TAOS COUNTY
SUBDIVISION VARIANCE REQUEST FORM

SD VAR No. (File No.)

1. Name of Applicant

Address

Telephone No. Other(s)

2. Name of Property Owner
(If other than Applicant)

Address

Telephone No. Other(s)

3. Name of Subdivision:

4. List in detail the reason a request for a variance is needed.

5. Is this variance request for a planned development area? YES NO (circle one)

6. If you answered "YES" to No. 5, you are required to submit a plan and program for a new town, a complete community or a neighborhood unit.

7. Has a plan and program been submitted? YES NO (circle one)

8. Does the plan development address accommodate public spaces? YES NO (circle one)
9. Does the plan development address improvements, for circulation (i.e. roads, bicycle paths, pedestrian walkways, etc...)?

Total acreage of Subdivision ______________________

YES  NO (circle one)

10. Does the plan development address:

Recreation  YES  NO (circle one)
Lighting  YES  NO (circle one)
Air  YES  NO (circle one)
Service needs  YES  NO (circle one)

Number of Lots ______________________

Zone designation ______________________

(Note: Attach documentation to this application).

11. Are covenants and other legal provisions provided to assure conformity to, and achievement of the plan?  YES  NO (Please attach copies to this application) (circle one)

List section(s) of the ordinance that variance(s) are requested for:

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

12. Date scheduled for review by Taos County Planning Commission.

Date ______________________

13. Name of newspaper where public notice is to appear.

__________________________________________________________________

14. Does this variance request require state or other reviewing agencies to review? YES  NO (circle one)

15. List of agencies that are to review this variance request.

New Mexico State Engineer’s Office

New Mexico Environmental Department

New Mexico Highway and Transportation Department

New Mexico Game & Fish Department

Date letter sent for review: ______________________
National Forest Service

Local Fire Department

Taos County Public Works Division

Emergency Medical Services

Any other agencies deemed necessary
(NOTE: Attach agency responses to this application)

16. Classification of Subdivision (TYPE)

17. Tax Map property Code No.

18. Owner Identification No.

19. Date application for variance was submitted.

20. Name of staff person doing on-site examination.

Date of inspection

Staff Report:
(give a brief synopsis of the on-site examination)

Signature
(Date)

21. Has variance fee of one-hundred dollars been paid?  YES  NO
(ATTACH COPY OF RECEIPT TO THIS APPLICATION)
(circle one)

DATE

APPLICANT’S NAME (Please Print)
ACTION BY THE TAOS COUNTY PLANNING COMMISSION:
(Recommendation to County Commission)

☐ Approved  ☐ Denied

☐ Approved with conditions  Date Action Taken: ______________________

List Conditions: ________________________________________________

________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

Planning Commission Findings of Fact.

1. ______________________________________________________________
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________

2. ______________________________________________________________
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________

3. ______________________________________________________________
   __________________________________________________________________
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   __________________________________________________________________
   __________________________________________________________________

4. ______________________________________________________________
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________
Reason: (List reason for granting variance)

Taos County Planning Commission Chairperson

Date