage
    - Detached
    - Attached
  - Interior Remodel
  - Other: \_\_\_\_\_

### Required Documentation to be Provided

#### Provided

- Plot Plan and or Plat/Record of Survey
- showing setback distances from all property lines, ditches, streams, rivers, roadways and easements (public and/or private)
  - Provide compliance with safe access
  - All newly created roads and or driveways utilizing a state or federal highway must have a valid permit from ITD

#### Checked for Compliance

(to be filled out by the Planning & Zoning Department)

- Complies
- Not Applicable

<input type="checkbox"/> Flood Plain designation- If your development is located within a flood hazard area an elevation certificate and Flood Plain Development Permit is required.	<input type="checkbox"/> Complies <input type="checkbox"/> Not Applicable
<input type="checkbox"/> Home occupation plan of operation if applicable.	<input type="checkbox"/> Complies <input type="checkbox"/> Not Applicable
<input type="checkbox"/> Army Corp Permit must be provided if your project is within a wetland area. Please contact (208) 522-1645	<input type="checkbox"/> Complies <input type="checkbox"/> Not Applicable
<input type="checkbox"/> Proof that a valid septic permit has been issued.	<input type="checkbox"/> Complies <input type="checkbox"/> Not Applicable

I hereby certify that the information submitted is true and correct to the best of my knowledge. I have read and understand the Lemhi County Development Code and proceed with development accordingly.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**Permit Action**

**Permit Approved:** The information submitted for the proposed project was reviewed and found in compliance with the applicable codes.

**Permit Denied:** The information submitted for the proposed project was reviewed and found NOT in compliance with the applicable codes. ( explanation on file)

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

# Lot Split Permit Application

**A separate application must be filed for each original parcel**  
**Permit #**

---

Original Parcel Number:   Original Parcel Size:   Number of Proposed Splits:	Parcel Created	Size:	Remaining Splits:		
	A:				
	B:				
	C:				
	D:				
	E: Or Remainder				
1. Legal Description: <b>Attach Proposed Plat &amp; Deeds</b>		Section:	Township:	Range:	Zoning District:
2. Owner Name:	Address:		Telephone:		
3. Engineer/Surveyor:	Address:		Telephone:		
4. This signature acknowledges that all information on this application and the attached plat is true and correct, AND the activity permitted will be conducted in full compliance with all ordinances of the Lemhi County Development Code, State and Federal Law; AND that the activity conducted will be in full compliance with any and all conditions imposed on this permit's approval of previous permits (special use permits, variance etc.) required. This permit expires in one year if the activity authorized is not commenced OR if the activity is commenced but abandoned for one year at any time before completion.					
Applicant or Authorized Signature: _____ Date: _____					
Conditions Imposed:			Checked for Compliance		
			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply		
Permit Approved By: _____			Application Fee: <b>\$100.00</b> Date: _____		

Your Permit is void if your check does not clear.

LEMHI COUNTY  
LOT SPLIT AGENCY REVIEW & APPROVAL

Current Owner: \_\_\_\_\_ Please obtain all signatures in the order they are listed

<p>Eastern Idaho Public Health Comments or Conditions of Approval:</p> <p>Signature: _____ Date Approved: _____</p>
<p>Lemhi County Road &amp; Bridge Department Comments or Conditions of Approval:</p> <p>Signature: _____ Date Approved: _____</p>
<p>Idaho Department of Transportation (Note: Where any driveways or roads access a state or federal highway and access permit shall be obtained from the Idaho Department of Transportation)</p> <p>Signature: _____ Date Approved: _____</p>
<p>Lemhi County Assessors (Note: Assessor must review deed &amp; plat before it can be recorded) Comments or conditions of Approval:</p> <p><b>Note: The Assessors Office Requires That Recorded Legal Descriptions Meet Idaho Code In Order For The Assessors Office To Process The Recorded.</b></p> <p>Signature: _____ Date Approved: _____</p>
<p>Lemhi County Building Department Comments or Conditions of Approval:</p> <p>Signature: _____ Date Approved: _____</p>

Subscribed and Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

NOTARY PUBLIC in and for the \_\_\_\_\_  
State of Idaho \_\_\_\_\_  
My commission expires \_\_\_\_\_

Your Permit is void if your check does not clear.

11/11

**Lemhi County Completion of Small Scale Development Requirements**

Pursuant to \_\_\_\_\_ Date recorded: \_\_\_\_\_ As instrument # \_\_\_\_\_

RP # : \_\_\_\_\_

Developer Name: \_\_\_\_\_

**Idaho Power or Power provider in your area**

Date of project completion: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Comments: Please Attach

*(This signature is acknowledging that there is availability for phone and/or power)*

**Telephone In Your Area**

Date of project completion: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Comments: Please Attach

*(This signature is acknowledging that there is availability for phone and/or power)*

**Lemhi County Road & Bridge**

Date of project completion: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Comments: Please Attach

**Idaho Department of Transportation**

Date of project completion: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Comments: Please Attach

*(Please see IDT if you project involves a State or Federal Highway)*

**Eastern Idaho Public Health Department**

Date of test hole completion: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Comments: Please Attach

*(Please see EIPH if your development includes Central water and/or Sewer)*

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

**Lemhi County Planning & Zoning Office**

State of Idaho

County of Lemhi

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned a Notary Public in and for the State of Idaho personally appeared \_\_\_\_\_ known to me to be the person who executed the within instrument and acknowledged to me to be the same.

\_\_\_\_\_  
Notary Public for the State of Idaho

Residing at: \_\_\_\_\_

Comm. Expires: \_\_\_\_\_

Seal:

*\*\*This document must be submitted to the Lemhi County Planning & Zoning Department prior to having your Small Scale Development plat recorded. This document is subject to change. ( Chapter 10 of the Lemhi County Development Code)*



# Lemhi County Floodplain Development Permit

Parcel #	Site Address: <small>(if one had not been assigned the parcel # will suffice)</small>	Permit# FP-	
Owner Information			
Name:	Telephone ( )		
Mailing Address:	City:	State:	Zip:
Contractor Information			
Contractor Name:	Telephone ( )		
Company Address:	City:	State:	Zip:
Company Mailing Address:	City:	State:	Zip:

### Description of Development

Type of Development:

- |  |  |
|--|--|
| <p><input type="checkbox"/> New Construction</p> <p><input type="checkbox"/> Substantial Improvement (&gt;50%)<br/><small>(Requires detailed improvement list)<br/>(Requires appraisal/assessment value)</small></p> <p><input type="checkbox"/> Improvement (&lt;50%)<br/><small>(Requires detailed improvement list)<br/>(May require appraisal/assessment value)</small></p> <p><input type="checkbox"/> Channelization<br/><small>(Requires "No-Rise" Certification)</small></p> <p><input type="checkbox"/> Fill<br/><small>(Requires placement of fill certification)</small></p> <p><input type="checkbox"/> Bridge/Culvert<br/><small>(Requires "No-Rise" Certification)</small></p> <p><input type="checkbox"/> Levee<br/><small>(Requires "No-Rise" Certification)</small></p> | <p><input type="checkbox"/> Single Family Dwelling</p> <p><input type="checkbox"/> Multi-Family Dwelling</p> <p><input type="checkbox"/> Manufactured Home<br/><small>(Requires Anchoring Certification)</small></p> <p><input type="checkbox"/> Nonresidential</p> <p><input type="checkbox"/> Rehabilitation (&gt;50%)</p> |
|--|--|

Other/Written Explanation: PLEASE ATTACH

<b>Flood Hazard Data</b>
--------------------------

Water Course Name: \_\_\_\_\_

Special Flood Hazard Designation Zone: \_\_\_\_\_

Is Development in Floodway?      No: \_\_\_\_\_      Yes: \_\_\_\_\_ (Yes requires "No-Rise" Certification, development causes no increase in existing footprint or does not displace water)

Base Flood Elevation (BFE) at the development site: \_\_\_\_\_

If no BFE is available indicate highest adjacent grade: \_\_\_\_\_

Source of BFE determination: \_\_\_\_\_

If no BFE is available indicate the source of elevation determination: \_\_\_\_\_

Elevation required for lowest floor (NGVD): \_\_\_\_\_      Elevation Required for floodproofing (NDVD): \_\_\_\_\_

<b>Flood Hazard Data</b>
--------------------------

I hereby certify that the information submitted is true and correct to the best of my knowledge.  
I have read and understand the Lemhi County Development Code and proceed with development accordingly.  
I will submit a post construction elevation certificate (on required structures)

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Proposed Flood Plain Development Review Checklist

Name: _____	Permit # FP- _____
-------------	--------------------

<u>Forms Required</u>	<u>Form List</u>	<u>Compliance</u>
Current Appraisal or Assessor's Valuation of Structure Value: _____ Source: _____		_____
Elevation Certificate lowest floor elevation is at or above BFE		_____
Elevation Certificate lowest floor elevation is at or above highest adjacent grade.		_____
Placement of fill certification		_____
Manufactured Home Anchoring Certification		_____
Engineering "No Rise" Certification		_____
Engineering data provided for "No Rise" Certification		_____
Acceptance of Data by regional FEMA office		_____
Other: _____		_____
_____		_____
_____		_____

## Permit Action

\_\_\_\_\_ **Permit Approved:** The information submitted for the proposed project was reviewed and is in compliance with approved flood plain management standards.

\_\_\_\_\_ **Permit Denied:** The proposed project does not meet approved flood plain management standards (explanation on file)

\_\_\_\_\_ **Variance Granted:** A variance was granted from the base (100 year) flood elevations established by FEMA consistent with variance requirements of NFIP regulations Part 60.6 (Variance action documentation is on file)

\_\_\_\_\_ Floodplain Administrators Signature

\_\_\_\_\_ Date

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_