



MOHAVE COUNTY DEVELOPMENT SERVICES

Mailing Address: P. O. Box 7000, Kingman, Arizona 86402-7000

3250 E. Kino Avenue, Kingman, AZ 86409
Phone: (928) 757-0903 Fax: (928) 757-3577

1130 E. Hancock Rd., Bullhead City, AZ 86442
Phone: (928) 758-0707 Fax: (928) 763-0870

700 N. Hwy. 91, Bldg. B, Beaver Dam, AZ. 86432
Phone: (928) 347-4904 Fax: (928) 347-4905

www.Mohave.gov

Application for an Accessory Residence

Mohave County Zoning Ordinance Section 37.P

For assistance in completing your application request our Planning Technician at 928-757-0903.

An accessory residence shall:

- Not exceed 50% of the primary residence (calculated by livable area, garages and patio space not included). If greater than 50% of the primary residence a special use permit should be obtained, this application does not apply.
- Comply with all setbacks applicable to the zoning classification in which they are located.
- Have a living room of not less than 120 square feet of habitable floor area and an additional 70 square feet of habitable floor area shall be provided for each occupant in excess of two.
- Include a kitchen with a sink, permanent cooking facilities (stove and/or oven that requires a gas connection or 220 volt electrical connection), and refrigeration facilities, each having a clear working space of not less than 30-inches in front, when not attached to or within the primary residence.
- Include a separate bathroom containing a sink, toilet, and bathtub or shower.
- Be attached or within the primary structure and have the same roofline when the lot the residence will be located on is less than .5 of an acre.
- Comply with the requirements of ADEQ and the Mohave County Environmental Quality Division.

Application Requirements:

A complete application package shall include the following:

- Completed application.
- Appropriate fee.
- Plot plan containing the following:
 - North arrow and scale.
 - Location and names of all streets adjacent to the lot.
 - Property boundaries, dimensions, and area of the lot.
 - Location and dimensions of primary residence and accessory residence.
 - If primary residence and accessory residence are separate structures, the distance between the structures must be shown.
 - Location / setback measurements of all existing and proposed accessory structures.
 - Location / setback measurements of all existing and proposed septic systems including the leach fields from the property boundaries and the distance between all septic systems, and existing and proposed buildings.
 - Location of any domestic wells.
 - Location of required off-street parking.

Notice: This permit requests authorization for an accessory residence. Building permits and any other required licensing or permits will still need to be obtained prior to commencement of use.

**Arizona Revised Statutes
11-1604**

- A. A county shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule, ordinance or delegation agreement. A general grant of authority does not constitute a basis for imposing a licensing requirement or condition unless the authority specifically authorizes the requirement or condition.
- B. Unless specifically authorized, a county shall avoid duplication of other laws that do not enhance regulatory clarity and shall avoid dual permitting to the maximum extent practicable.
- C. This section does not prohibit county flexibility to issue licenses or adopt ordinances or codes.
- D. A county shall not request or initiate discussions with a person about waiving that person's rights.
- E. This section may be enforced in a private civil action and relief may be awarded against a county. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against a county for a violation of this section.
- F. A county employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the county's adopted personnel policy.
- G. This section does not abrogate the immunity provided by section 12-820.01 or 12-820.02.

**Arizona Revised Statutes
11-1609**

An applicant may receive a clarification from the county of its interpretation or application of a statute, ordinance, regulation, delegation agreement or authorized substantive policy statement as provided in section 11-1609.

Timeframe: There is a 10-working day timeframe to determine administrative completeness. After the application is determined to be administratively complete there is a 20-working day timeframe for a substantive review.

Fee: \$140.00

Applications may be submitted in person to:

Mohave County Development Services Department

Kingman Office:
3250 East Kino Avenue
Kingman, AZ 86409
928-757-0903
Monday – Friday 8 am – 5 pm

Bullhead City Office:
1130 E Hancock Road
Bullhead City, AZ 86442
928-758-0707
Monday – Friday 8 am – 5 pm (closed 12-1 for lunch)

Receipts will be mailed for fees received after 4:30 pm, checks only after 4:30 pm

Applications may be submitted by mail to:

U.S. Postal Service:
Mohave County
Development Services - Planning
PO Box 7000
Kingman, AZ 86402

Other carriers (i.e. FedEx, UPS):
Mohave County
Development Services - Planning
3250 East Kino Avenue
Kingman, AZ 86409



ACCESSORY RESIDENCE APPLICATION

ARA- _____

Property Information

Assessor Parcel Number: _____ Current Zoning: _____ Parcel Size _____ Acres

Legal Description:

Street Address: _____ City: _____ State: _____ Zip: _____

Owner Information

Owner Name(must match current deed): _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone number: _____ Email: _____

Agent Information (to be completed if owner has appointed an agent to complete the application process)

Agent Name: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone number: _____ Email: _____

Authorization

By signing below I certify I am the current property owner, concur with the request, and all the information is correct to the best of my knowledge. If agent information is completed I allow them to act on my behalf regarding this application.

All owners of record must sign. If property is owned by a commercial entity signing authority status must be provided.

Approvals

Mohave County Department of Environmental Quality

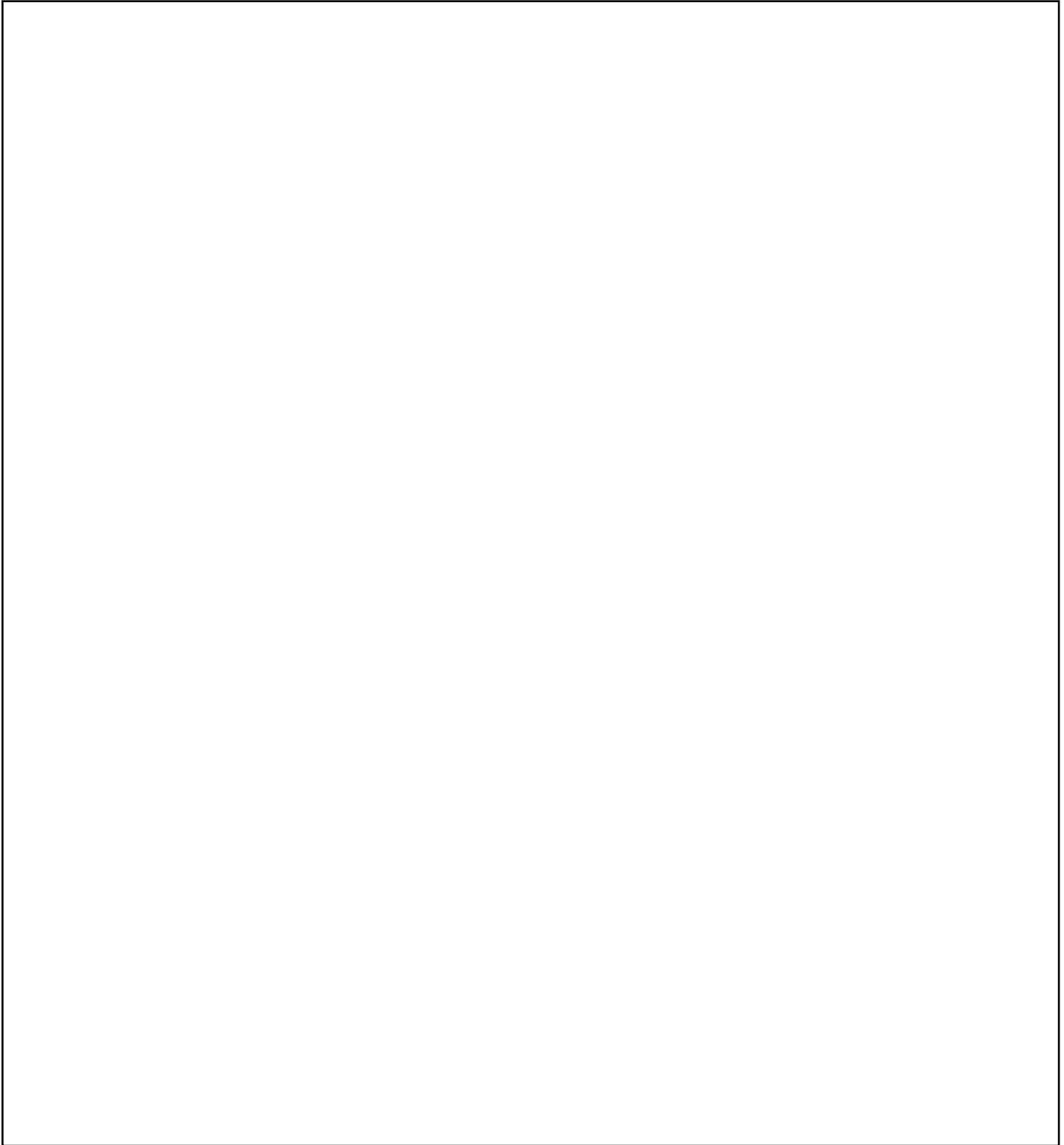
Date: _____

Mohave County Planning and Zoning

Date: _____

Plot Plan for Accessory Residence Application on Assessor Parcel Number _____

- North arrow and scale of plan.
- Location and names of all streets adjacent to the lot.
- Property boundaries, dimensions, and area of the lot.
- Location and dimensions of primary residence and accessory residence.
- If primary residence and accessory residence are separate structures, the distance between the structures must be shown on the plan.
- Location of all existing and proposed accessory structures.
- Location of all existing and proposed septic systems including the leach fields.
- Setbacks from the property boundaries from all existing and proposed structures.
- Setbacks for all existing and proposed septic systems from the property boundaries and the distance between all septic systems, and existing and proposed buildings.
- Location of any domestic wells.
- Location of required off-street parking.



Accessory Residence Application Checklist

Completed application with the signature of all owners of record. If a commercially owned property proof of signers authorization should be included.

Appropriate fee.

Plot Plan.