

**AGENDA  
CITY OF FALLON – BOARD OF ADJUSTMENT  
55 West Williams Avenue  
Fallon, Nevada  
July 1, 2019 – 6:00 p.m.**

The City of Fallon Board of Adjustment will meet on July 1, 2019 at 6:00 p.m. in the City Council Chambers, City Hall, 55 West Williams Avenue, Fallon, Nevada.

Items on the agenda may be taken out of order. The Board of Adjustment may combine two or more agenda items for consideration. The Board of Adjustment may remove an item from the agenda or delay discussion relating to an item on the agenda at any time. Unless otherwise allowed by the Board of Adjustment, public comments by an individual will be limited to five minutes.

1. Certification of compliance with posting requirements.
2. Public Comments: General in nature, not relative to any agenda items.  
No action may be taken on a matter raised under this item until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (For discussion only)
3. Consideration and possible approval of an application by Dustan Drinkut, 981 St. Patrick Court (APN #001-295-07), for a variance in an R-1 zone to encroach approximately 3 feet into the 5-foot side and rear setbacks in order to construct an enclosed metal carport. (For possible action)
4. Consideration and possible approval of an application by George Byars, 742 Keppel Street (APN #001-042-22), for a variance in an R-1 zone to encroach approximately 10 feet into the 20-foot rear setback in order to construct a patio cover. (For possible action)
5. Consideration and possible approval of an application by Carolynne Daniels, 441 Michael Drive (APN #001-071-11), for a variance in an R-1 zone to operate an in-home daycare business. (For possible action)
6. Consideration and possible approval of an application by Parkside Bible Fellowship, 485 Tedford Lane (APN #001-352-03), for a variance in an R-2 zone to encroach approximately 5 feet-8 inches into the 15-foot front setback in order to construct an addition to the church. (For possible action)
7. Public Comments. (For discussion only)

This agenda has been posted on or before 9:00 a.m. on June 26, 2019 at City Hall, District Court Building, Churchill County Office Complex, Churchill County Public Library and posted to the City's website (<https://fallonnevada.gov>) and the State of Nevada public notice website (<https://notice.nv.gov/>). Members of the public may request the supporting material for this

meeting by contacting Elsie M. Lee, Deputy City Clerk, City Clerk's Office, City Hall, 55 West Williams Avenue, Fallon, Nevada, (775) 423-5104. The supporting material for this meeting is also available to the public on the City's website (<https://fallonnevada.gov>) and the State of Nevada public notice website (<https://notice.nv.gov/>).

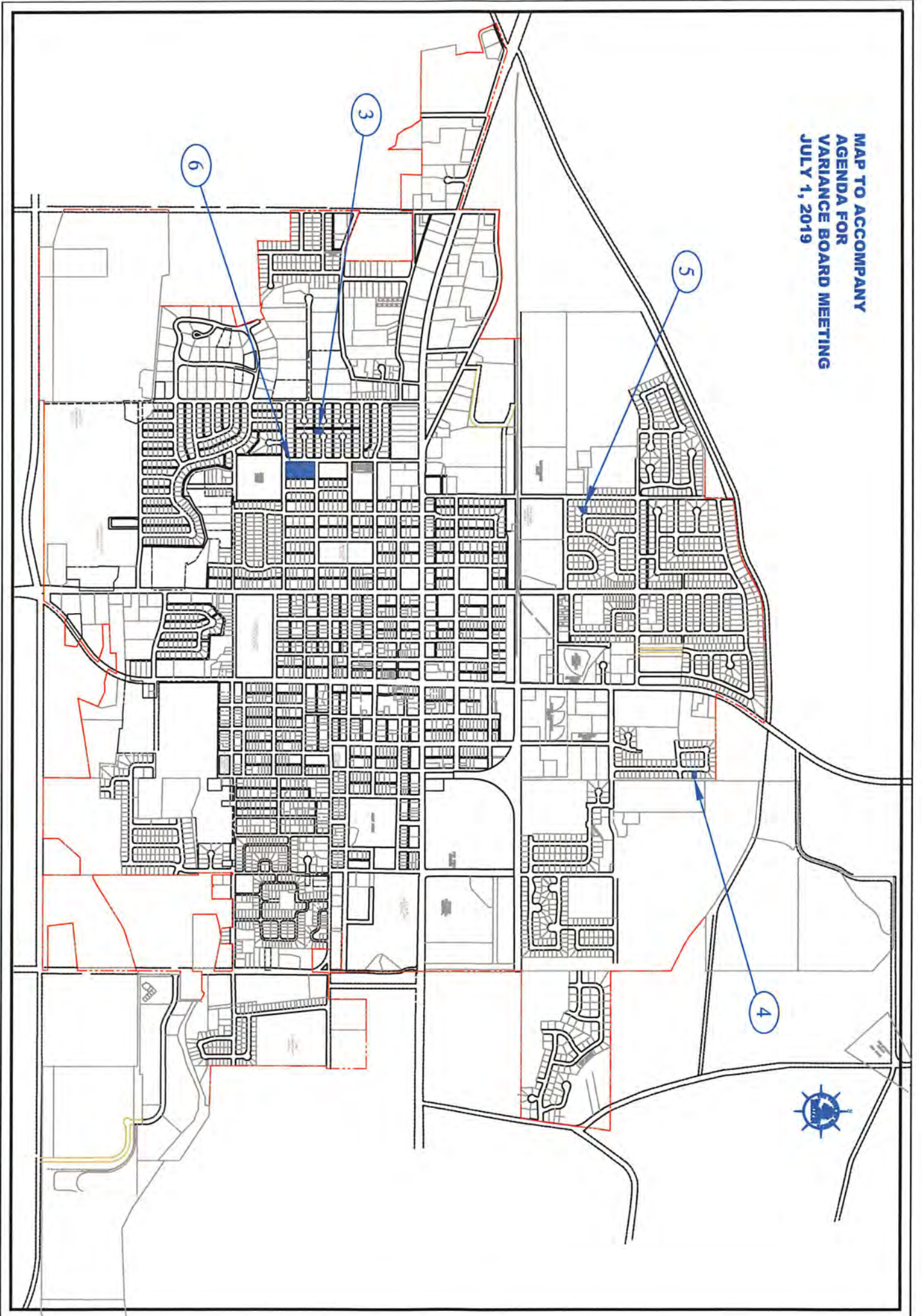


Elsie M. Lee

NOTICE TO PERSONS WITH DISABILITIES: Reasonable effort will be made to assist and accommodate physically handicapped persons desiring to attend the meeting. Please call the City Clerk's Office at 423-5104 in advance so that arrangements may be conveniently made.



MAP TO ACCOMPANY  
AGENDA FOR  
VARIANCE BOARD MEETING  
JULY 1, 2019





# City of Fallon Board of Adjustment Meeting

## July 1, 2019

### Item 3

Consideration and possible approval of an application by Dustan Drinkut, 981 St. Patrick Court (APN #001-295-07), for a variance in an R-1 zone to encroach approximately 3 feet into the 5-foot side and rear setbacks in order to construct an enclosed metal carport. **(For possible action)**



Paid \$50  
6-4-19

City of Fallon

VARIANCE APPLICATION FOR: \_\_\_\_\_ Business or \_\_\_\_\_ Home Improvement  
Please check one

✓ Applicant: Dustan Drinkut  
✓ Address: 981 ST Patrick CT  
✓ Telephone Number: 725-426-9383  
X Owner \_\_\_\_\_ In Escrow \_\_\_\_\_ Leasehold \_\_\_\_\_

Purchasers in escrow must file proof of title with Variance Board before granted variances are effective.

Legal Description of Property Involved: Lot \_\_\_\_\_, Blk \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street and Number \_\_\_\_\_

(Attach sheet for Metes & Bounds Description)

✗ Variance Requested: Encroachment 3' North side of the property  
Encroachment 3' West side of the property. Encroachment 5' East side  
Ordinance Provisions: \_\_\_\_\_ Zoning \_\_\_\_\_  
Deed Restrictions \_\_\_\_\_

Former Restrictions \_\_\_\_\_  
Expiration Date: \_\_\_\_\_

Applicants must present evidence of ability and intent to proceed with actual construction within six months of the above filing date.

✗ It is not possible for me to use the above described property in the way it is zoned because: I need a adequate size building in order to store my tools and equipment. And do vehicle maintenance without being exposed to the elements.  
My inability to use the above described property in the way I desire causes an undue hardship on me because: (Financial hardship is not considered valid). The space that is required to perform tasks as a home owner.

The above described property is different from other properties in the same area zoned the same classification because: Of how the house sits on the property.

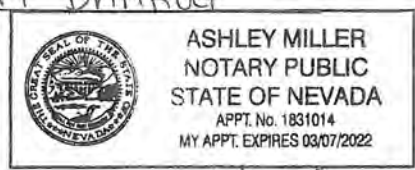
Use of the above-described property in the manner proposed by this application will not be detrimental to surrounding properties because: It's placed in the driveway utilizing the current space. And it takes any activities that are performed outside and then moved inside. I.E. Automotive repair. (Example)

PLOT PLANS MUST ACCOMPANY THIS APPLICATION

I, Dustan Drinkut owner in fee of the above described property state that this application for a variance has been made with my full knowledge and consent and the facts stated above are true to the best of my knowledge and belief.

Owner: Dustan Drinkut  
Address: 981 ST Patrick CT  
Phone #: 725-426-9383  
Signature: [Signature]

{Nevada  
{County of Churchill  
Signed and sworn to before me on 5/28/19  
by Dustan Drinkut



All the above facts as stated herein are correct to my knowledge and belief.

Applicant: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Signature: \_\_\_\_\_

{Nevada  
{County of \_\_\_\_\_  
Signed and sworn to before me on \_\_\_\_\_  
by \_\_\_\_\_

Ashley Miller

COMPUTATION SHEET

SHEET 1 OF 1

981 ST Patrick C.T.

Dustin Drinkut

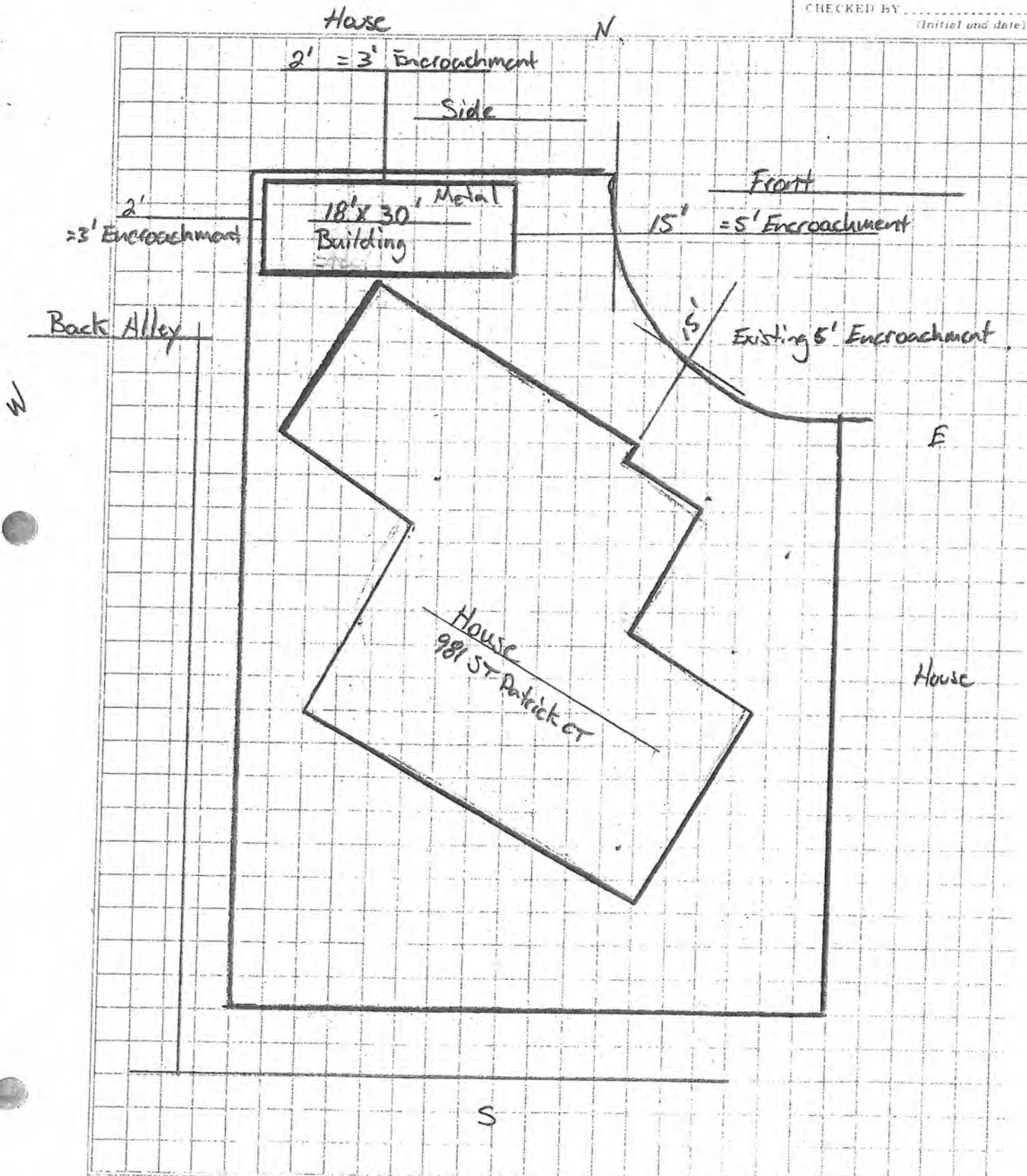
775-426-9383

MADE BY

Subject:

CHECKED BY

(Initial and date)





5-28-19

Dustin Drinkut 981 ST Patrick CT Fallon NV

225-426-9383



## REGULAR / A-FRAME 18'-0" WIDE CARPORT STYLE BUILDINGS

### DESIGN NOTES

1. ALL CONSTRUCTION SHALL BE PROVIDED IN ACCORDANCE WITH IBC 2012, OSHA, AISC 360, AISI 100, ASCE 7-10, AWS D 1.3 CODES AND ALL APPLICABLE LOCAL REQUIREMENTS.
2. BASE CONNECTIONS SHALL BE PROVIDED AS SHOWN ON FOUNDATION DETAILS SHEET.
3. ALL MATERIALS IDENTIFIED BY MANUFACTURER NAME MAY BE SUBSTITUTED WITH MATERIAL EQUAL OR EXCEEDING ORIGINAL.
4. ALL SHOP CONNECTIONS SHALL BE WELDED CONNECTIONS.
5. ALL FIELD CONNECTIONS SHALL BE #12X1" SD5 (ESR-2196 OR EQ).
6. STEEL SHEATHING SHALL BE 28GA. CORRUGATED GALV. OR PAINTED STEEL - MAIN RIB HT. 3/4" (FY=50KSI) OR EQ.
7. ALL STRUCTURAL LIGHT GAUGE TUBING AND CHANNELS SHALL BE GRADE 50 STEEL.
8. STRUCTURAL TUBE TS2 1/2"x2 1/2" - 14GA. IS EQUIVALENT TO TS2 1/4"x2 1/4" - 12GA AND EITHER ONE MAY BE USED IN LIEU OF THE OTHER.
9. ALL DESIGN CRITERIA MUST BE INCREASED TO THE NEXT HIGHER INCREMENT BASED ON THE TABLES ON PAGE 4. NO INTERPOLATION IS ALLOWED.

### DESIGN CRITERIA

- PREVAILING CODE: IBC 2012  
USE GROUP: U (CARPORTS, BARNS)  
RISK CATEGORY: I
1. DEAD LOAD (D)  $D = 4$  PSF
  2. ROOF LIVE/SNOW LOAD (Lr)  
 $Lr = 20 - 61$  PSF  
(AS PER SNOW LOAD SEE TABLE 4)
  3. SNOW LOAD (S)  
GROUND SNOW LOAD  $P_g = 20 - 90$  PSF  
IMPORTANCE FACTOR  $I_s = 0.8$   
THERMAL FACTOR  $C_t = 1.2$   
EXPOSURE FACTOR  $C_e = 1.0$   
ROOF SLOPE FACTOR  $C_s = 1.0$
  4. WIND LOAD (W)  
BASIC WIND SPEED  $V_{ULT} = 105 - 130$  MPH  
EXPOSURE C
  5. SEISMIC LOAD (E)  
DESIGN CATEGORY D  
IMPORTANCE FACTOR  $I_e = 1.00$
- LOAD COMBINATIONS:
1.  $D + (Lr \text{ OR } S)$
  2.  $D + (0.6W \text{ OR } \pm 0.7E)$
  3.  $D + 0.75 (0.6W \text{ OR } \pm 0.7E) + 0.75 (Lr \text{ OR } S)$
  4.  $0.6D + (0.6W \text{ OR } \pm 0.7E)$

### DRAWING INDEX

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MANUFACTURED BY:



457 N. Broadway,  
Joshua, TX 76058  
1-866-730-9865

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5911 Renaissance Place, Suite B • Toledo, OH 43623  
Tel. 419-599-1883 • Fax. 419-599-0555  
www.aandengineering.com

### DRAWING INFORMATION

PROJECT: 18'-0" WIDE BUILDINGS  
LOCATION: STATE OF NEVADA  
PROJECT NO.: 233-19-0059  
SHEET TITLE:

### COVER SHEET

SHEET NO.: 1 / 11

DRAWN BY: LAK DATE: 1/16/19

CHECKED BY: OAA DATE: 1/16/19

### LEGAL INFORMATION

- ANY DUPLICATION OF THIS DRAWING IN WHOLE OR PART IS STRICTLY FORBIDDEN. ANYONE DOING SO WILL BE PROSECUTED UNDER THE FULL EXTENT OF THE LAW.  
- DRAWINGS VALID UP TO 1 YEAR FROM DATE OF ISSUE.

SEAL:



### CUSTOMER INFORMATION

OWNER:  
ADDRESS:

### DESIGN LOADS

GROUND SNOW:

ROOF LIVE LOAD:

BASIC WIND SPEED:

### BUILDING INFORMATION

WIDTH:

LENGTH:

HEIGHT:

FRAME TYPE:

☐ A-FRAME  
☐ REGULAR

ENCLOSURE TYPE:

☐ FULL  
☐ PARTIAL  
☐ OPEN

### CERTIFICATION VALIDITY NOTICE

DATE OF EXPIRATION: JAN 16 2020

CERTIFICATION ON THESE DRAWINGS IS  
VALID FOR ONE YEAR FROM DATE OF ISSUE

DATE EXPIRES: 12/31/2020

DATE SIGNED: JAN 16 2019

TABLE 2.1: MEMBER PROPERTIES

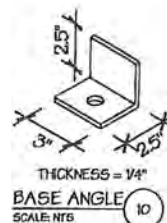
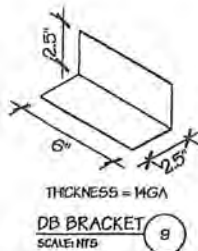
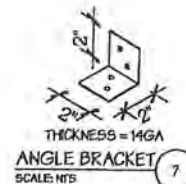
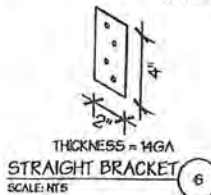
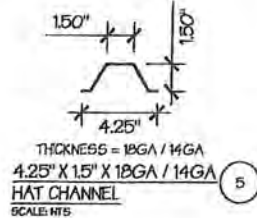
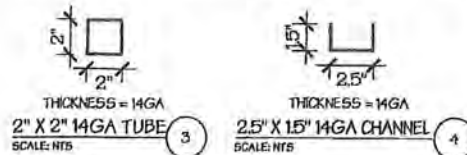
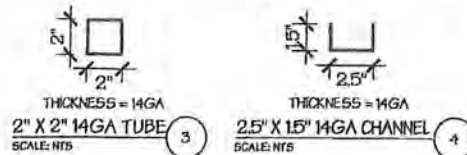
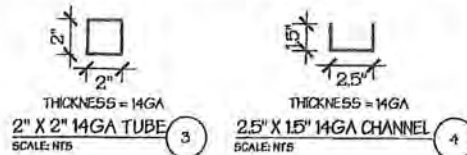
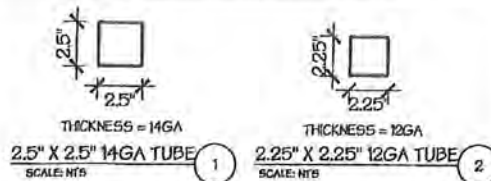
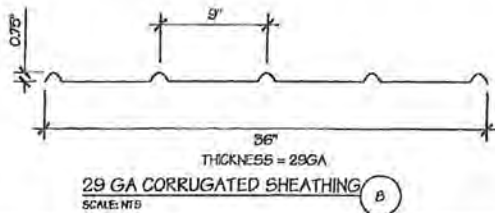
NO.	LABEL	PROPERTY	DETAIL NO.
1	COLUMN POST	2.5" X 2.5" X 14GA TUBE	1
2	ROOF BEAM	2.5" X 2.5" X 14GA TUBE	1
3	BASE RAIL	2.5" X 2.5" X 14GA TUBE	1
4	PEAK BRACE	2.5" X 2.5" 14GA CHANNEL	4
5	KNEE BRACES	2.5" X 1.5" 14GA CHANNEL	4
6	CONNECTOR SLEEVE	2.25" X 2.25" X 12GA TUBE	2
7	BASE ANGLE	2.5" X 2.5" X 3" LG. 1/4" ANGLE	10
8	PURLIN	4.25" X 1.5" X 18GA / 14GA HAT CHANNEL	5
9	GIRT	4.25" X 1.5" X 18GA / 14GA HAT CHANNEL	5
9A	OPT. END WALL GIRT	2.5" X 1.5" 14GA CHANNEL	1
10	SHEATHING	29 GA CORRUGATED SHEET	8
11	END WALL POST	2.5" X 2.5" X 14GA TUBE	1
12	DOOR POST	2.5" X 2.5" X 14GA TUBE	1
13	SINGLE HEADER	2.5" X 2.5" X 14GA TUBE	1
14	DOUBLE HEADER	DBL. 2.5" X 2.5" X 14GA TUBE	1
15	SERVICE DOOR / WINDOW FRAMING	2.5" X 2.5" X 14GA TUBE	1
16	ANGLE BRACKET	2" X 2" X 2" LG. 14GA ANGLE	7
17	STRAIGHT BRACKET	2" X 2" X 4" LG. 14GA PLATE	6
18	PB SUPPORT	2.5" X 2.5" X 14GA TUBE	1
19	DIAGONAL BRACE	2" X 2" X 14 GA TUBE	3
20	GABLE BRACE	2" X 2" X 14 GA TUBE	3
21	DB BRACKET	2.5" X 2.5" X 6" LG. 14GA ANGLE	9
22	TRUSS SPACER	2.5" X 2.5" X 14GA TUBE	1
23	ALL FASTENERS	#12 X 1" SELF-DRILL SCREWS (ESR-2198 OR EQ) W/ NEOPRENE/STEEL WASHER	

TABLE 2.2: SHEATHING FASTENER SCHEDULE

LOCATION	CORNER PANELS	SIDE LAP'S	EDGE LAP'S	ELSEWHERE
BRACING	6" C/C	MIN 1	4 1/2" C/C	9" C/C

FASTENER TYPE: #12X1" SELF-DRILL SCREWS (ESR-2198 OR EQ) W/ NEOPRENE/STEEL WASHER

\*SEE TYP. SHEATHING FASTENER SCHEDULE DIAGRAM ON PAGE 8.



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457 N. Broadway,  
Joshua, TX 76058  
1-866-730-9865

ENGINEERED BY:



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3911 Rosalind Ave, Suite B • Toledo, OH 43620  
Tel: 419-595-1881 • Fax: 419-595-6953  
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## DRAWING INFORMATION

PROJECT: 18'-0" WIDE BUILDINGS

LOCATION: STATE OF NEVADA

PROJECT NO.: 233-19-0059

SHEET TITLE:

## SCHEDULES &amp; MEMBER SECTIONS

SHEET NO.: 2 / 11

DRAWN BY: LAK DATE: 1/16/19

CHECKED BY: OAA DATE: 1/16/19

## LEGAL INFORMATION

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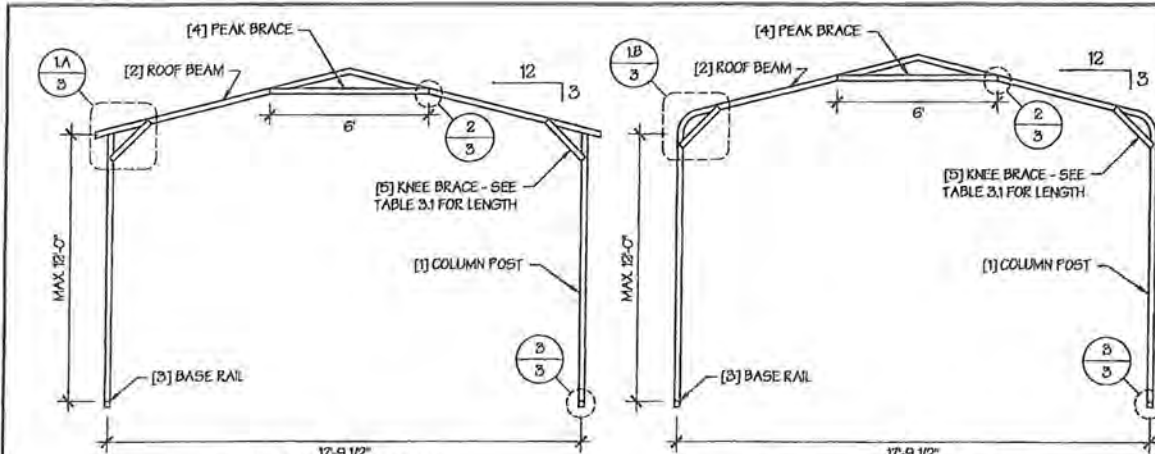
SEAL:



DATE EXPIRES: 12/31/2020

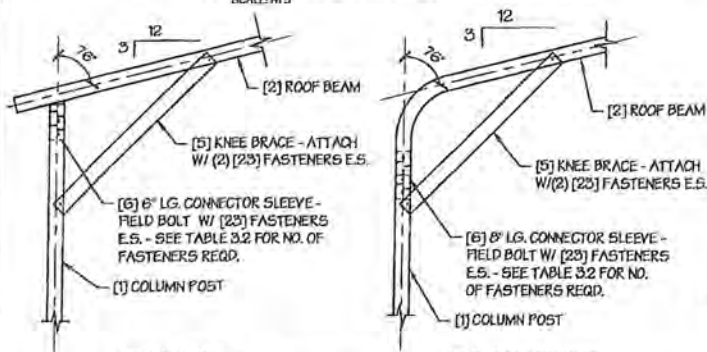
DATE SIGNED: JAN 16 2019





□ TYP. A-FRAME SECTION  
SCALE: NTS

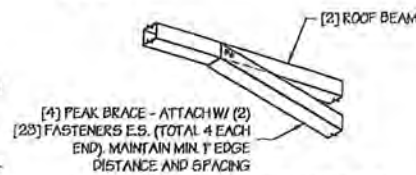
□ TYP. REGULAR FRAME SECTION  
SCALE: NTS



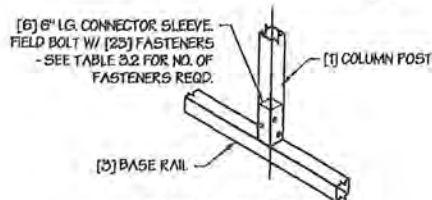
□ A. A-FRAME

EAVE DETAIL  
SCALE: NTS

□ B. REGULAR FRAME



PEAK BRACE CONNECTION DETAILS  
SCALE: NTS



BASE DETAIL  
SCALE: NTS

TABLE 3.1: KNEE BRACE SCHEDULE

EAVE HEIGHT	KNEE BRACE LENGTH
□ UP TO 8'	24"
□ 9' TO 12'	36"

TABLE 3.2 FASTENER SCHEDULE

WIND SPEED (MPH)	NO. OF FASTENERS
□ 125 TO 125	4
□ 130 TO 135	6
□ 140 TO 140	8

NOTE: COLUMN POST MAY BE ADJUSTED 1/8" FOR LEVELING.  
MANUFACTURER IS NOT RESPONSIBLE FOR LEVELING OF GROUND  
AND/OR CONCRETE SURFACE PROVIDED BY OTHERS.

MANUFACTURED BY:



457 N. Broadway,  
Joshua, TX 76058  
1-866-730-9865

ENGINEERED BY:



A.A.A. ENGINEERING

CIVIL & STRUCTURAL

2011 Renaissance Blvd, Suite B • Tahleah, OK 74364

Tel: 405-299-1883 • Fax: 405-299-0251

www.aaa-engineers.com

#### DRAWING INFORMATION

PROJECT: 18'-0" WIDE BUILDINGS

LOCATION: STATE OF NEVADA

PROJECT NO.: 233-19-0059

SHEET TITLE:

FRAME SECTIONS &  
DETAILS

SHEET NO.: 3 / 11

DRAWN BY: LAK DATE: 1/16/19

CHECKED BY: OAA DATE: 1/16/19

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SEAL:



DATE EXPIRES: 12/31/2020

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TABLE 4: FRAME SPACING SCHEDULE

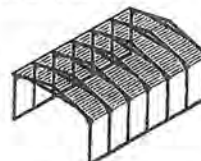
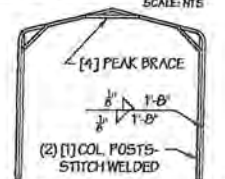
GROUND SNOW / ROOF LIVE LOAD (PSF)	■ TYPICAL ENCLOSED BUILDINGS							■ TYPICAL OPEN BUILDINGS						
	WIND SPEED (MPH)							WIND SPEED (MPH)						
	105	115	130	140	155	165	180	105	115	130	140	155	165	180
30 / 20	60	60	54/60	54	42	36	30	60	54/60	48/60	42/54	36/42	36	30
40 / 27	48/60	48/60	42/60	42/54	42	36	30	48/54	48/54	42/54	42/54	36/42	36	30
50 / 34	40/54	40/54	40/54	40/54	40/42	36	30	40/48	40/48	40/48	40/48	36/42	36	30
60 / 41	36/42	36/42	36/42	36/42	36/42	36	30	36	36	36	36	36	36	30
70 / 47	32/36	32/36	30/36	30/36	30/36	30/36	30	30	30	30	30	30	30	30
80 / 54	30	30	30	30	30	30	30	24	24	24	24	24	24	24
90 / 61	24	24	24	24	24	24	24	18	18	18	18	18	18	18
30 / 20	60	60	54/60	54	48	42/48	42	60	54/60	48/60	42/54	36/48	36/48	36/42
40 / 27	48/60	48/60	42/60	42/54	42/48	42/48	42	48/60	48/60	42/60	42/54	36/48	36/48	36/42
50 / 34	40/54	40/54	40/54	40/54	40/48	40/48	40/42	40/48	40/48	40/48	40/48	36/48	36/48	36/42
60 / 41	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42
70 / 47	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36
80 / 54	30	30	30	30	30	30	30	30	30	30	30	30	30	30
90 / 61	24	24	24	24	24	24	24	24	24	24	24	24	24	24
30 / 20	60	60	54/60	54	48	42/48	42	60	54/60	48/60	42/54	36/48	36/48	36/42
40 / 27	48/60	48/60	42/60	42/54	42/48	42/48	42	48/60	48/60	42/60	42/54	36/48	36/48	36/42
50 / 34	40/54	40/54	40/54	40/54	40/48	40/48	40/42	40/54	40/54	40/54	40/54	36/48	36/48	36/42
60 / 41	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42	36/42
70 / 47	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36	32/36
80 / 54	30	30	30	30	30	30	30	30	30	30	30	30	30	30
90 / 61	24	24	24	24	24	24	24	24	24	24	24	24	24	24

## NOTES:

1. FRAME SPACINGS ARE IN UNITS OF INCHES (IN).
2. WHERE TWO VALUES ARE SHOWN, THE HIGHER VALUE CAN ONLY BE USED FOR VERTICAL SHEATHING.
3. SNOW LOADS AND ROOF LIVE LOADS ARE IN POUNDS PER SQUARE FOOT (PSF). WIND SPEED IS 3 SEC. GUST IN MILES PER HOUR (MPH).
4. FOR VALUES THAT LIE BETWEEN TWO CELLS, THE HIGHER (MORE STRINGENT) VALUE HAS TO BE USED. INTERPOLATION BETWEEN CELLS IS NOT ALLOWED.

## GENERAL ENCLOSURE NOTES:

1. TYPICAL ENCLOSED AND OPEN BUILDINGS ARE AS SHOWN ON THE RIGHT.
2. THE MAX. BUILDING LENGTH FOR ENCLOSED BUILDINGS IS 50'-0". THIS CAN BE INCREASED BY ADDING A DOUBLE FRAME AT THE CENTER TO BREAK THE LENGTH OF THE BUILDING.
3. FOR ENCLOSED BUILDINGS, ONE END WALL CAN BE OPEN IF THE OTHER END WALL IS ENCLOSED. THE OPEN END WALL MUST HAVE EITHER GABLE FRAMING (SEE SHEET 8A) OR A DOUBLE END FRAME - SEE TYP. OPEN END WALL ON 3 SIDE ENCLOSED BUILDING.
4. OPEN BUILDINGS CAN HAVE PARTIALLY ENCLOSED SIDE WALLS UP TO 3' ENCLOSED.
5. ENCLOSED BUILDING WITH PARTIALLY ENCLOSED END WALLS NEED TO HAVE SIDE WALL BRACING TO SUPPORT THE PARTIALLY ENCLOSED END WALL. SEE SHEET 9 FOR TYPICAL BRACING DETAILS.

TYP. ENCLOSED BUILDING  
SCALE: NTSTYP. OPEN BUILDING  
SCALE: NTSTYP. OPEN END WALL ON 3  
SIDE ENCLOSED BUILDING  
SCALE: NTS

MANUFACTURED BY:



457 N. Broadway,  
Joshua, TX 76058  
1-866-730-9865

ENGINEERED BY:



A&A ENGINEERING  
CIVIL • STRUCTURAL

1011 Renaissance Plaza, Suite B • Toledo, OH 43623  
Tel: 419-893-1263 • Fax: 419-292-6853  
www.aandengineering.com

## DRAWING INFORMATION

PROJECT: 18'-0" WIDE BUILDINGS

LOCATION: STATE OF NEVADA

PROJECT NO.: 233-19-0059

SHEET TITLE:

SPACING SCHEDULES  
& ENCLOSURE NOTES

SHEET NO.: 4 / 11

DRAWN BY: LAK DATE: 1/16/19

CHECKED BY: OAA DATE: 1/16/19

## LEGAL INFORMATION

- ANY DUPLICATION OF THIS DRAWING IN WHOLE OR  
PART IS STRICTLY FORBIDDEN. ANYONE DOING SO WILL  
BE PROSECUTED UNDER THE FULL EXTENT OF THE LAW.  
- DRAWINGS VALID UP TO 1 YEAR FROM DATE OF ISSUE.

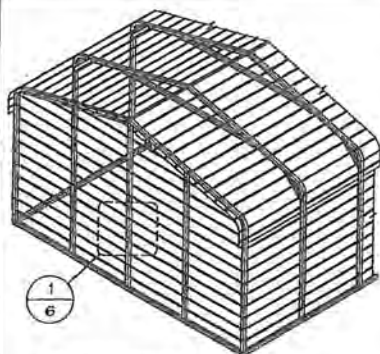
SEAL:



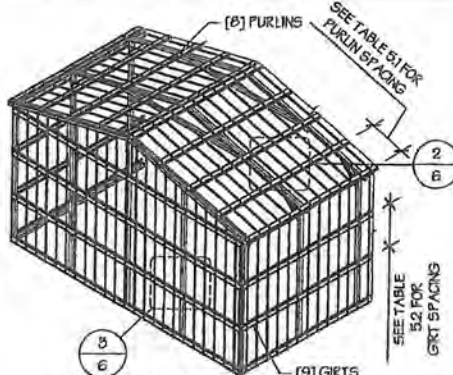
DATE EXPIRES: 12/31/2020

DATE SIGNED: JAN 16 2019





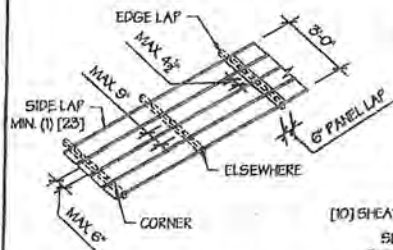
☐ TYP. HORIZONTAL SHEATHING  
SCALE: NTS



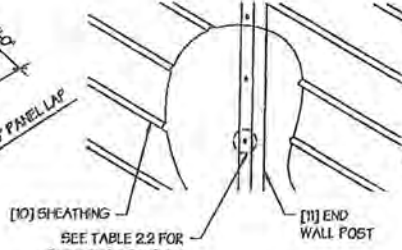
☐ TYP. VERTICAL SHEATHING  
SCALE: NTS

#### GENERAL SHEATHING NOTES:

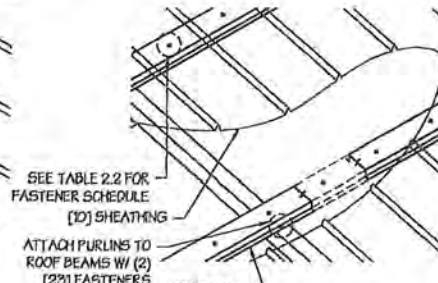
1. REGULAR STYLE BUILDINGS CAN ONLY HAVE HORIZONTAL SHEATHING ON ROOF AND WALLS.
2. A-FRAME STYLE BUILDINGS CAN HAVE ANY COMBINATION OF HORIZONTAL OR VERTICAL SHEATHING ON ROOFS AND WALLS.
3. BOTH HORIZONTAL AND VERTICALS ROOF SHEATHING CAN HAVE MAX. 6" OVERHANG.
4. USING VERTICAL SHEATHING MAY ALLOW FOR GREATER FRAME SPACING. SEE NOTE 2 UNDER TABLE 4.



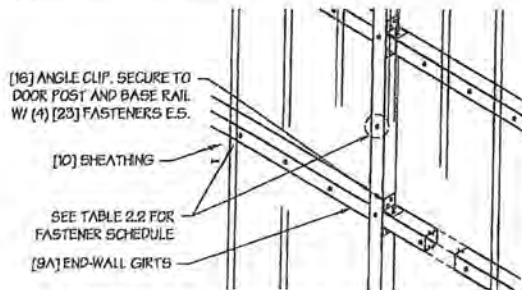
TYP. SHEATHING FASTENER SCHEDULE  
SCALE: NTS



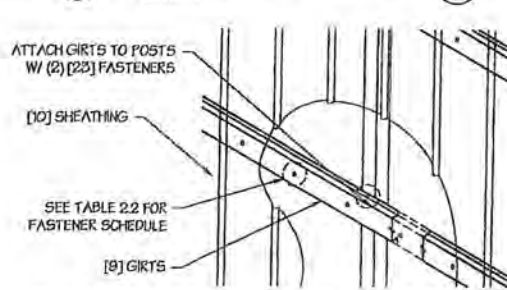
TYP. HORIZONTAL SHEATHING DETAIL  
SCALE: NTS



ROOF VERTICAL SHEATHING DETAIL  
SCALE: NTS



☐ WALL VERTICAL SHEATHING - TUBE DETAIL  
SCALE: NTS



☐ WALL VERTICAL SHEATHING - HAT CHANNEL DETAIL  
SCALE: NTS

MANUFACTURED BY:



457 N. Broadway,  
Joshua, TX 76058  
1-866-730-9865

ENGINEERED BY:



A&A ENGINEERING

CIVIL • STRUCTURAL

5911 Roundhouse Place, Suite B • Toledo, OH 43623

Tel: 419-592-1553 • Fax: 419-592-0855

www.aandengineering.com

#### DRAWING INFORMATION

PROJECT: 18'-0" WIDE BUILDINGS

LOCATION: STATE OF NEVADA

PROJECT NO.: 233-19-0059

SHEET TITLE:

SHEATHING OPTIONS  
& DETAILS

SHEET NO.: 6 / 11

DRAWN BY: LAK DATE: 1/16/19

CHECKED BY: OAA DATE: 1/16/19

#### LEGAL INFORMATION

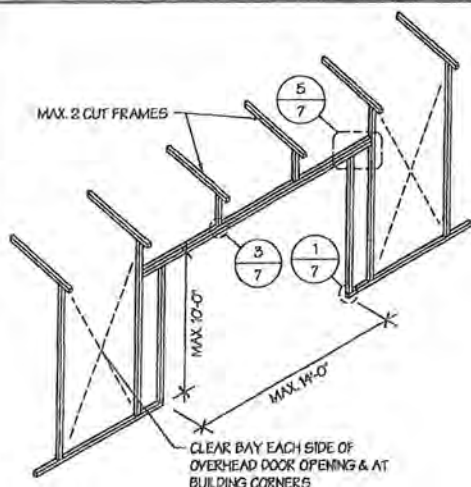
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- DRAWINGS VALID UP TO 1 YEAR FROM DATE OF ISSUE.

SEAL:

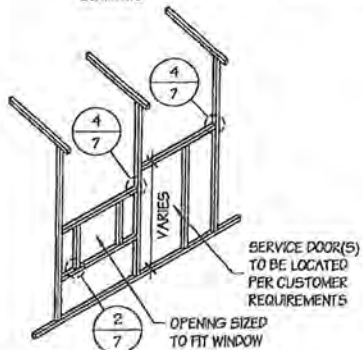


DATE EXPIRES: 12/31/2020

DATE SIGNED: JAN 16 2019



□ SIDE WALL OVERHEAD DOOR OPENINGS  
SCALE: NTS



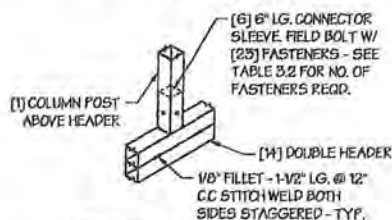
□ SIDE WALL SERVICE DOOR / WINDOW OPENINGS  
SCALE: NTS

**SIDE WALL FRAMING NOTES:**

- DESIGNS AND DETAILS SHOWN HERE ARE APPLICABLE TO BOTH REGULAR AND A-FRAME STYLE BUILDINGS.
- MAX. HEIGHT OF SIDE WALL OVERHEAD DOOR OPENINGS IS 2 FT LESS THAN THE EAVE HEIGHT.
- OVERHEAD DOOR OPENINGS CANNOT CUT THROUGH MORE THAN 2 FULL FRAMES.
- MIN. 1 CLEAR BAY MUST BE MAINTAINED BETWEEN ANY 2 OVERHEAD DOOR OPENINGS. A CLEAR BAY IS A SPACE BETWEEN TWO FRAMES THAT HAS NO OVERHEAD DOOR OPENINGS.
- MIN. 1 CLEAR BAY MUST ALSO BE MAINTAINED FROM THE BUILDING CORNERS.
- SERVICE DOORS AND WINDOWS CAN BE PLACED IN CLEAR BAYS OR ANY WHERE ELSE AS NEEDED.



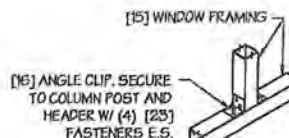
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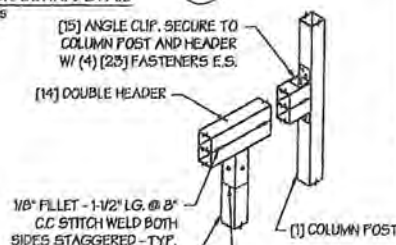
3



4



2



5

MANUFACTURED BY:



457 N. Broadway,  
Joshua, TX 76058  
1-866-730-9865

ENGINEERED BY:



A&A ENGINEERING

CIVIL - STRUCTURAL

5911 Roundstone Place, Suite B • Toledo, OH 43623  
Tel. 419-599-1500 • Fax. 419-592-6255  
www.aandengineering.com

**DRAWING INFORMATION**

PROJECT: 18'-0" WIDE BUILDINGS

LOCATION: STATE OF NEVADA

PROJECT NO.: 233-19-0059

SHEET TITLE:

SIDE WALL FRAMING  
& OPENINGS

SHEET NO.: 7 / 11

DRAWN BY: LAK DATE: 1/16/19

CHECKED BY: O/A DATE: 1/16/19

**LEGAL INFORMATION**

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SEAL:

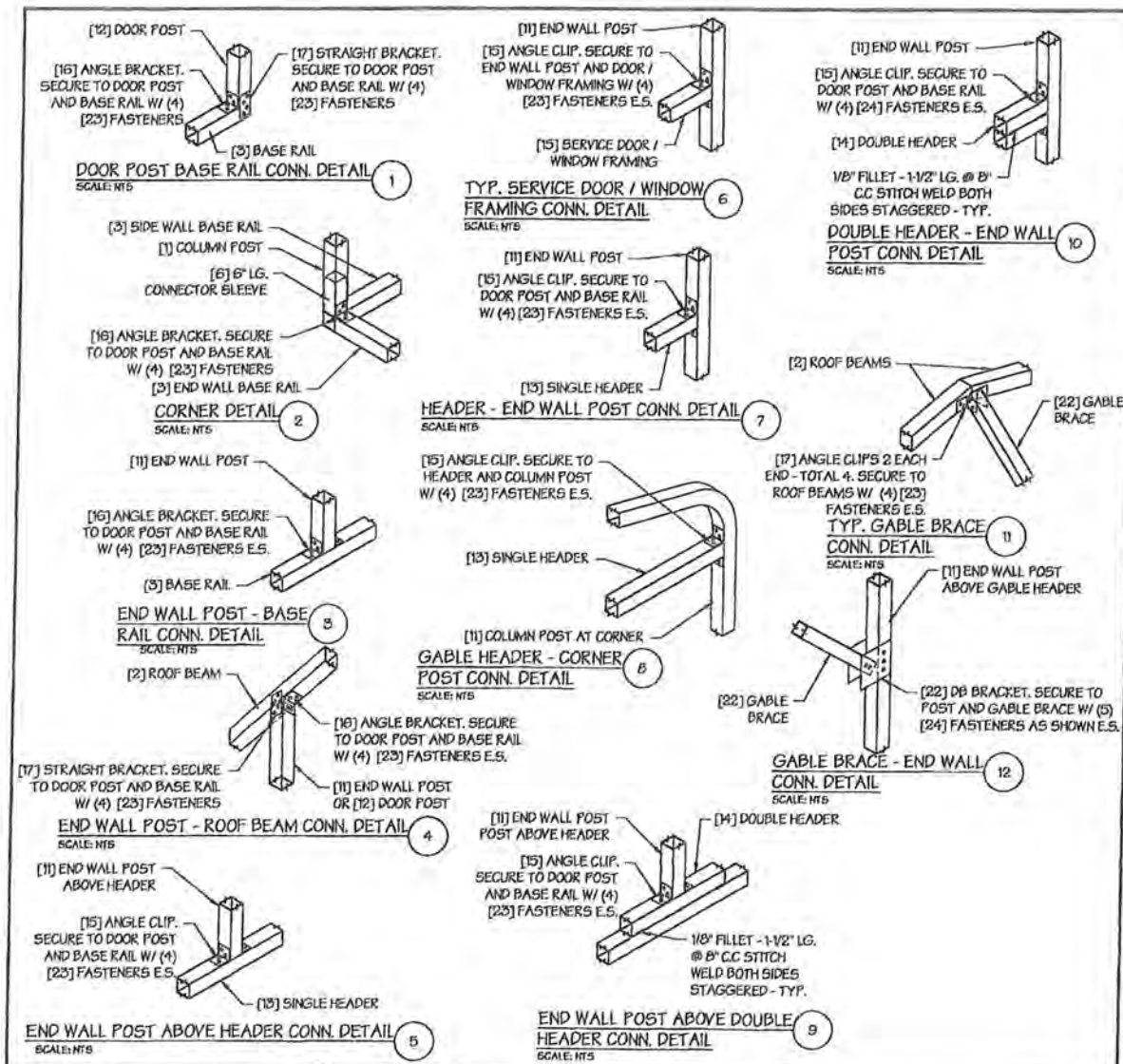


DATE EXPIRES: 12/31/2020

DATE SIGNED: JAN 16 2019







MANUFACTURED BY:



457 N. Broadway,  
Joshua, TX 76058  
1-866-730-9865

ENGINEERED BY:



A&A ENGINEERING  
CIVIL • STRUCTURAL  
5911 Reservoir Place, Suite B • Toledo, OH 43623  
Tel: 419-293-4963 • Fax: 419-292-6555  
www.a-a-engineers.com

#### DRAWING INFORMATION

PROJECT: 18'-0" WIDE BUILDINGS

LOCATION: STATE OF NEVADA

PROJECT NO.: 233-19-0059

SHEET TITLE:

#### END WALL FRAMING DETAILS

SHEET NO.: 8-B / 11

DRAWN BY: LAK DATE: 1/16/19

CHECKED BY: OAA DATE: 1/16/19

#### LEGAL INFORMATION

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- DRAWINGS VALID UP TO 1 YEAR FROM DATE OF ISSUE.

SEAL:



DATE EXPIRES: 12/31/2020

DATE SIGNED: JAN 16 2019



# CONCRETE SLAB FOUNDATION NOTES:

- DESIGNS SHOWN ON THIS SHEET ARE FOR CONCRETE SLAB FOUNDATION. ANY OF THE FOUNDATIONS SHOWN ON SHEETS 11-A THRU D CAN BE USED.
- CONCRETE ANCHORS SHALL BE LOCATED NEXT TO EVERY POST AND ON EITHER SIDE OF OPENINGS. TWO ANCHORS SHALL BE INSTALLED AT CORNERS OF ENCLOSED BUILDINGS WITH END WALLS - ONE ON EACH BASE RAIL IN LOCATIONS REQUIRING TWO ANCHORS DUE TO WIND. ONE ANCHOR IS TO BE ON EACH SIDE OF THE COLUMN POST. ANCHORS IN CLOSE PROXIMITY TO EACH OTHER MUST HAVE A MIN. 4" SPACING.
- MIN. NUMBER OF CONCRETE ANCHORS PER POST SHALL BE AS SHOWN IN TABLE 11-A1.
- THE SIZE OF THE SLAB SHALL BE THE SIZE (WIDTH AND LENGTH) OF THE BUILDING PLUS  $\frac{1}{2}$ " FOR 14GA MATERIAL AND 1" FOR 12GA MATERIAL.
- DEPTH OF SLAB TURN DOWN FOOTING SHALL BE GREATER THAN FROST DEPTH SPECIFIED PER LOCAL CODE.
- CONTROL JOINTS SHALL BE PLACED 50 AS TO LIMIT MAX. SLAB SPANS TO 20' IN EACH DIRECTION.
- ASSUMED SOIL BEARING CAPACITY IS TO BE A MIN. OF 1500 PSF.
- CONCRETE STRENGTH TO BE A MIN. OF 2500 PSI @ 28 DAYS.

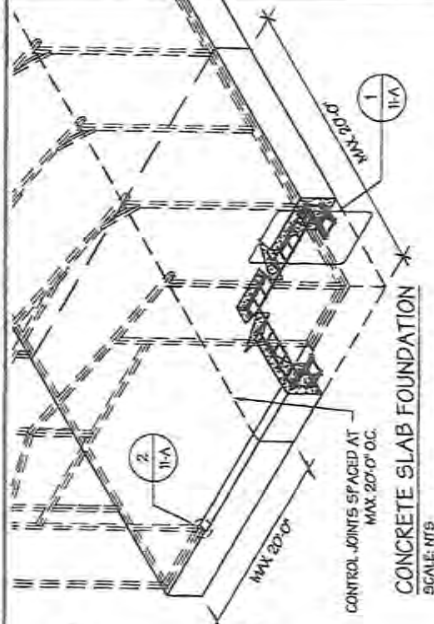
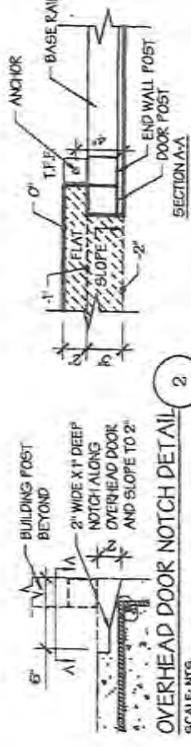


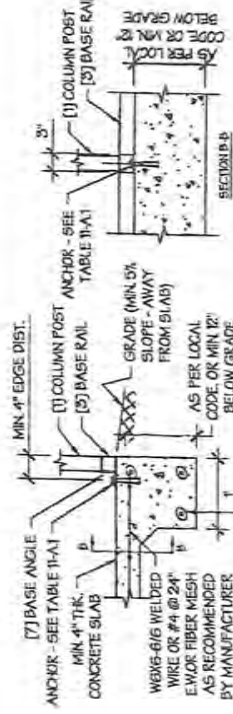
TABLE 11-A1: CONCRETE SLAB ANCHOR SCHEDULE

ENCLOSURE	WIND SPEED (MPH)	ANCHOR SCHEDULE
ENCLOSED	125 TO 150	(1) 1/2" X 7"
	150 TO 180	(2) 1/2" X 7"
OPEN	150 TO 180	(1) 1/2" X 7"
	180 TO 200	(2) 1/2" X 7"

- NOTES:
- ANCHORS ARE TO BE CONCRETE WEDGE OR EXPANSION ANCHORS.
  - MIN EMBEDMENT DEPTH TO BE 2 $\frac{1}{2}$ ".
  - ANCHORS TO BE SPACED NO MORE THAN 6" FROM POSTS.



OVERHEAD DOOR NOTCH DETAIL 2



EDGE FLUSH DETAIL 1

MANUFACTURED BY:  
  
 457 N. Broadway,  
 Joshua, TX 76058  
 1-866-730-9865

ENGINEERED BY:  
  
 A/E ENGINEERING  
 CIVIL - STRUCTURAL  
 5911 Reservoir Place, Suite B & Toledo, OH 44028  
 TEL: 419-285-1883 FAX: 419-295-9863  
 www.aeengineering.com

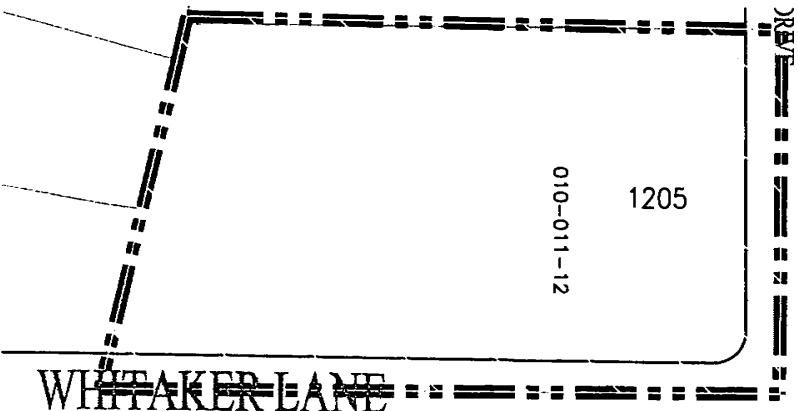
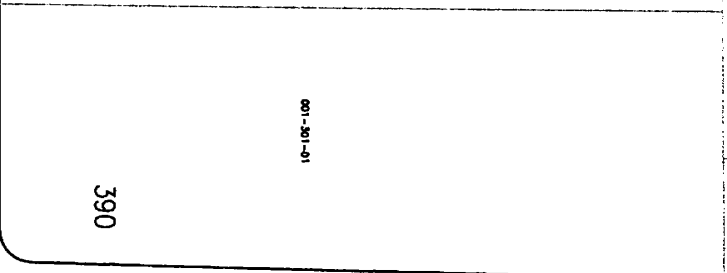
DRAWING INFORMATION  
 PROJECT: 19'-0" WIDE BUILDINGS  
 LOCATION: STATE OF NEVADA  
 PROJECT NO.: 233-19-0059  
 SHEET TITLE: FOUNDATION OPTION 1: CONCRETE SLAB  
 SHEET NO.: 11-A / 11  
 DRAWN BY: LAK DATE: 1/16/19  
 CHECKED BY: OAA DATE: 1/16/19

LEGAL INFORMATION  
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 - DRAWINGS VALID UP TO 1 YEAR FROM DATE OF ISSUE.

REAL:  
  
 OMAR A. ABU-YASEIN  
 CIVIL  
 No. 13242

DATE EXPIRES: 12/31/2020  
 DATE SIGNED: JAN 16 2019

L/C 401 403 270  
227/211-285 287 001-241-28280



WHITTAKER LANE

001-286-01	001-286-02	001-286-03	001-286-04	001-286-05
1080	1060	1040	1020	1000
001-286-10	001-286-09	001-286-08	001-286-07	001-286-06
1081	1061	1041	1021	1001
ROBERTA CT.				
001-284-06	001-284-04	001-284-03	001-284-02	001-284-01
980	960	940	920	900
001-284-07	001-284-08	001-284-09	001-284-10	001-284-11
981	961	941	921	901
MCKAY CT.				

001-287-01	001-287-02	001-287-03	001-287-04	001-287-05
1080	1060	1040	1020	1000
001-287-09	001-287-08	001-287-06	001-287-07	001-287-05
1081	1061	1041	1021	1001
HAROLD CT.				
001-288-06	001-288-04	001-288-03	001-288-02	001-288-01
980	960	940	920	900
001-288-07	001-288-08	001-288-09	001-288-10	001-288-11
981	961	941	921	901
ST. PATRICK CT.				

001-288-01	001-288-02	001-288-03	001-288-04	001-288-05
1080	1060	1040	1020	1000
001-288-09	001-288-08	001-288-06	001-288-07	001-288-05
1081	1061	1041	1021	1001
ANGELA CT.				
001-311-06	001-311-04	001-311-03	001-311-02	001-311-01
980	960	940	920	900
001-311-07	001-311-08	001-311-09	001-311-10	001-311-11
981	961	941	921	901
JOYCE CT.				
001-312-06	001-312-05	001-312-04	001-312-03	001-312-02
980	960	940	920	900
001-312-07	001-312-08	001-312-09	001-312-10	001-312-11

001-501-12	001-501-01	001-502-02	001-502-01
501	500	505	503
001-501-11	001-501-02	001-502-03	001-502-04
511	510	511	521
001-501-10	001-501-03	001-502-05	001-502-06
521	520	521	521
VY LANE			
001-506-01	001-506-02	001-506-03	001-506-04
961	510	501	511
001-506-05	001-506-06	001-506-07	001-506-08
520	521	521	521
RACHEL CT.			

FIFTH STREET

TEDFORD

88 86

375

485



981 St. Patrick Ct.  
VARIANCE

<b>Parcel Number</b>	<b>Property Owner's Name(s)</b>	<b>Property Owner's Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
1-295-07	DRINKUT GAYLENE & DUSTAN D	981 ST PATRICK CT	FALLON	NV	89406
1-295-01	MAGEE GEORGE L & MARSHA J	900 ST PATRICK CT	FALLON	NV	89406
1-295-02	SHYKES RICHARD & COLITA	910 ST PATRICK CT	FALLON	NV	89406
1-295-03	BETTENCOURT DONNA A	920 ST PATRICK CT	FALLON	NV	89406
1-295-04	HITT WILLIAM A	940 ST PATRICK CT	FALLON	NV	89406
1-295-05	RAMBLING RIVER RANCHES INC	3975 RENO HWY	FALLON	NV	89406
1-295-06	DAILY JANAYA	980 ST PATRICK CT	FALLON	NV	89406
1-295-08	BUCKMASTER KARL L & JENNIFER E	P O BOX 2112	FALLON	NV	89407
1-295-09	WALNO LUKE D & MYRANDA M	941 ST PATRICK CT	FALLON	NV	89406
1-295-10	WILLIAMS DAVID	921 ST PATRICK CT	FALLON	NV	89406
1-295-11	SANDOVAL JORGE & TELLEZ LILIANA	911 ST PATRICK CT	FALLON	NV	89406
1-295-12	URQUHART DAN & GINGER TRUSTEES	350 DRUMM LN	FALLON	NV	89406
1-311-01	PAHOLKE WAYNE W & GAIL G	900 JOYCE CT	FALLON	NV	89406
1-311-02	DOOLEY RICHARD E & DOREEN M	910 JOYCE CT	FALLON	NV	89406
1-311-03	WOLFGANG DEBORAH L TRUSTEE	920 JOYCE CT	FALLON	NV	89406
1-311-04	ORZECH TERRENCE W & FRANCES	1205 S MAINE ST PMB #30	FALLON	NV	89406
1-311-05	OLSON GEORGE J & TELETHEA L	960 JOYCE CT	FALLON	NV	89406
1-311-06	EVERS K K & DILLON-KENT C	1427 COLEMAN RD	FALLON	NV	89406
1-311-07	SMALL JESSE CURTIS & MARVEL C	981 JOYCE CT	FALLON	NV	89406
1-311-08	JONES LARRY L & LYNN MARIE	565 WHITE QUARTZ DR	RENO	NV	89511
1-311-09	REID GARRETT DENNIS	941 JOYCE CT	FALLON	NV	89406
1-311-10	FABIAN JOSE J & LEONORLYN S	921 JOYCE CT	FALLON	NV	89406
1-311-11	MC MILLAN KAY E	911 JOYCE CT	FALLON	NV	89406
1-312-04	MYERS JIMMY F & JUDITH I	940 W 5TH ST	FALLON	NV	89406
1-312-05	HANSEN NATALIE MICHELLE	960 W 5TH ST	FALLON	NV	89406
1-312-06	BENNINGHOVE SHAUN & JULIE C	980 W 5TH ST	FALLON	NV	89406
1-312-07	SAVOY RAYMOND & MARGARET M	1000 W 5TH ST	FALLON	NV	89406
1-294-06	ALBRECHT FRANK R & NORA R	P O BOX 1540	LOVELOCK	NV	89419
1-294-07	O DONOGHUE THOMAS M & JODEEN L	981 MC KAY CT	FALLON	NV	89406
1-294-08	POMEROY CASEY	P O BOX 5011	FALLON	NV	89407

981 St. Patrick Ct.  
VARIANCE

<b>Parcel Number</b>	<b>Property Owner's Name(s)</b>	<b>Property Owner's Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
1-294-09	SCHANK C L & D L TRUSTEES	650 INDIAN LAKES RD	FALLON	NV	89406
1-294-10	WORRING BRENT & CIERRA	921 MCKAY CT	FALLON	NV	89406
1-294-11	BYRD EDWIN L & MARY H	1185 PINE RD	FALLON	NV	89406
1-296-05	LAPLANA BILL Z & MARITES M	1000 ROBERTA CT	FALLON	NV	89406
1-296-06	MEROTH JOHN A III	1001 ROBERTA CT	FALLON	NV	89406
1-296-07	CHRISTIENSEN J & J CO TRUSTEES	3655 SHECKLER RD	FALLON	NV	89406
1-296-08	HADEN BARNETT	3200 LONE TREE RD	FALLON	NV	89406
1-296-09	BELL JAMES	1870 RYAN WAY	FALLON	NV	89406
1-297-01	WILLIAMS CARL D & ELLA JEAN	1080 HAROLD CT	FALLON	NV	89406
1-297-02	DUGAN MICHAEL A & VIRGINIA I	1060 HAROLD CT	FALLON	NV	89406
1-297-03	CROCKETT GORDON D	1040 HAROLD CT	FALLON	NV	89406
1-297-04	MC LEAN RICHARD A & PHILOMENA P	1020 HAROLD CT	FALLON	NV	89406
1-297-05	SORENSEN J BRETT & TERESA L	640 W CORKILL LN	FALLON	NV	89406
1-297-06	WADE SABRA M	P O BOX 827	FALLON	NV	89407
1-297-07	WILLIAMS VICTOR & BARBARA	3870 BOYER RD	FALLON	NV	89406
1-297-08	MONTANA STEVEN A & CARRIE S	625 DRUMM LN	FALLON	NV	89406
1-297-09	MC ARTHUR NAOMI	1061 HAROLD CT	FALLON	NV	89406
1-297-10	GOSS TODD ANTHONY & ROSALIE	1081 HAROLD CT	FALLON	NV	89406
1-298-01	WOODWARD STEVEN W & CAROL ANN	1080 ANGELA CT	FALLON	NV	89406
1-298-02	ARMOUR NORMAN R & SANDRA L	1060 ANGELA CT	FALLON	NV	89406
1-298-03	RAYGOZA MARIA D & LOPEZ MANUEL	1040 ANGELA CT	FALLON	NV	89406
1-298-04	STAUVERMAN CAROL	1020 ANGELA CT	FALLON	NV	89406
1-298-05	MC ELVAIN LAYVERTT TRUSTEE	1000 ANGELA CT	FALLON	NV	89406
1-298-06	WHITEHEAD JOHN G	5370 BOTTOM RD	FALLON	NV	89406
1-298-07	ELLIOTT SCOTT W	1021 ANGELA CT	FALLON	NV	89406
1-298-08	WHITAKER MICHAEL O & CINDY J	1041 ANGELA CT	FALLON	NV	89406
1-298-09	AMBLER ALLEN W	1061 ANGELA CT	FALLON	NV	89406



# CITY OF FALLON ZONING



ZONING CODE LEGEND	
	R-1
	R-2
	R-C
	E-1
	E-2
	C-1
	C-2
	M-1
	L 1
	NOT IN CITY





# City of Fallon Board of Adjustment Meeting

## July 1, 2019

### Item 4

Consideration and possible approval of an application by George Byars, 742 Keppel Street (APN #001-042-22), for a variance in an R-1 zone to encroach approximately 10 feet into the 20-foot rear setback in order to construct a patio cover. **(For possible action)**



Paid \$80.  
6-10-19

City of Fallon

VARIANCE APPLICATION FOR: \_\_\_\_\_ Business or ☒ Home Improvement

Please check one

Applicant: GEORGE T. BYARS JR

Address: 742 KEPPEL ST FALLON, NV 89406

Telephone Number: (757) 372-5399

☒ Owner ☐ In Escrow ☐ Leasehold

Purchasers in escrow must file proof of title with Variance Board before granted variances are effective.

Legal Description of Property Involved: Lot \_\_\_\_\_, Blk \_\_\_\_\_ Subdivision \_\_\_\_\_

Street and Number \_\_\_\_\_

(Attach sheet for Metes & Bounds Description)

Variance Requested: ENCROACH 10 ft. on 20 ft. rear setback

Ordinance Provisions: \_\_\_\_\_ Zoning \_\_\_\_\_

Deed Restrictions \_\_\_\_\_

Former Restrictions \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Applicants must present evidence of ability and intent to proceed with actual construction within six months of the above filing date.

It is not possible for me to use the above described property in the way it is zoned because: The current rear setback does not allow me to build the roof cover

My inability to use the above described property in the way I desire causes an undue hardship on me because: (Financial hardship is not considered valid). \_\_\_\_\_

The above described property is different from other properties in the same area zoned the same classification because: \_\_\_\_\_

Use of the above-described property in the manner proposed by this application will not be detrimental to surrounding properties because: its not visible from the front, field in back, its only a cover for my deck.

PLOT PLANS MUST ACCOMPANY THIS APPLICATION

I, George T. Byars Jr. owner in fee of the above described property state that this application for a variance has been made with my full knowledge and consent and the facts stated above are true to the best of my knowledge and belief.

Owner: George T. Byars Jr.

Address: 742 Keppel St.

Fallon, NV 89406

Phone # 757-372-5399

Signature: George T. Byars Jr.

All the above facts as stated herein are correct to my knowledge and belief.

Applicant: \_\_\_\_\_

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

Phone # \_\_\_\_\_

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

{Nevada

{County of Churchill

Signed and sworn to before me on 10 June 2019

by George T. Byars Jr.

{  
{  
{



ANNA MADOLE

Notary Public - State of Nevada

Appointment Recorded in Churchill County

No: 07-3875-4 - Expires July 23, 2022

{Nevada

{County of Anna Madole

Signed and sworn to before me on \_\_\_\_\_

by \_\_\_\_\_

{  
{  
{



Building Department  
55 West Williams Avenue  
Fallon, Nevada 89406  
Phone: (775) 423-9862 / 423-5107  
Fax: (775) 423-8874  
[buildingpermits@fallonnevada.gov](mailto:buildingpermits@fallonnevada.gov)

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

## PERMIT APPLICATION

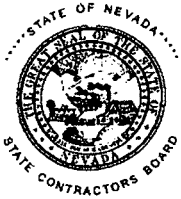
Two (2) sets of plans including one (1) wet-stamped are required.

The minimum size for plans submittal is 11" x 17" and maximum is 24" x 36".

Only complete applications will be accepted and processed. Please enter "N/A" in sections that do not apply.

Job Information			
Tenant Name		Address <b>742 KEPPEL ST. FALLON, NV 89406</b>	
Owner Name <b>GEORGE BYRKS</b>		Owner Address (if different)	
Owner Phone <b>(775) 372-5399</b>		Valuation	<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial
Zoning	Setbacks Front: Side: Side: Rear: <b>/</b>	FEMA Flood Zone	
Contractor Information			
Name <b>OWNER / BUILDER</b>		Address	
NV Contractors License No.		Fallon Business License No.	
Contact Person		Email	
Office Phone		Fax	Mobile
Architect & Engineer Information (if Applicable)			
Architect		Engineer	
Address		Address	
Office Phone	Office Fax	Office Phone	Office Fax
Email	Mobile	Email	Mobile
Contact Person (responsible for plan revisions)		Contact Person (responsible for plan revisions)	
Description of Work			
<b>HVAC Installations</b> <input type="checkbox"/> Change-Out <input type="checkbox"/> New <input type="checkbox"/> Electric unit to gas <input type="checkbox"/> A/C, H/P (___ tons)	<b>Water Heater</b> <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Gas to Electric <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate	<b>Minor Electrical &amp; Plumbing</b> <input type="checkbox"/> Electrical service change (___) (#) of Amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Water service replacement <input type="checkbox"/> Sewer service replacement <input type="checkbox"/> Gas line add/replace ___ ft	<b>Re-Roof &amp; Siding</b> <input type="checkbox"/> Tear off <input type="checkbox"/> Recover (MAX 2 layers) <input type="checkbox"/> Composition ___ yr <input type="checkbox"/> Stucco <input type="checkbox"/> Siding <input type="checkbox"/> Indicate Other
Complete description of work if other than noted above, please be specific and include everything that is being modified.			
<b>DECK COVER</b>			





# NEVADA STATE CONTRACTORS BOARD

9670 GATEWAY DRIVE, SUITE 100, RENO, NEVADA, 89521 (775) 688-1141 FAX (775) 688-1271, INVESTIGATIONS (775) 688-1150  
2310 CORPORATE CIRCLE, SUITE 200, HENDERSON, NEVADA, 89074 (702) 486-1100 FAX (702) 486-1190, INVESTIGATIONS (702) 486-1110  
www.nscb.state.nv.us

**NRS 624.031** Applicability of chapter: Exemptions. The provisions of this chapter do not apply to:

4. An owner of property who is **building or improving a residential structure on the property for his own occupancy and not intended for sale or lease**. The sale or lease, or the offering for sale or lease, of the newly built structure within 1 year after its completion creates a rebuttable presumption for the purposes of this section that the building of the structure was performed with the intent to sell or lease that structure. An owner of property who requests an exemption pursuant to this subsection must apply to the board for the exemption. The board shall adopt regulations setting forth the requirements for granting the exemption.

If you are seeking an exemption from licensure pursuant to NRS 624.031(4) you must complete the following affidavit, obtain the required signatures, and submit the original to the building department with your application for a building permit.

## OWNER BUILDER AFFIDAVIT OF EXEMPTION

I hereby certify that I am the owner of the property listed below, and that I am building or improving a residential structure on this property for my own occupancy and do not intend to sell or lease the property.

Parcel Number: \_\_\_\_\_ Description of Work: DECK COVER / FREE STANDING Type of Permit \_\_\_\_\_

I further acknowledge and initial the following obligations and duties:

GB I may not sell or lease this property. If I sell or lease, or offer to sell or lease this property within 1 year after completion, it may be presumed that I have violated the provisions of this exemption and Chapter 624 of NRS.

GB I **MAY NOT HIRE AN UNLICENSED PERSON TO ACT AS MY CONTRACTOR, AGENT, OR CONSTRUCTION MANAGER.**

GB I must directly supervise the construction.

GB Any subcontractor(s) working on this project must be properly licensed by the Nevada State Contractors Board.

GB Any person working on my project who is not a licensed contractor must work under my direct supervision and must be employed by me. I must comply with all State and Federal laws as an employer in the State of Nevada, including payroll deductions (FICA and income tax withholding), provide industrial insurance coverage, and pay the required unemployment compensation for that employee.

\_\_\_\_ If my project requires the repair, restoration, improvement or construction of a pool or spa, I acknowledge my obligation and duty to comply with the provisions of NRS 624.900 through NRS 624.930 (inclusive).

\_\_\_\_ Identify your consultant or construction manager. \_\_\_\_\_

GB I acknowledge that I have received copies of NRS 624.900 through NRS 624.930 (inclusive) and NRS 278.573.

I have read the above owner builder affidavit of exemption and certify that the information provided is true and correct to the best of my knowledge. I certify under penalty of perjury to the truth and accuracy of all statements contained herein.

Dated this 30 day of MAY, 2019

George T. Byars Jr  
Legal Owner of Residential Property (Signature)

GEORGE T. BYARS JR  
(Print Name)

742 KEPPEL ST  
Location of Single Family Residence

FALLON, NV 89406  
City State Zip

Telephone #: (757) 322-5399

Parcel Number - 001-042-22

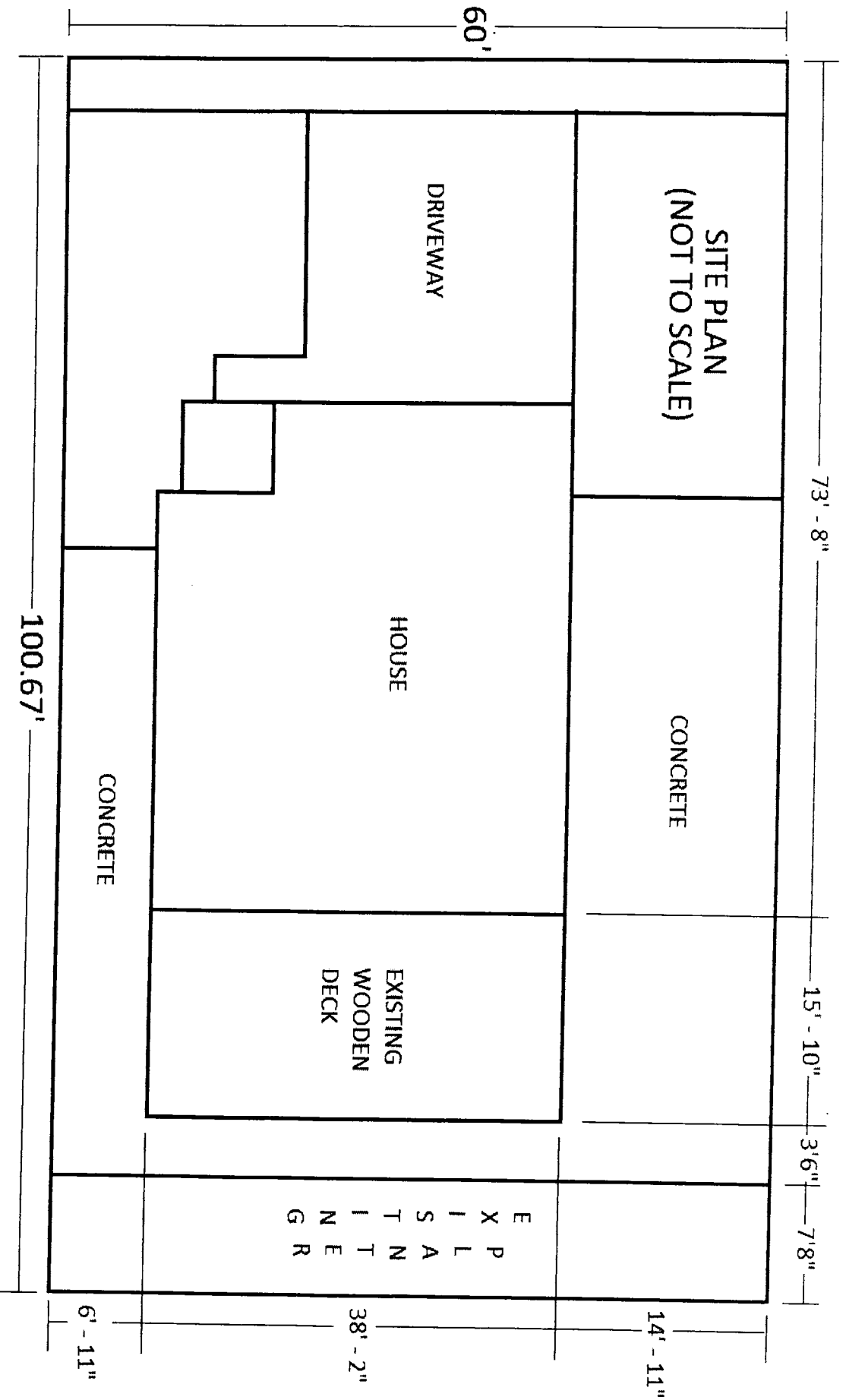
Desc. of work - Build free standing patio cover

Type of permit - Building

Variance requested: Reduce current 20 foot structure set back to 10 foot

Use of the above-described property in the manner proposed by this application will not be detrimental to surrounding properties because: the back yard faces farm land and the proposed patio cover will not be visible from the local street.

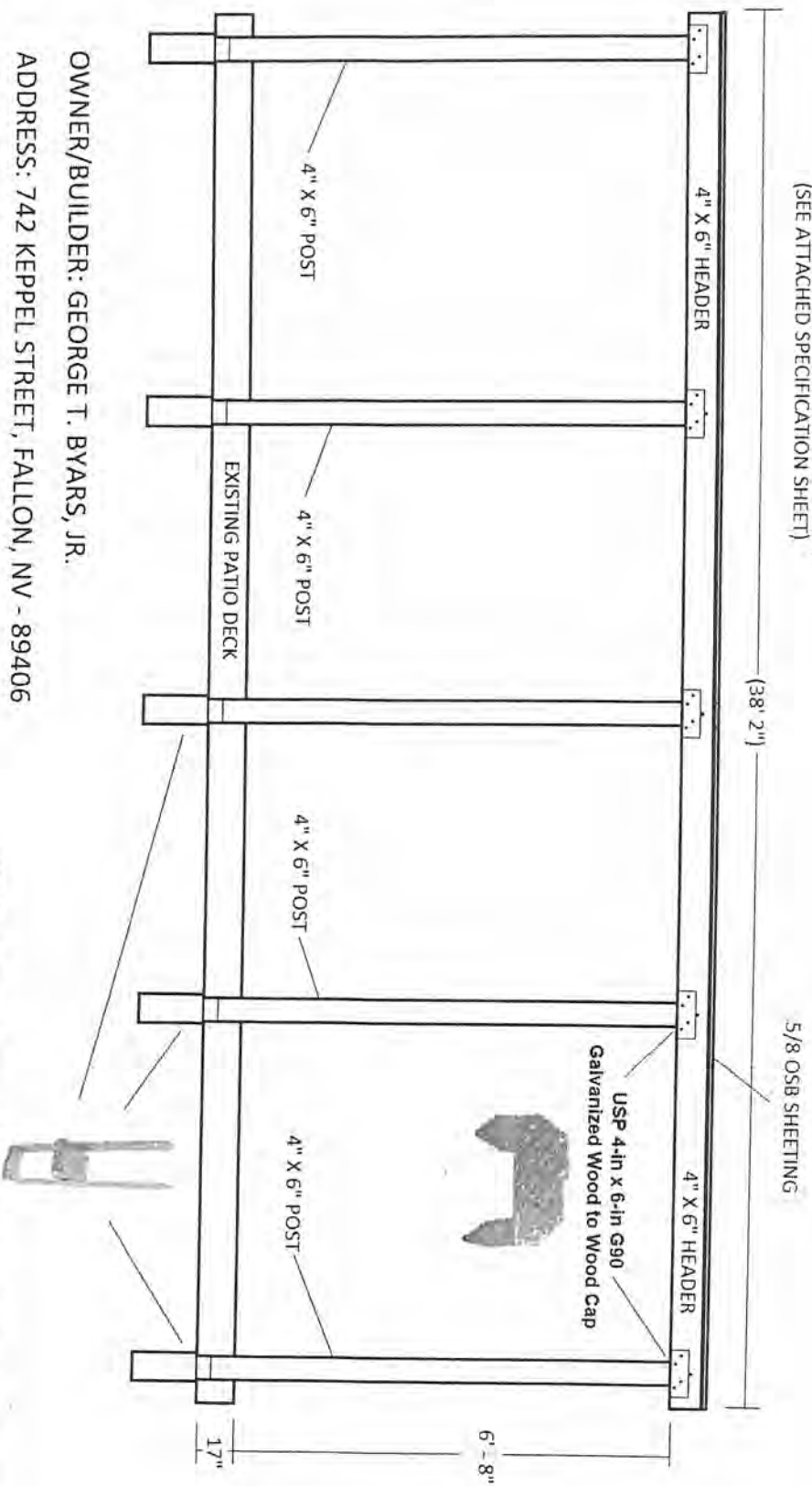




OWNER/BUILDER: GEORGE T. BYARS, JR.  
ADDRESS: 742 KEPPEL STREET, FALLON, NV. - 89406  
757-372-5399

**FRONT ELEVATION**  
**FREE STANDING PATIO COVER**  
(NOT TO SCALE)

ROOF MATERIAL: DIMENSIONAL ASPHALT SHINGLES  
(OVER SYNTHETIC ROOF UNDERLAYMENT)  
(SEE ATTACHED SPECIFICATION SHEET)



OWNER/BUILDER: GEORGE T. BYARS, JR.  
ADDRESS: 742 KEPPEL STREET, FALLON, NV - 89406  
PHONE: (757) 372-5399

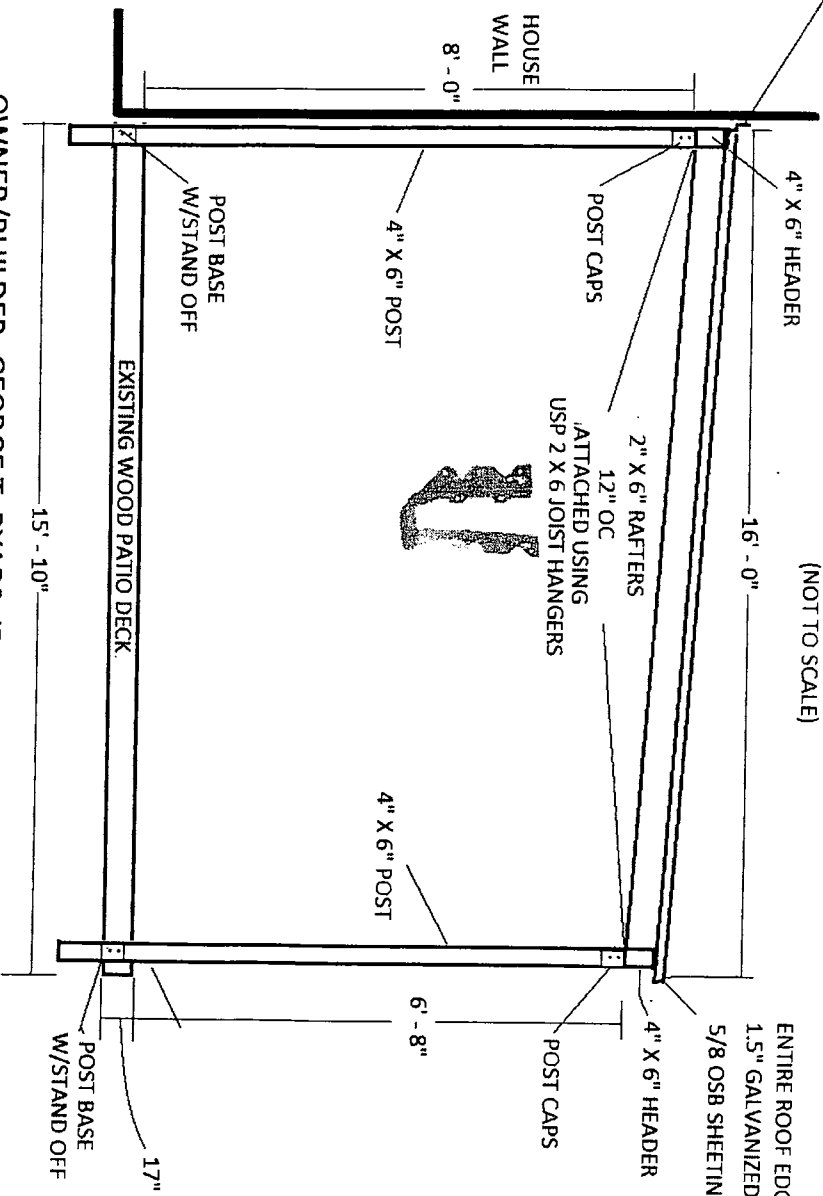
USP 4-in x 6-in G90 Galvanized Wood to Concrete (Cast in Place) Base  
SET IN 12" WIDE X 24" DEEP FOOTING



3" GALVANIZED FLASHING  
TUCKED UNDER EXISTING  
SIDING

**SIDE ELEVATION**  
**FREE STANDING PATIO COVER**  
(NOT TO SCALE)

ENTIRE ROOF EDGED WITH  
1.5" GALVANIZED STEEL DRIP EDGE  
5/8 OSB SHEETING



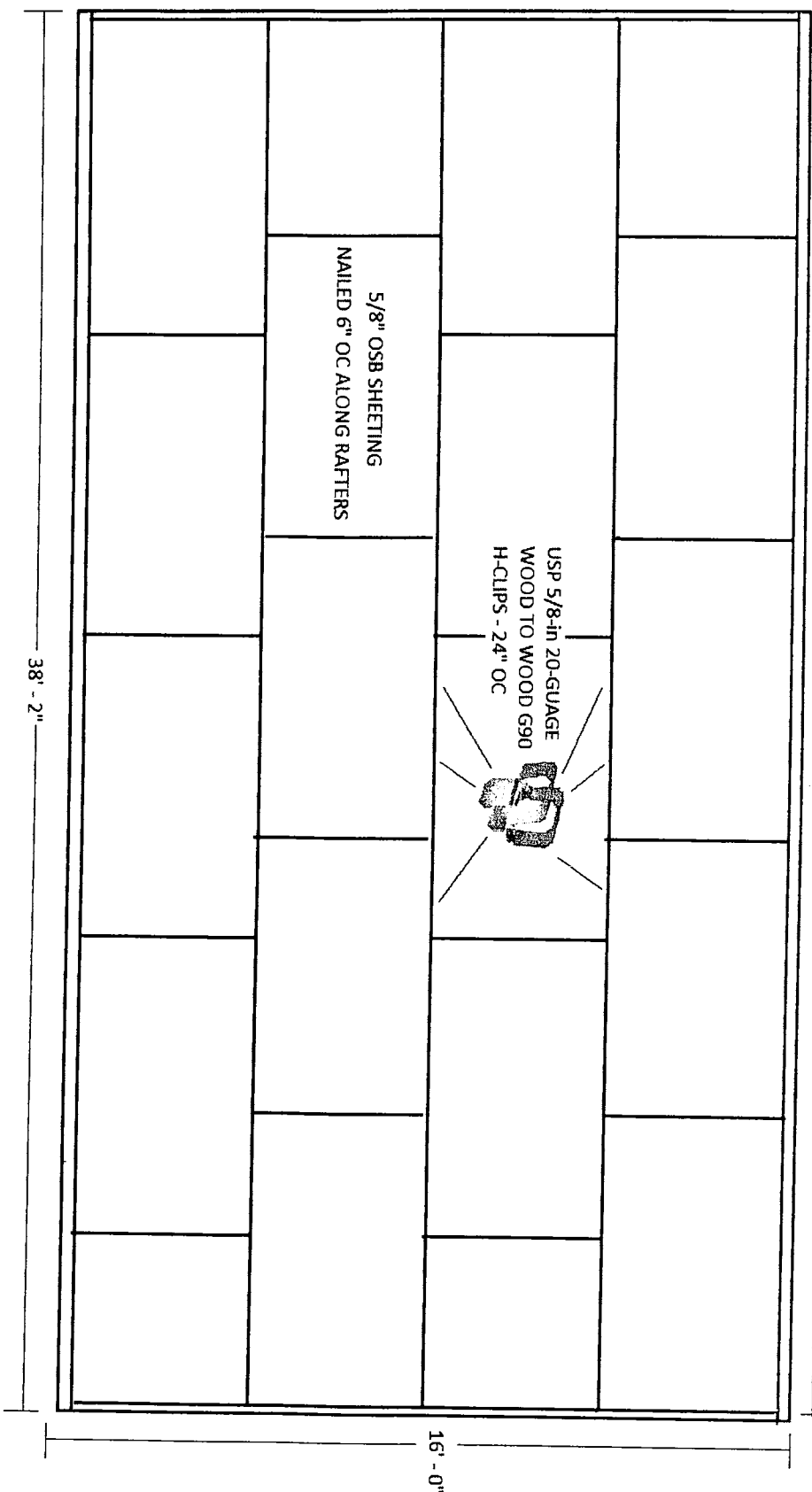
OWNER/BUILDER: GEORGE T. BYARS, JR.

ADDRESS: 742 KEPPEL STREET, FALLON, NV - 89406

PHONE: (757) 372-5399

TOP VIEW  
(NOT TO SCALE)

RAFTERS 12" OC



OWNER/BUILDER: GEORGE T. BYARS, JR.

ADDRESS: 742 KEPPEL STREET, FALLON, NV - 89406

PHONE: (757) 372-5399



# ProArmor<sup>®</sup>

## SYNTHETIC ROOF UNDERLAYMENT

### INSTALLATION INSTRUCTIONS

#### INSTALLATION INSTRUCTIONS

Owens Corning<sup>®</sup> ProArmor<sup>®</sup> Synthetic Roof Underlayment should be applied to a properly prepared dry deck that is smooth, clean and free from any depressions, projections, or protruding nails. Acceptable roof deck materials for application are minimum 3/8" plywood or minimum 7/16" OSB. Roof decks should be structurally sound and meet or exceed minimum requirements of the roof deck manufacturer and local building codes. ProArmor<sup>®</sup> underlayment is designed for use under asphalt shingles only and must be covered within 30 days of application.

Always follow safe roofing practices and OSHA safety requirements. Always wear and use fall protection devices when working on roofs. Use caution when walking or standing on ProArmor<sup>®</sup> underlayment in wet or dusty conditions that may reduce traction. Failure to use proper safety equipment and footwear can result in serious injury.

#### Fasteners

If the roof will not be covered with asphalt shingles on the same day, ProArmor<sup>®</sup> underlayment must be attached to the roof deck using plastic or steel cap fasteners having a minimum 1" diameter cap. Roofing nails and pneumatic nail guns may be used for same day installations for all slopes. Staples may be used for same day installations on slopes 2:12 to 12:12. All fasteners should be driven straight and flush with the surface. Consult local building codes for fastener type and spacing requirements.

#### Lap Requirements – All Slopes

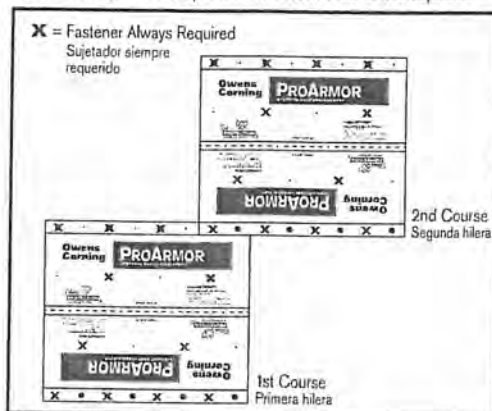
If two or more pieces are required to continue a course, lap the ends at least 4" (must be at least 12" for slopes 2:12 to less than 4:12). End laps in a succeeding course should be located at least 6' from laps in the preceding course. Lap ProArmor<sup>®</sup> underlayment a minimum of 6" from both sides over all hips, ridges and valleys. Where the roof meets a wall, extend ProArmor<sup>®</sup> underlayment a minimum 4" up the wall.

#### Slopes 4:12 or Greater

Always lay ProArmor<sup>®</sup> underlayment parallel to the eaves, lapping each course at least 3" over the underlying course. For same day coverage, minimum fastening locations for roofing nails, pneumatic nail guns or cap nails are shown in Fig. 1 and staples in Fig. 2. If required, additional fasteners can be used for same day coverage. See Fasteners section for additional details.

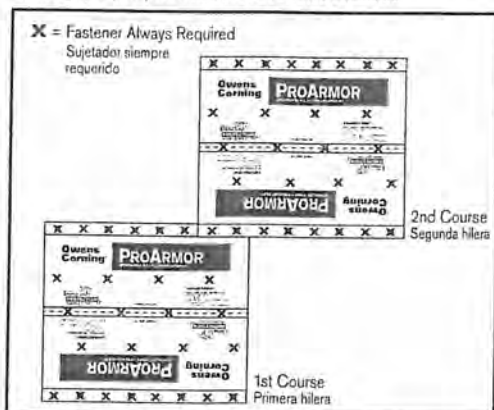
**Fig 1.** Minimum Fastening Locations for Same Day Coverage Using Roofing Nails, Pneumatic Nail Guns or Cap Nails Fig 1.

**Fig 1.** Ubicaciones mínimas de sujetadores para cobertura el mismo día usando clavos para techos, pistolas neumáticas o clavos con capuchón



**Fig 2.** Minimum Fastening Locations for Same Day Coverage Using Staples for Slopes 4:12 to 12:12 Only

**Fig 2.** Ubicaciones mínimas de sujetadores para cobertura el mismo día usando grapas para pendientes de 4:12 a 12:12 solamente



#### INSTRUCCIONES DE INSTALACIÓN

La membrana de impermeabilización sintética ProArmor<sup>®</sup> de Owens Corning<sup>®</sup> debe aplicarse sobre una plataforma seca preparada, que sea lisa, esté limpia y no tenga irregularidades en la superficie ni clavos que sobresalgan. Los materiales de la plataforma del techo aceptables para la aplicación son madera contrachapada de 3/8 pulg. o paneles de fibra orientadas de 7/16 pulg. La plataforma del techo debe contar con una estructura sólida y cumplir, o superar, los requisitos mínimos exigidos por el fabricante de la plataforma y los códigos de construcción locales. La membrana de impermeabilización ProArmor<sup>®</sup> está diseñada para uso debajo de tejas asfálticas únicamente y debe quedar cubierta dentro de los 30 días posteriores a la aplicación.

Siempre siga las prácticas de seguridad de colocación de techos y los requisitos de seguridad de OSHA. Siempre utilice y lleve puesto dispositivos para la protección de caídas cuando trabaja sobre un techo. Tenga cuidado al caminar o mantenerse parado sobre la membrana de impermeabilización ProArmor<sup>®</sup> ya que si está mojada o tiene polvo, el poder de tracción se verá reducido. Es posible que si no utiliza el equipo de seguridad y el calzado adecuados pueda lesionarse.

#### Sujetadores

Si el techo no se cubrirá con tejas asfálticas el mismo día, la membrana de impermeabilización ProArmor<sup>®</sup> debe sujetarse a la plataforma del techo utilizando sujetadores de capuchón plástico o de acero con capuchones de un diámetro mínimo de 1 pulg. Los clavos para el techo y las pistolas neumáticas pueden usarse para instalaciones realizadas el mismo día para todas las pendientes. Las grapas deben usarse en instalaciones realizadas el mismo día en pendientes de 2:12 a 12:12. Todos los sujetadores deben penetrar derechos y quedar a nivel de la superficie. Consulte los códigos de construcción locales para obtener información sobre los requerimientos de tipo de sujetadores y espacios.

#### Requerimientos de superposición - Todas las pendientes

Si se requieren dos o más piezas para continuar una hilera, superponga los extremos en al menos 4 pulgadas (debe ser de al menos 12 pulg. para las pendientes de 2:12 a menos de 4:12). Los empalmes en la siguiente hilera deben colocarse a, por lo menos, 6 pies de la superposición de los empalmes en la hilera anterior. Superponga la membrana ProArmor<sup>®</sup> un mínimo de 6 pulgadas por ambos lados sobre las limas, cumbreras y limahoyas. Cuando el techo llegue a una pared, extienda la membrana ProArmor<sup>®</sup> por un mínimo de 4 pulg. sobre la pared.



If ProArmor® underlayment will not be covered on the same day with asphalt shingles (extended exposure up to 30 days), use only plastic or steel cap fasteners having a minimum 1" diameter cap for all slopes. Fasten in both the overlapping area and the field area of ProArmor® underlayment. Additional fasteners may be required in high wind regions per local building codes. See Fig. 3 and Fasteners section for details.

### Slopes 2:12 to less than 4:12

On all lower slope applications, cover the deck with two layers of ProArmor® underlayment. Roofing nails, pneumatic nail guns and staples may be used for same day installations. If ProArmor® underlayment will not be covered on the same day with asphalt shingles (extended exposure up to 30 days), use only plastic or steel cap fasteners having a minimum 1" diameter cap. Begin by fastening a 22" wide strip of ProArmor® underlayment along the eaves with the minimal fasteners needed to hold the course in place. Place a full-width sheet over the 22" course with the long edge placed along the eaves and completely overlapping the initial starter course. All succeeding courses will be a minimum of 42" wide and should be positioned to overlap the preceding course by 22" (to lowest solid centerline). Additional fasteners may be required in high wind regions per local building codes. See Fig. 4 and Fasteners section for details.

Fig. 3. Minimum Fastening Locations For Extended Exposure on Slopes 4:12 or Greater

Fig. 3. Ubicaciones mínimas de sujeción para exposición extendida en pendientes de 4:12 o superiores

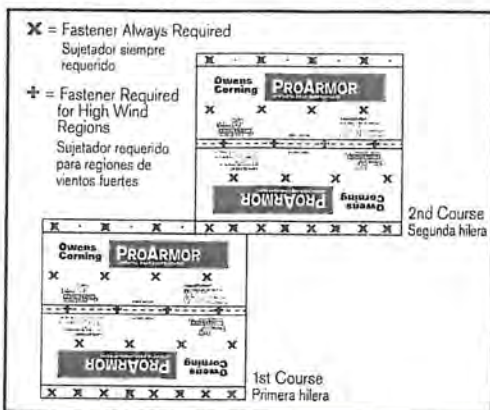
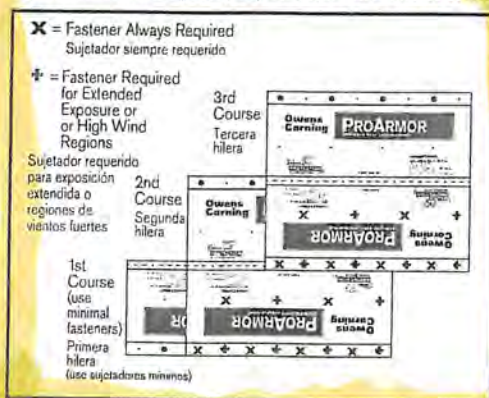


Fig. 4. Fastening Locations for Slopes 2:12 to less than 4:12

Fig. 4. Ubicaciones de sujeción para pendientes de 2:12 a menos de 4:12



### ⚠ CAUTION ⚠ PRECAUCIÓN ⚠

Caution: Roof surface may be slippery, especially when dusty, wet or icy. Use a fall protection system when installing. Wear soft-soled shoes. Walk with care.

Falling Hazard: Secure area below work and materials on roof. Unsecured materials may slide when placed on roof. Place on level plane or secure to prevent sliding. Wear a hard hat.

Caution: Safety glasses should always be worn when using power tools. Wear gloves when installing to avoid cuts and abrasions.

Precaución: La superficie del techo podría resultar resbaladiza, en especial cuando se acumula polvo, humedad o hielo. Al realizar la instalación, utilice un sistema de protección contra las caídas. Utilice zapatos con suela flexible. Camine con cuidado.

Peligro de caída de objetos: Asegure el área que se encuentra debajo de la zona de trabajo y los materiales que están sobre el techo. Los materiales que no estén sujetos pueden caerse del techo cuando se los deja en el techo. Colóquelos en un lugar sin pendiente o sujételos para que no se caigan. Utilice un casco.

Precaución: Las gafas de seguridad se deben utilizar siempre que use herramientas eléctricas. Al realizar la instalación, utilice guantes para evitar cortes y rasguños.

### Pendientes 4:12 o superiores

Siempre coloque la membrana de impermeabilización ProArmor® en forma paralela a los aleros, superponiendo cada hilera por lo menos 3 pulgadas por sobre la hilera anterior. Para la cobertura realizada el mismo día, en la Figura 1 y 2 se muestran las ubicaciones mínimas de clavos sujetadores para techos, o clavos aplicados con pistolas neumáticas o clavos con capuchón. Si es necesario, se pueden usar sujetadores adicionales para la cobertura el mismo día. Consulte la sección Sujetadores para obtener información adicional.

Si la membrana de impermeabilización ProArmor® no se cubrirá el mismo día con tejas asfálticas (exposición extendida de hasta 30 días), use solo sujetadores de capuchón plástico o de acero con capuchones de un diámetro mínimo de 1 pulg. para todas las pendientes. Sujete en ambas áreas de superposición y el área de campo de la membrana de impermeabilización ProArmor®. De acuerdo a los códigos de construcción locales, posiblemente se requieran sujetadores adicionales en regiones de vientos fuertes. Vea la Figura 3 y la sección Sujetadores para obtener información detallada.

### Pendientes 2:12 a menos de 4:12

En aplicaciones sobre pendientes menores, cubra la plataforma con dos capas de membrana de impermeabilización ProArmor®. Los clavos para techos, las pistolas neumáticas y las grapas pueden usarse para las instalaciones en el mismo día. Si la membrana de impermeabilización ProArmor® no se cubrirá el mismo día con tejas asfálticas (exposición extendida de hasta 30 días), use solo sujetadores de capuchón plástico o de acero con capuchones de un diámetro mínimo de 1 pulg. Comience por sujetar una tira de 22 pulgadas de anchura de la membrana de impermeabilización ProArmor® a lo largo de los aleros con el mínimo de sujetadores necesarios para sostener la hilera en su lugar. Coloque una plancha con su anchura completa sobre la hilera inicial de 22 pulg., con el borde más largo colocado a lo largo del alero. Esta plancha se debe superponer totalmente a la hilera inicial. Todas las hileras siguientes deben tener un ancho mínimo de 42 pulgadas y se deben colocar de manera tal que 22 pulgadas queden superpuestas a la hilera anterior (hasta la línea central sólida más baja). De acuerdo a los códigos de construcción locales, posiblemente se requieran sujetadores adicionales en regiones de vientos fuertes. Vea la Figura 4 y la sección Sujetadores para obtener información detallada.



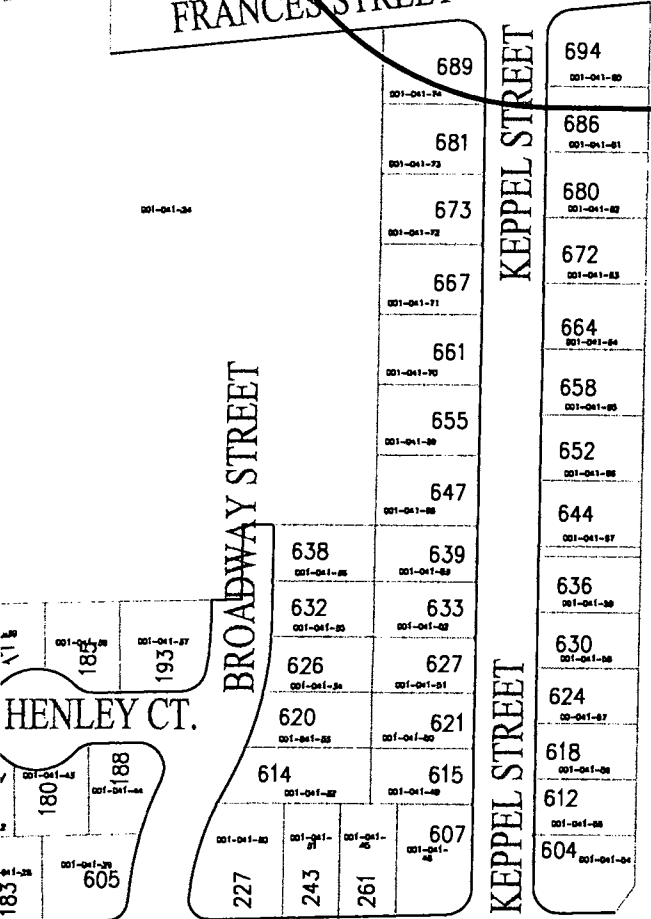
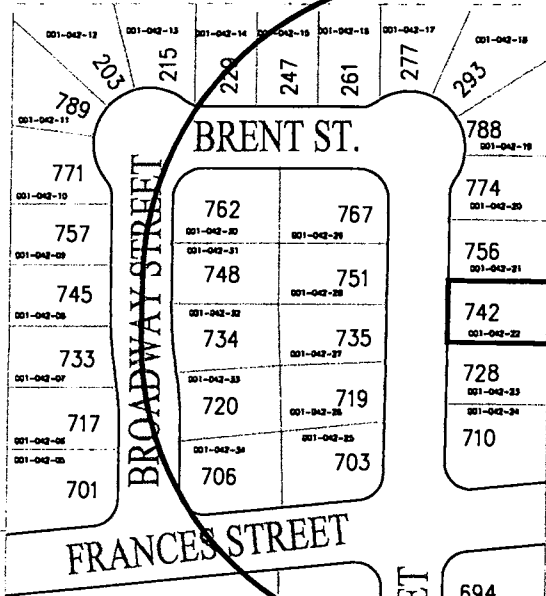
**OWENS CORNING ROOFING AND ASPHALT, LLC**  
ONE OWENS CORNING PARKWAY  
TOLEDO, OHIO, USA 43659  
1-800-GET-PINK®  
[www.owenscorning.com/roofing](http://www.owenscorning.com/roofing)

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007-001-013



A PLACE SERPA PLACE 620 630

742 Keppel Street  
VARIANCE

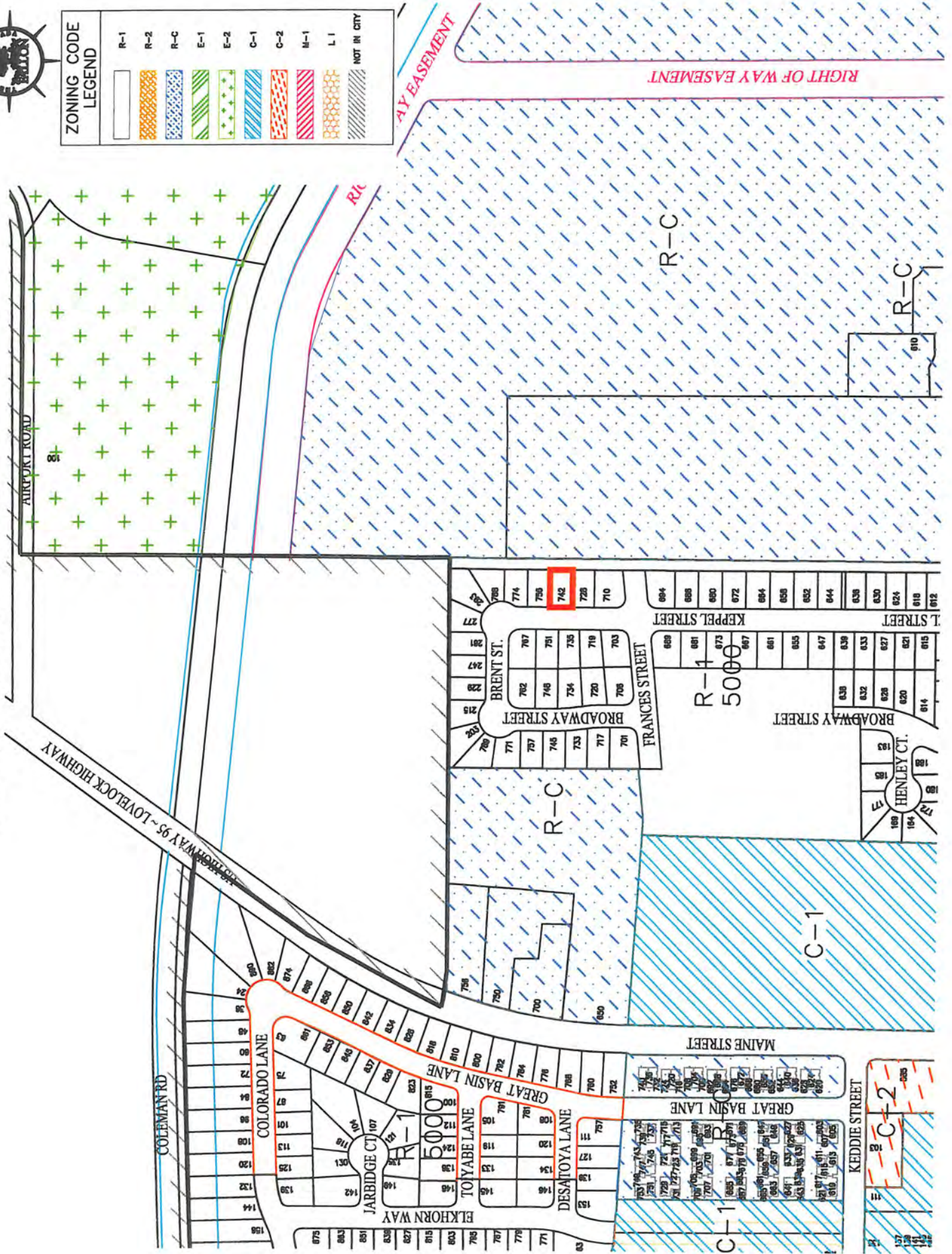
Parcel Number	Property Owner's Name(s)	Property Owner's Address	City	State	Zip Code
1-042-22	BYARS GEORGE T JR & AVRIL V	742 KEPPEL ST	Fallon	NV	89406
1-042-14	MILLER EDWARD D & JANET M	229 BRENT ST	Fallon	NV	89406
1-042-15	SULLIVAN BRIAN & RASCON JANET	247 BRENT ST	Fallon	NV	89406
1-042-16	WOLF JORDAN A & ANNA R	261 BRENT ST	Fallon	NV	89406
1-042-17	JOHNSON JANA L	277 BRENT ST	Fallon	NV	89406
1-042-18	TORRES J H M & MACIAS L	293 BRENT ST	Fallon	NV	89406
1-042-19	NICKLE DAVID W & DEBRA R	788 KEPPEL ST	Fallon	NV	89406
1-042-20	ZUFELT NATHAN	3752 PROSPECT DR	Carson City	NV	89703
1-042-21	MOLLER TERRY & JANET	756 KEPPEL ST	Fallon	NV	89406
1-042-23	728 NV LLC	1740 SHAFF RD #313	Stayton	OR	97383
1-042-24	VAN CHI & VIVIAN TRUSTEES	255 S MAINE ST	Fallon	NV	89406
1-042-25	INGALLS TWYLA M TRUSTEE	703 KEPPEL ST	Fallon	NV	89406
1-042-26	MURPHY KRISTINA L	719 KEPPEL ST	Fallon	NV	89406
1-042-27	SCHMIDT RYAN C & JANELLE L	735 KEPPEL ST	Fallon	NV	89406
1-042-28	STEPHENS DONALD L	751 KEPPEL ST	Fallon	NV	89406
1-042-29	GRAY WILLIAM & MAYUMI	767 KEPPEL ST	Fallon	NV	89406
1-042-30	MATTIA BERNARD	P O BOX 6066	Gardnerville	NV	89460
1-042-31	ROBERTS BRANDON L	P O BOX 979	Fallon	NV	89407
1-042-32	MATTIA BERNARD				
1-042-33	THOMAS TOBY & CONNIE	P O BOX 241	Fallon	NV	89407
1-042-34	HOMER DAX	706 N BROADWAY ST	Fallon	NV	89406
1-041-60	STRICKLAND CRAIG & JERUSA M	694 KEPPEL ST	Fallon	NV	89406
1-041-61	MARTINEZ-OROPEZA F & NOGUERA J	686 KEPPEL ST	Fallon	NV	89406
1-041-74	WILLIAMS ERNEST & SUELLA	689 KEPPEL ST	Fallon	NV	89406
1-041-24	BAKER DUSTIN BRYCE TRUSTEE	#2 ARTACHO ST POBLACION	Lingayen	Pangasinan	2401 PHILIPPINES
1-081-02	DUFFNEY RICHARD & BROWN LEATTA	1124 WHITLEY DR	Dallas	TX	75217
7-691-13	CHRISTIANSEN J L & J L TRUSTEES	3655 SHECKLER RD	Fallon	NV	89406



# CITY OF FALLON ZONING



ZONING CODE LEGEND	
R-1	[Orange diagonal lines]
R-2	[Blue diagonal lines]
R-C	[Green diagonal lines]
E-1	[Yellow diagonal lines]
E-2	[Light green diagonal lines]
C-1	[Blue diagonal lines]
C-2	[Red diagonal lines]
M-1	[Pink diagonal lines]
L-1	[Yellow diagonal lines]
NOT IN CITY	[Grey diagonal lines]





# City of Fallon Board of Adjustment Meeting

## July 1, 2019

### Item 5

Consideration and possible approval of an application by Carolynne Daniels, 441 Michael Drive (APN #001-071-11), for a variance in an R-1 zone to operate an in-home daycare business.  
**(For possible action)**

paid \$50.  
5-22-19

City of Fallon

VARIANCE APPLICATION FOR: ☒ Business or ☐ Home Improvement  
Please check one

Applicant: Carolynne Daniels

Address: 2163 Sabrina's Way, Fallon, NV

Telephone Number: 775-427-7594

Owner

In Escrow

☒ Leasehold

Purchasers in escrow must file proof of title with Variance Board before granted variances are effective.

Legal Description of Property Involved: Lot 4

Blk 100

Subdivision

Meadows Valley Subdivision Unit #6

Street and Number 441 Michael Drive, Fallon, NV

(Attach sheet for Metes & Bounds Description)

Variance Requested: State Licensed Home Daycare

Ordinance Provisions:

Deed Restrictions

Zoning R-1

Former Restrictions

Expiration Date:

Applicants must present evidence of ability and intent to proceed with actual construction within six months of the above filing date.

It is not possible for me to use the above described property in the way it is zoned because: Zoned for residential. Not zoned for commercial use.

My inability to use the above described property in the way I desire causes an undue hardship on me because: (Financial hardship is not considered valid). I need a home for my state licensed in home daycare.

The above described property is different from other properties in the same area zoned the same classification because: There will be no change. I have no intention of creating a difference.

Use of the above-described property in the manner proposed by this application will not be detrimental to surrounding properties because: There will be no truck deliveries, no unsightly noise or activities.

PLOT PLANS MUST ACCOMPANY THIS APPLICATION

I, SITAN MICHAEL KING owner in fee of the above described property state that this application for a variance has been made with my full knowledge and consent and the facts stated above are true to the best of my knowledge and belief.

Owner: SITAN M. KING

Address: 441 MICHAEL DR

FALLON, NV 89406

Phone # 775-217-8591

Signature: [Signature]

{Nevada

{County of Churchill

Signed and sworn to before me on 5-21-19

by [Signature]

{Whitney Brown

All the above facts as stated herein are correct to my knowledge and belief.

Applicant: Carolynne Daniels

Address: 2163 Sabrina's Way

Fallon, NV 89406

Phone # 775-427-7594

Signature: Carolynne Daniels

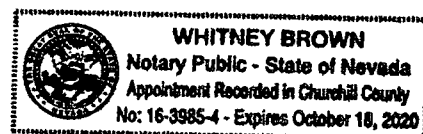
{Nevada

{County of Churchill

Signed and sworn to before me on 5-21-19

by Carolynne Daniels

{Whitney Brown





May 21, 2019

To Whom It May Concern:

Hello, my name is Carolynne Daniels and I am the Proud owner of Lil' Rascals Home Daycare L.L.C., since 2014. I currently have a Special Use Permit through the County for 2163 Sabrinas Way. I'm in search for a rental property in Fallon to relocate my family and Licensed In Home Daycare. I currently have a State of Nevada Business Licenses, County of Churchill Business License, State of Nevada Child Care License and I have an active Certificate of Liability Insurance. I am requesting a variance for zoning for 441 Michael Drive, Fallon, NV.

Lil' Rascals Home Daycare is licensed to care for up to 12 children. (Newborn to 12 years of age) Our responsibility as an in home care provider is to maintain a safe, fun and learning environment. I have been caring for children in my home since 2005. Most children have started as young infants and stay till they are ready for Kindergarten.

Lil' Rascals Home Daycare is open from Monday-Friday 6:30 A.M. to 6 P.M.. 441 Michael Drive is a great location and a very nice neighborhood. Parents have a few ways to approach Michael Drive. Venturacci Lane, West D Street, Pintail Drive, Meadow Glen Drive and Keddie Street. Depending where the parents are coming from. I expect between 5-10 vehicles a day for drop off and pick up. Lil' Rascals Home Daycare provides Breakfast, Lunch, 2 snacks and drinks. We also have learning time, craft time, and of course playtime in and outside. This location is perfect for a daycare setting. It's close to Northside Early Learning Center, Oasis Academy, City-County Gym and Venturacci Park.

Being licensed through the State of Nevada we have to follow the States requirements. Here are a few of the important ones. As owners and all employee's of Lil' Rascals Home Daycare we all must pass a Nevada State background check, submit Fingerprints to the State, get a TB test, be First Aid and CPR certified. We must also take the following classes... Recognition of Signs and Symptoms of Illness, Recognition and Reporting of Child Abuse and Neglect, SIDS and Human Growth and Development or Positive Guidance. We also need to carry Liability Insurance for all children we are watching. Once a month we will be doing fire drills and quarterly we will be doing disaster drills. Lil' Rascals Home Daycare has a written Disaster Plan, including Shelter in Place and we obtain Shelter in place materials, along with posted Evacuation Plan at all exits. All parents are given a Parents and Provider Agreement that they must review and return signed. Each child will have a file folder with all required information. Including current shot records and signed medical release signed by Pediatrician.

I will be using most of my home to care for children. I try to keep it as home feeling as I can. Since it is a In Home Daycare. The daycare children will not be allowed to play in front of the property only in the back of the property where it is fenced.

I will continue to run Lil' Rascals Home Daycare from 2163 Sabrinas Way until approved for Variance for zoning. Once that is approved I will move forward with the City of Fallon Business License procedures. Since I have been licensed business has been Great! I have an awesome group of children and parents to make Lil' Rascals Amazing.

I have included with my Application for Variance, Copy of Liability Insurance Policy, current County Special Use Permit and Copies of all current licenses along with Lil' Rascals Parent Agreement. Reference Letters upon request.

Thank you for your time and consideration,

A handwritten signature in cursive script that reads "Carolynne Daniels".

Carolynne Daniels  
Owner-Lil' Rascals Home Daycare

2136 Sabrina Way  
Fallon, NV 89406  
(775) 427-7594  
lilrascalshomedaycare@yahoo.com



**CERTIFICATE OF INSURANCE**

is hereby issued to

Item 1. **Certificate Holder:** Carolynne Daniels**Partner Name1:****Business Name:** Lil' Rascals Home DaycareItem 2. **Mailing Address:** 2163 Sabrinas Way  
Fallon, NV 89406

And

Item 3. **Master Policy Holder:** ADULTS AND CHILDRENS RISK PURCHASING GROUP and its  
Certified ProvidersItem 4. **Mailing Address:** Hays Companies, IDS Center, Suite 700, 80 South 8<sup>th</sup> Street, Minneapolis, MN 55402Item 5. **Certificate #:** 20002676Item 6. **License Classification:** 9-14 CHILDRENItem 7. **Cancellation:** Provisions are outlined in the Master Policy; a complete copy of which is available at  
your request.Item 8. **Effective Date:** 06/29/2018**Expiration Date:** 06/29/2019Item 9. **GENERAL LIABILITY / PROFESSIONAL LIABILITY** Issued by:

PHILADELPHIA INDEMNITY INSURANCE COMPANY - Policy Number : PHPK1623997

Item 10. **LIMITS OF INSURANCE**

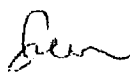
General Aggregate (Other Than Products-Completed Operations)	\$ 1,000,000
Each Occurrence (Includes Products-Completed Operations and Personal and Advertising Injury)	\$ 500,000
Damage to Premises Rented to You	Any One Premises \$ 100,000
Abuse or Molestation Aggregate	\$ 100,000
Abuse or Molestation Each Occurrence	\$ 100,000
Animal Injury Each Occurrence	\$ 25,000
Animal Injury Aggregate	\$ 50,000

Item 11. **ACCIDENT INSURANCE** Issued by: STARNET INSURANCE COMPANY - Policy Number : PAI V00100168001This policy provides accidental Medical Expense and Accidental Death and Dismemberment coverage and is subject to a \$ 0  
Deductible.

Item 12. <b>LIMITS: Accidental Death</b>	<b>\$ 2,000</b>	<b>Accidental Medical</b>	<b>\$ 10,000</b>
<b>Accidental Dismemberment</b>	<b>\$ 10,000</b>	<b>Dental Limit</b>	<b>\$ 2,000</b>

Item 13. **BUSINESS PERSONAL PROPERTY AND BUSINESS INTERRUPTION****Issued by:**This policy is subject to a \$ 250 Deductible. **Effective Date:** NA**Expiration Date:** NAItem 14. **LIMITS:**

<b>Business Personal Property</b>	<b>\$ 0</b>	<b>Business Interruption</b>	<b>\$ 0</b>
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**ADMINISTERED BY:**Hays Companies  
IDS Center, Suite 700  
80 South 8<sup>th</sup> Street  
Minneapolis, MN 55402
  
 \_\_\_\_\_  
 Authorized Representative
THE ENCLOSED FORMS DO NOT CONSTITUTE A COMPLETE POLICY CONTRACT. FOR A COMPLETE POLICY, CONTACT  
ADULTS AND CHILDRENS RISK PURCHASING GROUP.

APN 008-812-05 (Special Use Permit)

**NOTICE OF FINAL ACTION, DECISION OR ORDER  
OF THE CHURCHILL COUNTY PLANNING COMMISSION**



TO: Carolynne Daniels  
2163 Sabrinas Way  
Fallon, NV 89406

Pursuant to NRS 278.315, notice is hereby given that on the 13<sup>th</sup> day of January, 2016, A.D., the Churchill County Planning Commission upon making the findings of fact granted a:

Special Use Permit under section 16.08.170.D of the Churchill County Code to operate a home day care facility. The applicant will be licensed for up to 12 children, newborn to 12 years of age. She expects between five and ten vehicles per day for drop off and pick up. The hours of operation will be from 6:30 a.m. until 6 p.m., Monday through Friday.

as authorized by the provisions of NRS 278.010 to NRS 278.630, inclusive, with respect to the following described property: 2163 Sabrinas Way, Assessor's Parcel Number 008-812-05 consisting of 1.34 acres of non-water righted property in the R-2 land use district; a parcel of land situated in a portion of the northwest ¼ of the northeast ¼ of Section 35, Township 19 North, Range 28 East, M.D.B.&M.

**SUBJECT TO THE FOLLOWING CONDITIONS PLACED ON THE SPECIAL USE PERMIT:**

- Acquisition of a Churchill County business license.
- Acquisition of child care license from Nevada Division of Public and Behavioral Health.
- This special use permit is for the applicant at this address only and cannot be transferred to another location or person.
- Parking shall be on the driveway and out of the Sabrinas Way road easement.
- Hours are from 6:30 am – 6 pm Monday through Friday.
- Compliance with Churchill County Code.

Within twelve months of issuance of this notice, applicant must demonstrate that steps have been taken to enact this Special Use Permit. In the event that circumstances beyond the control of the applicant result in failure to complete applicable conditions and construct or commence the use prior to the expiration date, the applicant may, in writing, request one single extension for twelve (12) calendar months from the original date of inception. The applicant must submit this request to the Planning Department thirty (30) days prior to the expiration date. Failure to demonstrate enactment or submitting a written request for extension may result in termination of the special use permit.

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Carolynne Daniels  
NOFA Page 2 of 2

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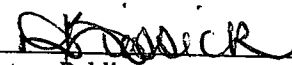
State of Nevada § County of Churchill

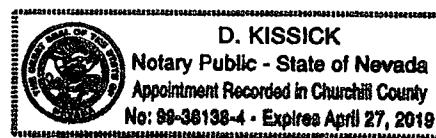
DATED: This 25th day of January, 2016, A.D.

  
Michael K. Johnson, Planning Director

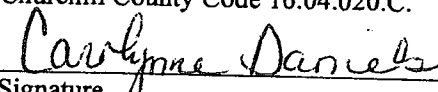
SUBSCRIBED and SWORN to before me

this 25th day of January, 2016, A.D.

  
Notary Public



I, Carolynne Daniels understand the conditions and terms placed on this special use permit and agree to comply with them as per this notice. Further, any/all other oaths, bonds, covenants, expectations, promises or conditions of use previously granted to the applicant pursuant to a special use permit, whether written or not, express or implied, are hereby merged with this special use permit; that this special use permit granted me, with its conditions and terms of land-use set forth herein, as applicable to the above-described property, shall supersede any/all other special use permit(s), previously granted me pursuant to Churchill County Code 16.04.020.C.

  
Signature

Date: 1-20-16



THIS LICENSE MUST BE PROMINENTLY DISPLAYED  
NONTRANSFERABLE

Date Issued: 02/21/2017  
Date of Expiration: 01/31/2018

License Number: 1919-17

STATE OF NEVADA  
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH  
CHILD CARE LICENSING UNIT

727 Fairview Dr., Suite E  
Carson City, Nevada 89701  
Telephone: 775-684-4463  
Toll Free From All Counties Except Clark  
County: 1-800-992-0900

1010 Ruby Vista, Suite 101  
Elko, Nevada 89801  
Telephone: 775-753-1237

3811 W Charleston Blvd, Suite 210  
Las Vegas, Nevada 89102  
Telephone: 702-486-3822  
Toll Free From Within Clark County:  
702-486-3000

This is to Certify that  
located at

LIL' RASCALS HOME DAYCARE L.L.C.

2163 SABRINAS WAY

FALLON, NV 89406

CHURCHILL

Address

City or Town and Zip Code

County

Is hereby licensed for the period indicated above as a CHILD CARE FACILITY in accordance with the provisions of the Nevada Revised Statutes, Chapter 432A and the Regulations and Standards for Child Care. This license is subject to the following restrictions:

Type of Facility: GROUP CARE

Number and Ages of Children: Age Birth through 12 Years : 12,


Total Capacity = 12 (No more than 8 children under the age of 3, no more than 4 children under the age of 1)

Days and Hours of Operation: Sunday : Closed  
Monday : Open at Set Time 06:30 AM - 05:30 PM  
Tuesday : Open at Set Time 06:30 AM - 05:30 PM  
Wednesday : Open at Set Time 06:30 AM - 05:30 PM  
Thursday : Open at Set Time 06:30 AM - 05:30 PM  
Friday : Open at Set Time 06:30 AM - 05:30 PM  
Saturday : Closed

Food Service: Yes

Transportation: No

Other Restrictions:

  
LATISHA BROWN, PROGRAM MANAGER  
CHILD CARE LICENSING

  
OWNER: CAROLYNNE DANIELS

SECRETARY OF STATE



## NEVADA STATE BUSINESS LICENSE

**LIL' RASCALS HOME DAYCARE L.L.C.**  
Nevada Business Identification # NV20151304663

**Expiration Date: May 31, 2019**

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 25, 2018

*Barbara K. Cegavske*

Barbara K. Cegavske  
Secretary of State

*You may verify this license at [www.nvsos.gov](http://www.nvsos.gov) under the Nevada Business Search.*

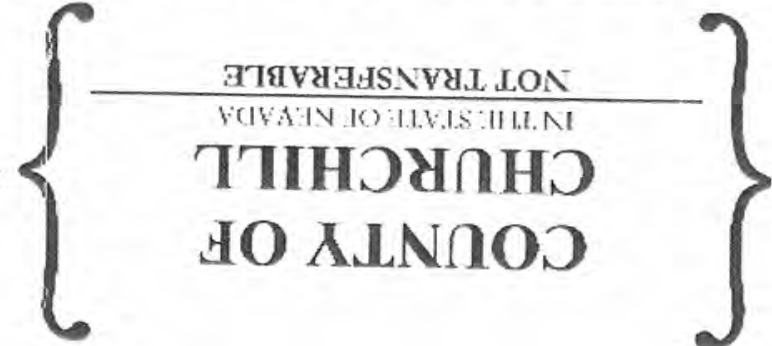
License must be cancelled on or before its expiration date if business activity ceases.  
Failure to do so will result in late fees or penalties which by law cannot be waived.

LIC. NO. 14082

COUNTY OF  
CHURCHILL

IN THE STATE OF NEVADA  
NOT TRANSFERABLE

ACCT. NO. 3008



BUSINESS LICENSE

LIT' RASCALS HOME DAYCARE LLC

HAS PAID TO THE COUNTY OF CHURCHILL, THE LICENSE FEE OF \$ 125.00, AS REQUIRED BY THE PROVISIONS OF CHURCHILL COUNTY CODES, CHAPTER 5, AND IS HEREBY LICENSED TO CONDUCT A HOME DAYCARE BUSINESS, FROM 2163 SABRINAS WAY, DOING BUSINESS IN CHURCHILL COUNTY, NEVADA, BEGINNING JULY 1, 2018 AND ENDING JUNE 30, 2019.

Churchill County Planning Dept.  
Business Licensing  
155 N. Taylor Street, Suite 194  
Fallon, NV 89406

*Barbara Blum*  
AUTHORIZED SIGNATURE

6/29/18

DATE



State of Nevada • Office of the State Fire Marshal

Certificate of Compliance for Non-Structural Fire and Life Safety

This certificate is issued certifying that, at the time of issuance, this structure was in compliance with the State Fire Marshal regulations, NAC 477, State of Nevada, regulating building construction, use, or occupancy. This certificate does not create and express or implied warranty or guarantee.

Building Name LIL RASCALS HOME DAYCARE

Owner / Administrator CAROLYNNE DANIELS

Address 2163 SABRINAS WAY, FALLON, NV 89406

Use GROUP CARE (12 CHILDREN)

Occupancy Classification R-3 Type of Construction UNKN.

OFFICER ELY, NSFM DIVISION

Inspected By

Project Number N/A

Robert J. Chambers

Nevada State Fire Marshal

Date Issued JANUARY 15, 2019

Please Post in a Conspicuous Place

# Lil' Rascals

## Parent & Provider Agreement

2163 Sabrina Road Fallon, NV 89406  
(775) 427-7594

Our responsibility as your home care provider is to maintain a safe, fun & learning environment for your child. Lil' Rascals is here to meet all needs of every child. Please read the following policies so we can achieve this together.

**Drop off & Pick up:** If someone other than yourself is going to pick up your child I will need advance notice. If I have not met this person I will require them to provide picture ID. If there is no advance notice & you cannot be reached &/or a picture is not provided your child will not be released. **NO EXCEPTIONS!** This is to ensure your child's complete safety. **PLEASE** remember the speed limit on Sabrinas Way and Taylor Place is **25 MPH.**

**Medical Policy:** If your child has a fever of **101+**, is vomiting, has diarrhea, or any other contagious condition they will not be allowed to attend. They will not be allowed to return to Daycare till they have had **NO SYMPTOMS for a FULL 24 HOURS.** If your child becomes sick while in our care I will notify you. They will be sent home if they have a temperature of **101+**, vomiting, diarrhea, or they have a highly contagious condition: pink eye, lice, strep throat, tonsillitis, etc. They will not be allowed to return until they have been properly been treated, a FULL 24 hours from the time diarrhea &/or vomiting stops or 24-48 hours after being on antibiotics. **The day you go to the doctor for antibiotics/medicine is NOT counted as part of the 24 hours.** If you cannot be reached I will call your emergency contacts. If your child gets a minor injury I will treat it appropriately & give lots of TLC. I am certified in infant & child CPR and First Aide. If medication needs to be given during the day Lil' Rascals must have a **signed and dated Medication Request Form** in File. Also in your Childs File should be Current Immunization Records, Consent for Medical Treatment, Consulting with Physician or RN and a current Health Statement Signed and Dated. Forms are attached for your review and signature. Accident/Injury Reports will be used.



**Training/Requirements for Daycare Operation:** As the owner of Lil' Rascals and all employees we are certified in Infant/Child & Adult CPR, First Aide, Recognition of Signs and Symptoms of Illness, Recognition and Reporting of Child Abuse and Neglect, SIDS and Human Growth and Development or Positive Guidance. Along with anything the State of Nevada may require. Owner and ALL employees will be FBI Fingerprinted and Background checked through the State of Nevada. Along with a negative TB Test.

**Inspections and Emergency Plans:** The State of Nevada Child Care Division requires that Lil' Rascals have a routine Health Inspections, Fire Inspections, have routine Fire Drills Monthly, Disaster Drills Quarterly. Written Disaster Plan, Including Shelter in Place and obtain Shelter in Place materials (Home Emergency Kit). Along with posted Evacuation Plan. See Written Disaster plan attached.

**Liability Insurance:** Lil' Rascals Home Daycare is required by the State of Nevada to carry a special Liability Insurance. This is for everyone's safety. If you ever have any questions please ask.

**Tax Letter:** Lil' Rascals will provide each parent with a yearly tax letter for your taxes. We claim all money that is paid to us. If you need a weekly receipt I can provide one.

**Snack & lunch:** We provide breakfast, lunch, snacks and drinks. If your child is on formula or any special baby food and snacks please, provide these items. I will serve healthy snacks and on Friday we have treat day. Occasionally I will take the kids out for lunch. Lil' Rascals is part of the State Program Food For Kids.

**Sign In and Out Sheet:** Daily we need to use a Sign in/out sheet. This is for safety reasons. We will use this sheet to account for children when we have a Fire or Disaster Drill. Or incase we have a real fire or disaster.



**Personal Belongings:** Your child is welcome to bring toys or security items. Please keep in mind I am not responsible for these items. If the item cannot be shared please save it for home.

**Transportation:** Lil' Rascals may transport children to Field Trips. During Sports seasons we may transport and meet in town for pickup. All parents **MUST sign a Transportation Release Form** (see attached form). Lil' Rascals Home Daycare will ask parents to provide a child restraint seat. If unable to provide a restraint seat, Lil' Rascals does have spare seats available. Our vehicles are insured for transporting children. We also are required to have a transportation log.

**Curriculum:** We will work with all of the kids either in a group or a one on one basis with appropriate skills. We will have learning times where we read, sing, practice colors, ABC's, numbers, shapes, opposites, left/right, etc. We will also do crafts and painting. Along with free play which includes outdoor play, dress-up, kitchen, school, etc. Curriculum is part of our everyday schedule.

Within 3 months after a child is enrolled we will assess the child by use of, without limitation, portfolios, observations, checklists, rating scales and screening tools. Such an assessment must be repeated biannually thereafter to monitor and support the learning and development of each child that is enrolled.

**Naptime:** Naptime is shortly after lunch (about 1:00). If you can **please, provide a pillow and blanket to keep here for naptime**. We will wash them weekly. Everyone lies down even if it's just a rest. Lil' Rascals has a bed for everyone that is enrolled. We don't like to share germs. If your child does not fall asleep after 30 minutes of rest time they may play quietly, read, color, do a project or watch a movie while the other children are napping. If your child needs more than one naptime that is perfectly fine. We can follow any schedule.

Also we practice reducing the risk of SIDS in Lil' Rascals Home Daycare. Each child will be placed on their backs for sleep time. If a parent insists on placing their baby to sleep in a side or tummy position, we are required to have a note from the infant's pediatrician that states the medical reason why the baby needs to sleep in a position other than on the back. **Be sure the note is dated and signed by the pediatrician.**

**Discipline:** When a behavioral problem arises they will be put in time out for an age appropriate amount of time (1 minute per year of age). They'll be sat alone with no contact from the other kids. It is not my policy to discipline your child in any verbal or physical manner. We here at Lil Rascals are by law required to report any child abuse or neglect. We will report immediately to the Child Abuse Division.

**Playground/Trampoline Release:** We have an awesome playground area for the children to play in. We have a small fenced grassed area and a fenced playground area. We have slides, cars, bikes, toys and a small trampoline for the little guys and a big trampoline for the bigger kids. 2 children on the trampolines at a time for safety reasons. We also ask that you [sign a liability release for the trampoline](#). See attached.

**Diapers & Potty Training:** I have no problem with changing diapers & helping to potty train. [Diapers, wipes, powders and creams will be your responsibilities](#). Please, provide me with at least [one extra outfit or two to leave here](#) for any accidents. See Attached Potty Training Policy.

**Infants/Toddlers:** Lil' Rascals allow newborns all the way to age 12. When a infant or toddler enroll the parent and the provider must agree in **writing** to the following matters...

- Feeding Schedule and Types of food
- Diapering
- Sleeping Schedules
- Toilet training
- Change of clothes, which are provided by parents
- Bathing, including, without limitation, the kind of soap to be used
- Precautions against infectious disease
- Dailey reports to the parents
- Any special precautions regarding the heath and safety of the child
- Any other information deemed necessary by the home daycare of bureau

Lil' Rascals will provide each parent of an infant (under age 1) with an Infant Daily Report. Sample of form is attached.



## **No Smoking: ABSOLUTELY NO SMOKING ON PREMISES!!!!!!!!!!!!!!!!!!!!!!**

**Attendance:** Please notify us as soon as possible when your child will be absent or for schedule changes. We will do the same. Rates do **NOT** vary in the event of **ANY** absence. PLEASE, be courteous of Our time as I will of yours.

**Scheduled Hours:** Our hours of operation are from 6:30 a.m. to 6:00 p.m.. If you need me before or after your scheduled hours please call or talk to make **PRIOR** arrangements. We too have appointments, commitments and a family. **PLEASE BE Courteous!**

**Rates:** \$150 Per Week. Rates do **NOT** vary in the event of **ANY** absences: sick days, vacation & holidays. If I take a sick day or a personal day you are not responsible to pay me for that day. This is the **ONLY** exclusion. **This is to ensure your child's spot at Lil' Rascals.** You will be allowed to take 1 week vacation without being charged per year. We need at least a **2 week** notice so we can plan ahead. We will close at least 2 weeks out of the year for family vacation. **Lil' Rascals will be closed on holidays with pay.** (see attached List) In case there may be a potential absence due to maternity leave, summer, or extended leave from your job, **HALF** of your monthly fee is required for the entire time of your absence. **This is to HOLD your child's POSITION!!!!**

**Payment Policy:** Payment will be due by Friday Mornings of every week or two weeks for all you Bi-weekly parents in **FULL.** Unless other arrangements are made in advance. If you fall behind you will be charged \$10 automatically & will have until the following Monday to pay your entire balance including late fees. You will be charged \$5 a day after that until the following Friday. On Friday you will be terminated with **NO notice.** It is your responsibility not mine, to remember to pay on time. I except Cash, Checks or I have a Card Machine.



**Termination:** I require that a courteous 2 full working weeks notice be given if you wish your child to no longer attend as the same respect will be given if I chose to terminate.

**Parent Involvement:** There may be some Themed weeks or projects that we work on here at Lil' Rascals that I may have Parents help bring item's in or when we have a party you may be asked to bring in food or supplies. I also ask that you read and follow all rules and regulations in the Parent and Provider Agreement so we can ALL work as a TEAM to make Lil' Rascals Home Daycare the absolute BEST experience for your child. We will need some parents to volunteer for Field Trips.

At anytime, either or both parents have the right to observe the program of Lil' Rascals before enrollment and at any time after enrollment of the child.

I **Carolynne Daniels** is always willing to answer any questions, address any concerns & listen to any suggestions you may have Monday-Friday 6:30a.m.- 9:00 p.m.. Please do not hesitate to call. Cell Phone is 427-7594 and Home Phone 423-9109. Or email at [lilrascalshomedaycare@yahoo.com](mailto:lilrascalshomedaycare@yahoo.com). I truly look forward to getting to know you parents and kiddos. Welcome to the Lil' Rascals Family!

THANK YOU FOR CHOOSING  
LIL' RASCALS HOME DAYCARE

Lil' Rascals Home Daycare  
4767 Rancheria Road, Fallon, NV 89406

## Emergency Action Plan

Facility Name: Lil' Rascals Home Daycare  
Facility Address: 4767 Rancheria Rd.  
Fallon, NV 89406  
Business Phone: (775) 423-3370

Facility Main Contact: \*Carolynne Daniels\* (775) 427-7594  
Chris Daniels\* (775) 217-0428

Emergency Kit Location(s): In front hallway closet closest to front door

Number of Children: No more than 12

Fire/Rescue (911)	C.C.F.D.	(775) 423-6521
Sheriff Station (911)	C.C.S.D.	(775) 423-3116
Police Station (911)	C.C.P.D.	(775) 423-2111
Banner Hospital		(775) 423-3151
Poison Control		1-800-222-1222
Washoe County Poison Control		(775) 982-4129
Nevada Child Abuse Hotline		1-800-992-5757
Churchill County Search & Rescue		(775) 423-4403
NV Energy		1-800-962-0399
Granite Propane		(775) 577-2361

## Lil' Rascals Home Daycare: Emergency Action Plan

**Lil' Rascals will perform Monthly Fire Drills and Disaster Drills will be Quarterly (every 3 months).**

**Evacuation:** In case of the need to evacuate our site, the following procedures will be followed:

When the decision is made to evacuate the Home Daycare facility, the Director will make announcement in the most expeditious way possible that all kids and daycare staff are to evacuate. The director will notify staff and communicate what type of emergency is present.

### **Evacuation**

#### **Routes/Exits:**

- Children are cared for in the main part of the house **ONLY** and are not permitted in the garage area.
- Exits (all windows and doors are checked regularly to ensure proper opening) Evacuation Plan Posted by back and front doors...
  - **Living room:** Go to Front door and/or Living room windows or straight to back exiting sliding door
  - **Kitchen:** Back exit Sliding door/or front door
  - **Dining room/family room:** Back exit sliding door and/or window by eating table/or front door
  - **Bathroom:** Go straight to front door for exiting
  - **Bedrooms:** Go straight to front door for exiting and/or use bedroom window



## Lil' Rascals Home Daycare: Emergency Action Plan

### Evacuating Infants/Children:

- Infants, New Born to 2 years of age will be evacuated by Daycare staff. By using a portable playpen with wheels. The facility owns 1 portable playpen which will remain in the front hall closet near front door along with the Home Emergency Kit. Daycare staff will grab Home Emergency Kit.
- In case of the need to evacuate through the windows, children will be placed outside of windows first, using any item available to place them on the ground.
- All other children shall gather in a small group by Front door and Chris (or other daycare staff if Chris is absent) will supervise an orderly evacuation to the designated evacuation site.
- The Director will check bathroom, bedrooms, closet's, play areas, etc. before grabbing Black File Box with Children's Personal Files with Emergency contact information, daily sign-in sheet and cell phone.

### Notification: Once all children and staff are safely evacuated

- The director will be responsible to notify 9-1-1 of the emergency from a cell phone outside the Home Daycare facility once the evacuation is complete.
- The director will also notify Parents of the evacuation.

## Lil' Rascals Home Daycare: Emergency Action Plan

### Emergency Kits/Information:

- Emergency kit that is located in front hallway closet by front door, it will be taken in the playpen for infants.
- The director will grab black filing box with all of the Children's Personal Files with Emergency contact information along with daily sign-in sheet and cell phone.

### Evacuation Sites:

- Across street north of house GREEN gate by tree
- Neighbors to the west of house (for fire)

Alex and Debbie Vanderstoel  
4805 Rancheria Road  
Fallon, NV 89406  
(775) 423-4690

- Out-of-neighborhood (explosion, flooding)

Venturacci Park on Venturacci Lane across from  
Northside Early Learning Center

Once we make it to evacuation site safely  
the Director will make sure all children  
are accounted for that are on the daily  
sign-in sheet including all staff.

## Lil' Rascals Home Daycare: Emergency Action Plan

---

### Transportation to Evacuation Locations:

- Infants will be pushed in a portable play pen to the evacuation site and weather permitting if we go to neighbors to the west of house.
- Children will be driven in a personal vehicle with appropriate car seats, to the Venturacci Park on Venturacci Lane.

**Shelter-in-Place:** In case of the need to stay put due to a tornado or notification from authorities, the following procedures will be followed.

**Location:** Children and staff will be taken into the laundry room of the house

- Emergency kit with food, toys and water are stored in the front hallway closet. Daycare staff will grab and bring in Laundry room.
- A first aid kit is stored in the laundry room.
- A battery-powered radio is stored in emergency kit.
- Supplies for sealing the room are stored in emergency kit.
- The director will grab black filing box with all of the Children's Personal Files with Emergency contact information along with daily sign-in sheet and cell phone.



## Lil' Rascals Home Daycare: Emergency Action Plan

### Notification:

- The director will notify Parents/Guardians once the immediate threat has passed.

**Parent Reunification:** In case of the need to evacuate or when parents/guardians are unable to get to children, the following procedures will be followed to reunite children with parent/guardians (or other contacts designated by parent/guardian as soon as it is safe.

**Release:** All children will remain under the supervision of Lil' Rascals Home Daycare until children are release to authorized contacts listed on the child's form with proper identification

### Important Information:

- Parents/guardians are provided:
  - Copy of Emergency Action Plan
  - Contact information for Carolynne Daniels including cell phone (775) 427-7594 and Chris Daniels (775) 217-0428
- Parents/guardians contact numbers are:
  - Stored in Carolynne Daniels cell phone
  - Folder in outside zipper pocket of Playpen

001-501-97

001-551-01

441

001-551-02

437

001-551-03

001-191-36

341

VENTURACCI  
PARK

321

340

001-011-14

NORTHSIDE  
ELEMENTARY  
SCHOOL

VENTURACCI LANE

MICHAEL DRIVE

PINTAIL DRIVE

"D" STREET

MEADOW

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001-027-42  
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001-024-40

441 Michael Drive  
VARIANCE

Parcel Number	Property Owner's Name(s)	Property Owner's Address	City	State	Zip Code
	DANIELS CAROLYNNE	2163 SABRINAS WAY	Fallon	NV	89406
1-027-11	KING SHAUN	441 MICHAEL DR	Fallon	NV	89406
1-027-01	DAVIS MOLLY J	400 VENTURACCI LN	Fallon	NV	89406
1-027-02	URQUHART KRIS D	585 SUNSHINE LOOP	Fallon	NV	89406
1-027-03	SMITH ROBERT & LOREE	700 D ST	Fallon	NV	89406
1-027-04	WOODS JUDITH L	640 W D ST	Fallon	NV	89406
1-027-05	WEZDENKO RICHARD JAMES	P O BOX 110	Fallon	NV	89407
1-027-06	INGRAM RICHARD L & BRENDA M	920 CHAMA CIRCLE	Fallon	NV	89406
1-027-07	BLAKEY ERIC & CELESTIA	P O BOX 344	Fallon	NV	89407
1-027-08	NORTHINGTON HOWARD & DANIELLE	3360 DRAYER LN	Fernley	NV	89408
1-027-09	WESNER MICHAEL S & LANA	421 MICHAEL DR	Fallon	NV	89406
1-027-10	CAMPBELL COREY ERIN & SHIRLEY A	431 MICHAEL DR	Fallon	NV	89406
1-027-12	ANDERSON ALVIN & KRIS	451 MICHAEL DR	Fallon	NV	89406
1-027-13	DAVIS ROBERT	195 CLASSIC WAY	Fallon	NV	89406
1-027-14	POLYCOMP TRUST CO CUSTODIAN	900 WILDES RD	Fallon	NV	89406
1-027-15	TROXEL GARY L & CYNTHIA E	943 W WILLIAMS AVE	Fallon	NV	89406
1-027-16	DURHAM MATTHEW R	511 MICHAEL DR	Fallon	NV	89406
1-027-28	SHARP ASHLEY G	328 KINGSWAY W	Bremerton	WA	98312
1-027-29	SWANSBRO RONALD J & CATHERINE	524 VENTURACCI LN	Fallon	NV	89406
1-027-30	DOW CARMEN R	1248 GREEN VALLEY DR	Fallon	NV	89406
1-027-31	CASEY M J	496 VENTURACCI LN	Fallon	NV	89406
			San Juan		
1-027-32	GRISS OLIVIER F	P O BOX 615	Bautista	CA	95045
1-027-33	MAY JOSHUA J	456 VENURACCI LN	Fallon	NV	89406
1-027-34	LEMIEUX CHRISTOPHER	442 VENTURACCI LN	Fallon	NV	89406
1-027-35	VIADO MICHAEL T & EVANGELINA D	428 VENTURACCI LN	Fallon	NV	89406
1-027-36	HEDGES DANIEL W	1606 LATTIN RD	Fallon	NV	89406
1-027-37	MONTALVO RYAN WILLIAM	1111 JACOB LN	Carmichael	CA	95608
1-027-38	URQUHART DANNY & VIRGINIA	350 DRUMM LN	Fallon	NV	89406
1-027-39	REECE-LASURE RETA R	501 VENTURACCI LN	Fallon	NV	89406



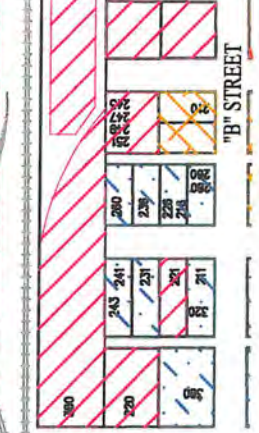
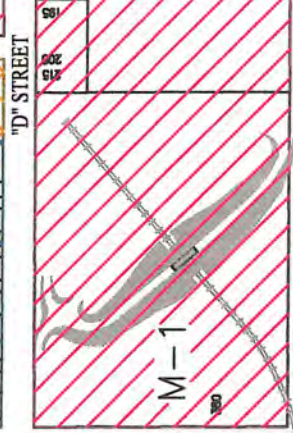
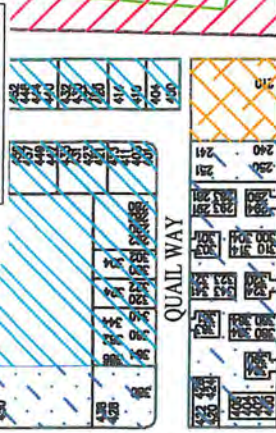
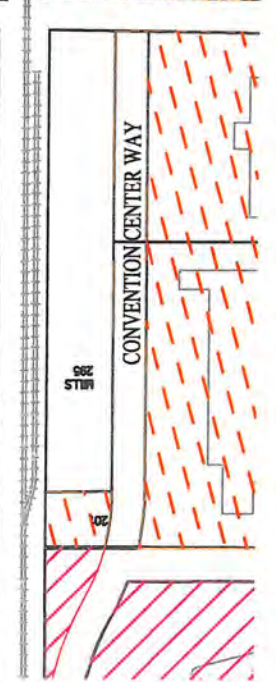
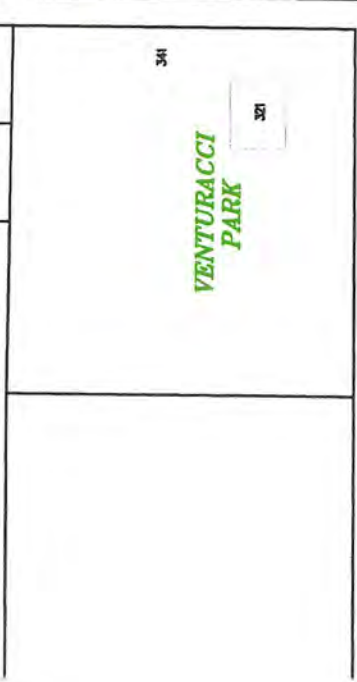
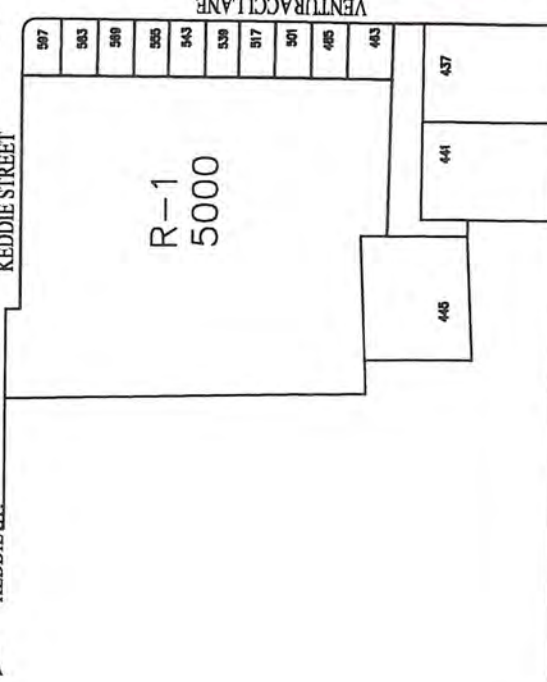
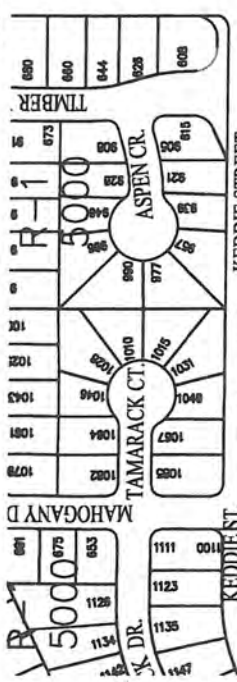
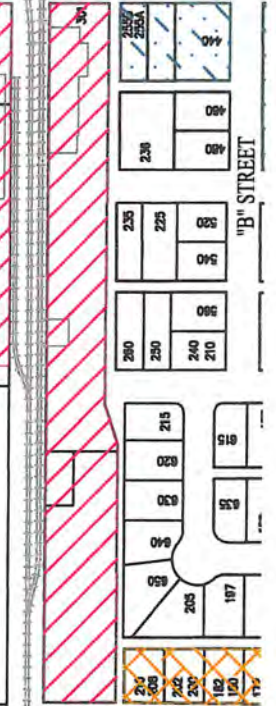
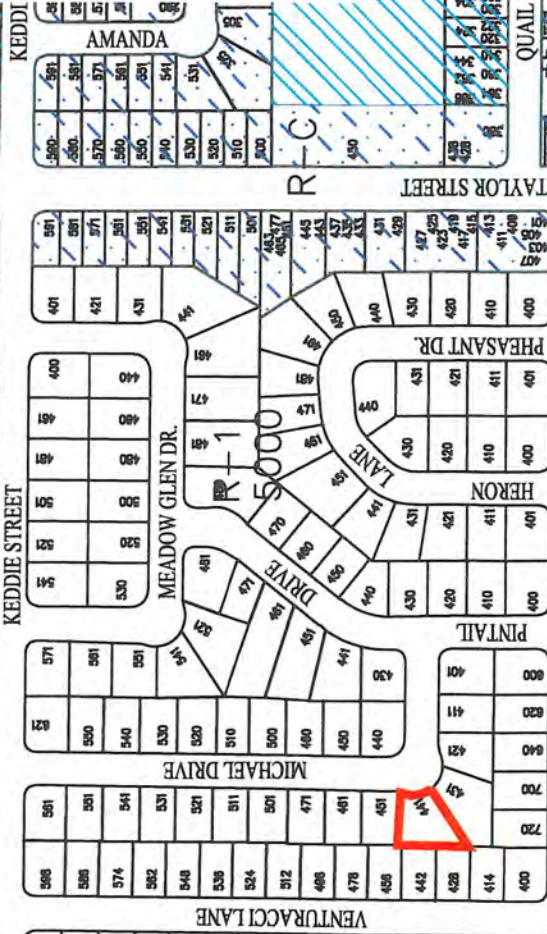
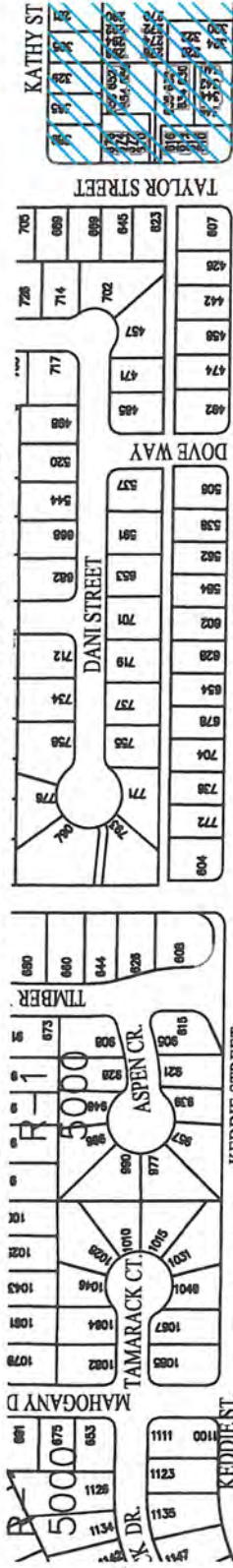
441 Michael Drive  
VARIANCE

Parcel Number	Property Owner's Name(s)	Property Owner's Address	City	State	Zip Code
1-027-40	MONTALVO RYAN WILLIAM				
1-026-11	SCHOLZ JEFFREY & SHEILA TRUSTEE	430 MICHAEL DR	Fallon	NV	89406
1-026-12	TUCKER GEORGE ROBERT JR	441 PINTAIL DR	Fallon	NV	89406
1-026-13	CORBITT DONALD W & KIM D	451 PINTAIL DR	Fallon	NV	89406
1-026-14	FAIRFIELD JOEL K & TERRI C	461 PINTAIL DR	Fallon	NV	89406
1-026-16	YOUNG VIOLA M TRUSTEE	440 MICHAEL DR	Fallon	NV	89406
1-026-17	WHITE LOIS JEAN TRUSTEE	450 MICHAEL DR	Fallon	NV	89406
1-026-18	MUTCH JAMES J SR & JUDITH A	460 MICHAEL DRIVE	Fallon	NV	89406
1-026-19	TROXEL GARY L & CYNTHIA E	943 W WILLIAMS AVE	Fallon	NV	89406
1-026-20	WRIGHT ANNA M & KENNETH L	510 MICHAEL DR	Fallon	NV	89406
1-011-14	CHURCHILL COUNTY SCHOOL DIST	690 S MAINE ST	Fallon	NV	89406
1-191-35	FALLON CITY OF				
1-851-03	VENTURACCI LEILA MAE	8475 ALLEN RD	Fallon	NV	89406
1-801-97	VENTURACCI & SONS ED	441 VENTURACCI LN	Fallon	NV	89406

# CITY OF FALLON ZONING



ZONING CODE LEGEND	
	R-1
	R-2
	R-C
	E-1
	E-2
	C-1
	C-2
	M-1
	L-1
	NOT IN CITY





# City of Fallon Board of Adjustment Meeting

## July 1, 2019

### Item 6

Consideration and possible approval of an application by Parkside Bible Fellowship, 485 Tedford Lane (APN #001-352-03), for a variance in an R-2 zone to encroach approximately 5 feet-8 inches into the 15-foot front setback in order to construct an addition to the church. **(For possible action)**



Paid \$50  
6-10-19

City of Fallon

VARIANCE APPLICATION FOR: Y Business or \_\_\_\_\_ Home Improvement

Please check one

Applicant: Parkside Bible Fellowship

Address: 485 Tedford LN Fallon NV 89406

Telephone Number: 775-423-3955

X Owner \_\_\_\_\_ In Escrow \_\_\_\_\_ Leasehold

Purchasers in escrow must file proof of title with Variance Board before granted variances are effective.

APN # 001-352-03

Legal Description of Property Involved: Lot \_\_\_\_\_, Blk \_\_\_\_\_ Subdivision \_\_\_\_\_

Street and Number 485 Tedford LN Fallon NV 89406

(Attach sheet for Metes & Bounds Description)

Variance Requested: Adjacent to Fifth St.

Ordinance Provisions: NO Zoning R2

Deed Restrictions NO

Former Restrictions NO

Expiration Date: \_\_\_\_\_

Applicants must present evidence of ability and intent to proceed with actual construction within six months of the above filing date.

It is not possible for me to use the above described property in the way it is zoned because: N/A

My inability to use the above described property in the way I desire causes an undue hardship on me because: (Financial hardship is not considered valid). N/A

The above described property is different from other properties in the same area zoned the same classification because: Attached

Use of the above-described property in the manner proposed by this application will not be detrimental to surrounding properties because: Attached

PLOT PLANS MUST ACCOMPANY THIS APPLICATION

I, \_\_\_\_\_ owner in fee of the above described property state that this application for a variance has been made with my full knowledge and consent and the facts stated above are true to the best of my knowledge and belief.

Owner: Parkside Bible Fellowship

Address: 485 Tedford LN

Fallon NV 89406

Phone # 775-423-3955

Signature: Sherwood Swenson

All the above facts as stated herein are correct to my knowledge and belief.

Applicant: Ferguson Const.

Address: 310 W William Ave

Fallon NV 89406

Phone # 775-423-4422

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

{Nevada

{County of Churchill

Signed and sworn to before me on 06/07/2019

by Sherwood Swenson



JESSE SEGURA

Notary Public-State of Nevada

APPT. NO. 17-4022-4

My Appr. Expires 10-31-2021

{Nevada

{County of \_\_\_\_\_

Signed and sworn to before me on \_\_\_\_\_

by \_\_\_\_\_

{

{

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**Variance Application Attachment**  
**Parkside Bible Fellowship**  
**485 Tedford Lane, Fallon NV 89406**  
**APN 001-352-03**

This building was built in 1974 and over time the administration space has become too small.

The Owner has determined a need for additional administration space.

Based on the existing floor plan, the natural location of the administration space is to the south toward Fifth Street.

The setback line is 15'. The plane on the foundation line is 9'-4" from the setback line. This means the encroachment is 5'-8".

This existing building is on a corner lot. This is the largest parcel in the area. The existing building and proposed addition are not adjacent to the intersection of Tedford Lane and Fifth Street. The proposed construction does not compromise the vehicle sightline at the intersection on Tedford Lane and Fifth Street.

**06-04-2019;** As of this date, and per the verbal direction by the City Engineer. This application does not included a notarized signature and the processing fees. Notarizing the document and submitting the processing fees will gladly and promptly be completed upon request. This application includes the legal description.



Bob Getto  
Ferguson Construction  
310 w Williams Ave. C  
Fallon NV 89406

775-423-4422  
bob@bobgetto.com

# BOOK 38 PAGE 216

TO BOOK 38 PAGE 216

WITNESSES: 28 60

BOOK 38  
PAGE 216



## GRANT, BARGAIN, SALE DEED

THIS INDENTURE WITNESSETH: That ALLEN L. CHILDERS and DOLORES N. CHILDERS,  
husband and wife

in consideration of \$ 10.00, the receipt of which is hereby acknowledged, do hereby Grant, Bargain, Sell and  
Convey to FIRST BAPTIST CHURCH OF FALLON, NEVADA, INCORPORATED

all that real property situate in the City of Fallon County of Churchill  
State Nevada, bounded and described as follows:

The following describes a parcel of land being contained entirely within the NE $\frac{1}{4}$   
of Section 36, T 19 N, R 28 E., M.D.B. & M., City of Fallon, Churchill County,  
Nevada being more particularly described as follows:

COMMENCING at the SE $\frac{1}{4}$  of Childers Estates, Unit 1-A, as filed for record in the  
office of the County Recorder, Churchill County, Nevada, also being the intersec-  
tion of the Westerly line of Tedford Lane with the Southerly line of Fourth Street  
and proceeding thence along the southerly line of Fourth Street N 89°38'46" E 30.00  
feet to the true point of beginning. Thence continuing along said southerly line  
N 89°38'46" E 266.20 feet; thence leaving said line and proceeding thence S 0°16'00"  
E 430.00 feet to a point on the center line of the proposed Fifth Street Extension;  
thence along said center line S 89°30'46" W 266.20 feet to a point on the center  
line of the proposed South Tedford Lane Extension; thence along said center line  
N 0° 16' 00" W 430.00 feet to the true point of beginning., containing an area  
of 2.628 acres of land, more or less.

Together with all and singular the tenements, hereditaments and appurtenances thereto belonging or in anywise  
appertaining.

Witness our hand & this 3<sup>rd</sup> day of January, 1972

STATE OF NEVADA }  
COUNTY OF CHURCHILL } SS.

Allen L. Childers  
Dolores N. Childers  
ALLEN L. CHILDERS  
DOLORES N. CHILDERS

On January, 1972

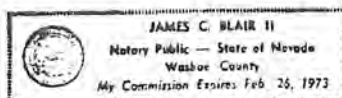
personally appeared before me, a Notary Public,

ALLEN L. CHILDERS and  
DOLORES N. CHILDERS

who acknowledged that he executed the above instrument.

Signature: James C. Blair II  
JAMES C. BLAIR, II (Notary Public)

(Notarial Seal)



ESCROW NO. { CH-6617 RECORDER'S  
ORDER NO. { INSTRUMENT NO.  
WHEN RECORDED MAIL TO: First Baptist Church of  
Fallon, Nevada, Incorporated,  
First & LaVergne St., Fallon, Nev. 89406

128212

Recorded at the Request of

TITLE INSURANCE AND TRUST COMPANY  
JAN 3 1972

2:51 P.M. 4 min past 1 o'clock P.M.

and Recorded in Book 38 of

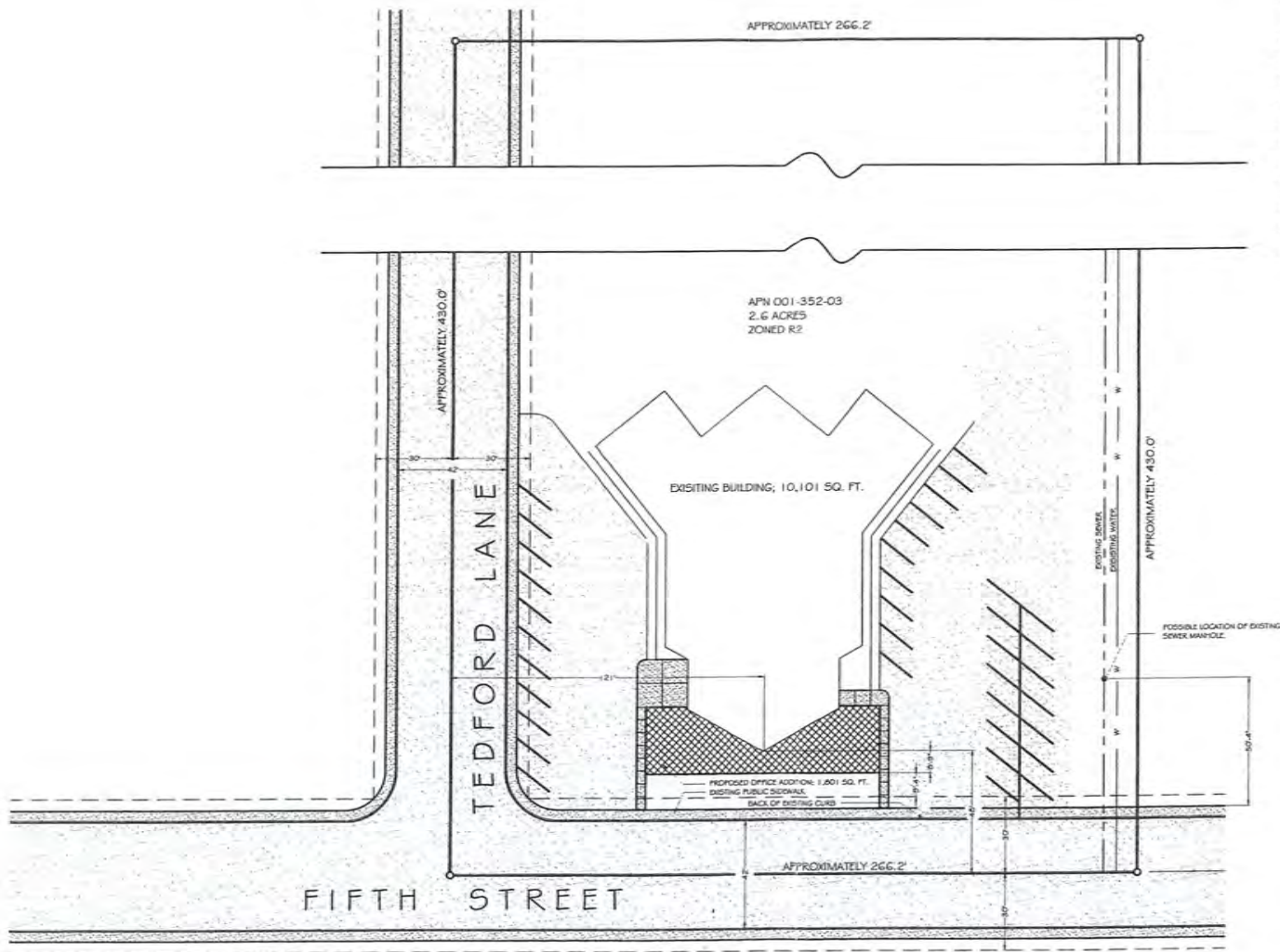
Official Records, Page 216 of Churchill County, Nevada

James C. Blair II

Recorder

300





## SITE PLAN

1" = 20'-0"



1.0

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1.0	PLOT PLAN
2.1	FLOOR PLAN
2.2	REFLECTED CEILING PLAN
3.1	FOUNDATION PLAN
4.1	DIMENSION PLAN
5.1	ROOF PLAN
6.1	SECTIONS
6.2	SECTIONS
7.1	DETAILS
8.1	ELEVATIONS
9.1	ELECTRICAL SCHEMATIC
9.2	ELECTRICAL SCHEMATIC; MECH

310 W. WILLIAMS AVE., C

FALLON NV 89406

775-423-4422

bob@bobgetto.com

NV CONTRACTOR'S LIC 3896



MAY 10 2019

AN OFFICE ADDITION TO PARKSIDE BIBLE FELLOWSHIP

485 TEDFORD LANE

FALLON NEVADA 89406

PARCEL NUMBER: 001-352-03

001-293-06	001-293-05	001-293-04	001-293-03	001-293-02	001-293-01
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TEDFORD I

RICHARDS STREET

FOURTH STREET

# FIFTH STREET

~~RACHEL CT.~~

MC KAY CT.

ST. PATRICK CT.

JOYCE CT.

LAURA  
MILLS  
PARK

<b>Parcel Number</b>	<b>Property Owner's Name(s)</b>	<b>Property Owner's Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
1-352-03	FIRST BAPTIST CHURCH OF FALLON	485 TEDFORD LN	Fallon	NV	89406
1-352-01	FERNANDEZ MIGUEL & JESSICA	659 ESMERALDA ST	Fallon	NV	89406
1-352-02	MILLS DENNIS A & TRUDY A	5475 CANDEE LN	Fallon	NV	89406
1-352-04	FLANNERY OLIVER	470 CINDY LN	Fallon	NV	89406
1-352-05	HEANS C R & MC LEOD C R	480 CINDY LN	Fallon	NV	89406
1-352-06	BASHELIER ELLIOTT & MARY	800 W 5TH ST	Fallon	NV	89406
1-351-01	PITT DONALD & AMANDA A	760 W FIFTH ST	Fallon	NV	89406
1-351-02	OSBORNE GEORGE M & MARGARET	P O BOX 1768	Fallon	NV	89407
1-351-03	BEEGHLY RICHARD & MARY TRUSTEES	445 CINDY LN	Fallon	NV	89406
1-351-04	POMEROY CASEY N	P O BOX 5011	Fallon	NV	89407
1-351-05	FLORES-GUERRERO LEONARDO	425 CINDY LN	Fallon	NV	89406
1-351-06	LOFTHUS JASON D & SURANGKHANA	3160 PENINSULA RD #608	Oxnard	CA	93035
1-353-01	FALLON CITY OF	55 W WILLIAMS AVE	Fallon	NV	89406
1-336-06	ENGEL LANCE R & JENNIFER L	541 RACHEL CT	Fallon	NV	89406
1-336-07	SUMERS NATHAN C & JOY L	521 RACHEL CT	Fallon	NV	89406
1-336-08	ALLRED MICHAEL & MICHAEL S	P O BOX 133	Tahoe City	CA	96154
1-336-09	VEESART STEVEN JOHN	501 RACHEL CT	Fallon	NV	89406
1-312-01	SHARP DEBORAH A	900 W 5TH ST	Fallon	NV	89406
1-312-02	INGERSON EVA ROSEMARY	910 W 5TH ST	Fallon	NV	89406
1-312-03	SOLARI JESSICA L	920 W 5TH ST	Fallon	NV	89406
1-312-04	MYERS JIMMY F & JUDITH I	940 W 5TH ST	Fallon	NV	89406
1-311-01	PAHOLKE WAYNE W & GAIL G	900 JOYCE CT	Fallon	NV	89406
1-311-02	DOOLEY RICHARD E & DOREEN M	910 JOYCE CT	Fallon	NV	89406
1-311-03	WOLFGANG DEBORAH L TRUSTEE	920 JOYCE CT	Fallon	NV	89406
1-311-04	ORZECH TERRENCE W & FRANCES	1205 S MAINE ST PMB #30	Fallon	NV	89406
1-311-09	REID GARRETT DENNIS	941 JOYCE CT	Fallon	NV	89406
1-311-10	FABIAN JOSE J & LEONORLYN S	921 JOYCE CT	Fallon	NV	89406
1-311-11	MC MILLAN KAY E	911 JOYCE CT	Fallon	NV	89406
1-311-12	WILSON KENT L	1 SOUTH CENTER ST	Yerington	NV	89447
1-295-01	MAGEE GEORGE L & MARSHA J	900 ST PATRICK CT	Fallon	NV	89406



<b>Parcel Number</b>	<b>Property Owner's Name(s)</b>	<b>Property Owner's Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
1-295-02	SHYKES RICHARD & COLITA	910 ST PATRICK CT	Fallon	NV	89406
1-295-03	BETTENCOURT DONNA A	920 ST PATRICK CT	Fallon	NV	89406
1-295-09	WALNO LUKE D & MYRANDA M	941 ST PATRICK CT	Fallon	NV	89406
1-295-10	WILLIAMS DAVID	921 ST PATRICK CT	Fallon	NV	89406
1-295-11	SANDOVAL JORGE & TELLEZ LILIANA	911 ST PATRICK CT	Fallon	NV	89406
1-295-12	URQUHART DAN & GINGER TRUSTEES	350 DRUMM LN	Fallon	NV	89406
1-294-12	O CONNOR MARILYN	901 MCKAY CT	Fallon	NV	89406
1-372-03	RUBIO SENON & TRACEY	330 CINDY LN	Fallon	NV	89406
1-372-04	CHRISTIANSEN J & J CO-TRUSTEES	3655 SHECKLER RD	Fallon	NV	89406
1-372-05	BERGES-ALCORN MARY ELLEN TRSTEE	360 CINDY LN	Fallon	NV	89406
1-372-06	HERNANDEZ HERMINIO S & PILAR G	810 W FOURTH ST	Fallon	NV	89406
1-372-07	ST PATRICK REAL PROPERTY LLC	290 S ARLINGTON AVE SUITE 200	Reno	NV	89501
1-373-01	HARPER CAROLE L	790 W FOURTH ST	Fallon	NV	89406
1-373-02	ALVARADO S O & DE OROPEZA B M	385 CINDY LN	Fallon	NV	89406
1-373-03	TUCKER DEENA	375 CINDY LN	Fallon	NV	89406

# CITY OF FALLON ZONING



ZONING CODE LEGEND	
	R-1
	R-2
	R-C
	E-1
	E-2
	C-1
	C-2
	M-1
	L 1
	NOT IN CITY

