

City of New Meadows Short Term RV Use Permit Application

Permit Type: Emergency Transitional Displacement Vacation

Applicant Information:

Applicant Name: Bart Carpenter
Applicant Mailing Address: 207 N. Elk Lake Rd.
Physical Address for RV: 233 Larae St.
Applicant Phone Number: (208) 315-0745
RV License #: _____
RV License Expiration Date: _____

Property Owner Information:

Same as applicant
Name: _____
Mailing Address: _____
Physical Address: _____
Phone Number: _____
Property Zone: _____

Complete the section below that pertains to the permit you are applying for.

E Emergency Permit: due to: Fire Flood Wind Earthquake Other: _____

RV Location: My Property The Property of: _____

Please Initial: All are required for an Emergency Permit.

____ I have provided proof of the emergency (photos, contracts for repair, maintenance, etc.)

____ I have provided written permission to place RV on a property other than my own.

____ I understand the permit is valid for 30-90 days with one extension, if necessary.

____ My RV will be occupied only by myself and immediate family.

____ My RV will not be parked on any street.

____ My RV will not be parked in any easement from November 1st - April 30th.

T Transitional Permit: (residing in RV while building a home)

Please Initial: All are required for a Transitional Permit.

BC I have provided a copy of my building permit.

BC I have provided a copy of my building contract or manufactured home purchase agreement.

BC I understand the permit is valid for 180 days with one 90-day extension, if necessary.

BC My RV will be occupied only by myself and immediate family.

BC My RV will not be parked on any street.

BC My RV will not be parked in any easement from November 1st - April 30th.

V Vacation Permit: (family / friends residing in RV on my property for up to 14 days per visit)

Please Initial: All are required for a Vacation Permit.

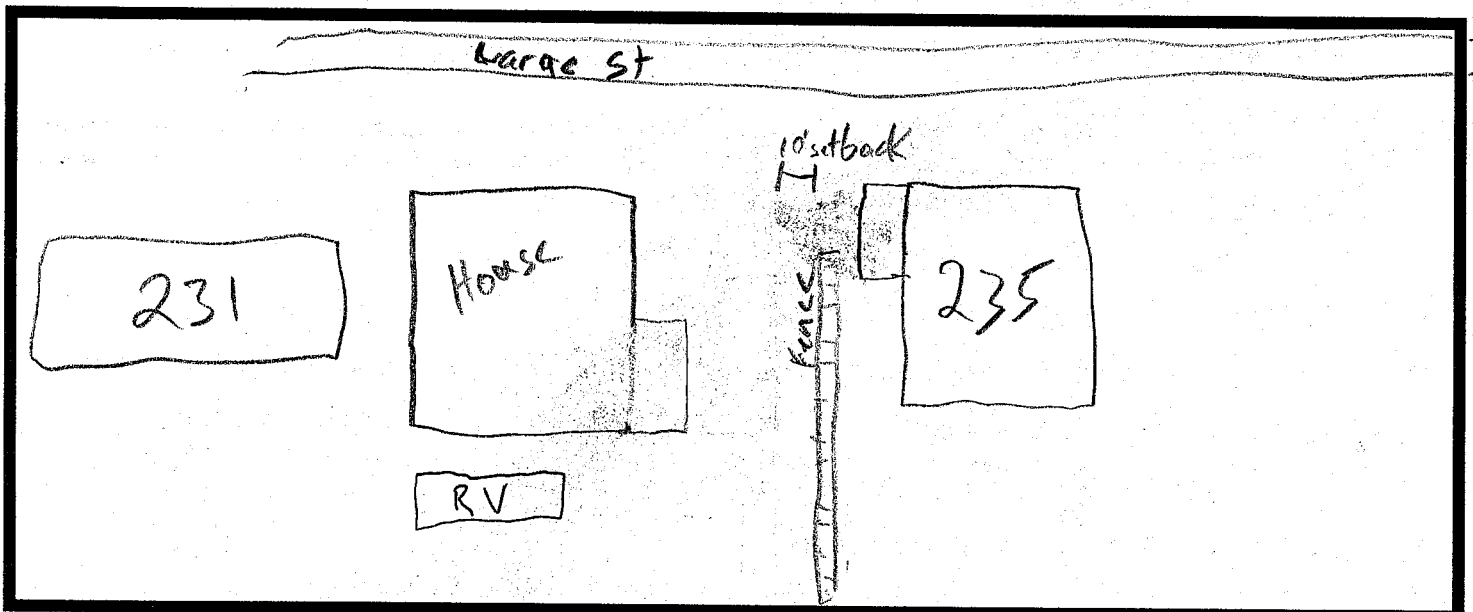
- ___ I have read, understand, and will comply with city code regarding RVs in the city limits.
- ___ This permit shall allow for up to 30 days of vacation RV use on my property in a 1-year period.
- ___ Visitors shall not remain for more than 14 consecutive days.
- ___ My property is set up for RV vacation use as per the zoning code.
- ___ The RV will not be parked on any street or easement.
- ___ The RV will not be connected to the City sewer system.
- ___ I will acquire an updated vacation permit each time an RV is occupied on my property.

D Displacement Permit: (unable to find adequate housing)

Please Initial: All are required for a Displacement Permit.

- ___ My RV design and plan was approved by Planning & Zoning.
- ___ My RV will be placed in a residential zone.
- ___ My RV is fully operational & will be tied to the City's water and sewer system permanently.
- ___ My RV will comply with setbacks on the property.
- ___ My RV will be placed on a level pad of concrete or gravel.
- ___ I understand this permit is to be renewed every 180 days.

Please provide a diagram showing where on the property the RV will be placed. Include current structures, cross roads, setbacks, and any other pertinent information: separate sheet provided



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An RV Short Term Use Permit may be issued subject to the regulations contained in the New Meadows City Code and is hereby agreed that the use of RVs on private property be in accordance with the specifications stated in the City code and this application.

Applicant Signature: 

Property Owner Signature: 

Office Use Only

Date Received: _____ Staff Initials: _____ Application Complete: Yes No

Application Approved Denied Permit # Issued: _____

Fee Paid _____ No Fee Receipt #: _____ Permit Expiration Date: _____

Emergency 30-90 days (one 30-90 day extension)

Date of initial Permit Issuance: _____

Date of Extension: _____

Expiration Date of Permit: _____

Expiration of Extension: _____

Transitional 90-180 days (one 90 day extension)

Date of initial Permit Issuance: _____

Date of Extension: _____

Expiration Date of Permit: _____

Expiration of Extension: _____

Vacation 30 days annually - \$100 annually or \$5 per visitor non-refundable

Date of initial Permit Issuance: _____

Dates of use: _____

Dates of use: _____

Expiration Date of Permit: _____

Dates of use: _____

Dates of use: _____

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

Displacement 180 days (180 day extension) Sunsets 2023

Date of Council Approval: _____

Date of Council Approval: _____

Date of Council Approval: _____

Date of initial Permit Issuance: _____

Date of Extension: _____

Date of Extension: _____

Expiration Date of Permit: _____

Expiration of Extension: _____

Expiration of Extension: _____