



*City of Apache Junction*  
*Development Services Department*



**PLANNING AND ZONING COMMISSION  
PUBLIC HEARING STAFF REPORT**

**DATE:** May 3, 2017

**CASE NUMBER:** CUP-1-17

**REQUEST:** This is a request by Kopper Crest Estates LLC to amend a Conditional Use Permit to allow a group care home facility with a maximum of 16 residents at 201 W. 20<sup>th</sup> Avenue, currently zoned High Density Multiple-Family Residential (RM-2).

**LOCATION:** The southeast corner of W. 20<sup>th</sup> Avenue and S. Apache Drive located at 201 W. 20<sup>th</sup> Avenue, Pinal County Assessor parcel number 102-22-298.

**PROPERTY OWNER:** Kopper Crest Estates, LLC

**REPRESENTATIVES:** Debera Kopp

**GENERAL PLAN/  
ZONING DESIGNATION:** Medium Density Residential (maximum of 6 du/ac); presently zoned RM-2.

**SURROUNDING USES:**

**NORTH:** Single-family residential: Superstition Estates Subdivision, zoned Medium/High Density Single-Family Residential (RS-7);

**SOUTH:** Multi-family property: Superstition Villa Subdivision, zoned RM-2;

**EAST:** Vacant property: Superstition Villa Subdivision, zoned RM-2;

**WEST:** Multi-family property: Superstition Villa Subdivision, zoned RM-2.

## **PROPOSAL DESCRIPTION**

This is a request by Kopper Crest Estates LLC requesting an amendment to a Conditional Use Permit ("CUP") for a group care home facility with a maximum of 16 residents at 201 W. 20<sup>th</sup> Avenue within Superstition Villa Subdivision. The subject site is +/- 1/4 of an acre in size on the southeast corner of W. 20<sup>th</sup> Avenue and S. Apache Drive and is currently zoned High Density Multiple-Family Residential (RM-2). The proposal includes renovating an existing four-plex into one facility with 10 bedrooms, 3 full bathrooms and a one-half bath. Of the bedrooms, 4 will be private and 6 will have two beds. The group care home request includes options of facilities that fall under the group care home definition to include: assisted living homes, adult foster care, adult day care, homes for the developmentally disabled, and substance abuse therapy.

## **BACKGROUND**

The subject site is 10,809 square feet and was developed with a 3,168 square foot four-plex residential structure. The building was constructed in 1983, prior to the city's 1985 zoning ordinance. There have been two CUP's at this site, both approving an assisted living facility. The first CUP was approved September 24, 1996 (Resolution #97-04, Case CUP-5-96) to allow the establishment of an adult care home subject to submitting updated site and landscape plans. The CUP had a four year expiration date and was not renewed. A new owner applied for a CUP in 2009 for the same use of an assisted living facility with a maximum number of ten residents. The CUP was approved April 28<sup>th</sup>, 2009 (Resolution No. CUP-1-09, Case PZ-1-09) without an expiration date. The conditions included the maximum number of residents to be 10, seven (7) parking spaces were required and landscape improvements had to be installed in accordance with an approved landscape plan.

The property has since changed hands to a new owner who also operates group care homes. The new property owner wishes to finalize the renovations to the former four-plex and increase the number of residents from 10 to 16. The request to increase the maximum number of residents requires an amendment to the current CUP. The applicant is also requesting to expand the types of group care home facilities permitted on the subject site to include all types of facilities under the federal

definition of group care home including assisted living, adult foster care, adult day health care services, homes for developmentally disabled, and substance abuse therapy (see attached narrative dated January 24, 2017.)

### **PLANNING STAFF ANALYSIS AND FINDINGS**

Group care home facilities within a multiple-family residential zoning district require a conditional use permit process regardless of the size or type of facility. The number of residents and required parking spaces are conditioned by the conditional use permit based on the proposal and size of the property and building(s).

Staff has worked with the architect for this project to address access, landscaping, and additions to the building (see plans attached). The proposed renovations and landscape installations will greatly improve the property and neighborhood. The addition of two ADA parking stalls will bring the property into further compliance with ADA requirements. The paving of all parking spaces will also help with dust control and improve the site overall. The proposed landscape plan complies with the landscape code requirements in the city ordinance. The plans submitted for the conditional use permit amendment are of higher quality and more detail than the plans submitted for the two previous conditional use permits. For reasons unknown, the four-plex has never been fully renovated to better suit a group care home, the kitchen areas for each dwelling unit still remain.

It is staff's understanding that residents will not have personal vehicles on-site. The operators will provide transportation services for residents. Parking will be used for staff and visitor parking; and visitors must be approved prior to the visit. The applicant's narrative states that other facilities she owns have three (3) to seven (7) full time and part-time employees. Table 7-3 of the zoning ordinance states the number of spaces required for a group home is based on the specific project need as determined by the Zoning Administrator. During staff meetings, the Zoning Administrator and applicant have discussed the current required seven parking spaces and the need for more spaces due to the increase of residents from 10 to 16. Staff also acknowledges the property has only so much room for parking spaces. The addition of 2 parking spaces, totaling nine (9) spaces will be sufficient for the property. Currently,

the city code does not allow private property to use right-of-way as parking spaces (Apache Drive and 20<sup>th</sup> Avenue).

The applicant has also requested one sign on the property with the name of the group care home. Per the zoning ordinance, signs are not permitted at group care homes in residential zoning districts unless allowed by CUP. This property is suitable for a sign as it is zoned multiple-family and the maximum square footage request (18 square feet) is well under the sign size requirements for signs on multiple-family zoned properties.

Since parking is provided by access from a public alley, the engineering standards of the city requires the driveway entrance to the alley to meet a standard, and the alley to be paved along the subject site.

The current zoning ordinance code section regarding group care homes 1-6-10 is out of date. Federal regulations and court rulings have changed and staff is in the process of amending the zoning ordinance to address changes in how group care homes are now viewed by the law and various court rulings. Federal regulations under the Fair Housing Act (FHA) state that disabled persons are a protected class. Persons recovering from drug and/or alcohol addiction are disabled under the FHA and therefore are protected from housing discrimination.

Section 1-16-12-D-3 of the Zoning Ordinance establishes certain land use-related criteria for the Commission to consider when evaluating Conditional Use Permits. The proposal is meeting all criteria; the alley will be improved to provide adequate access for parking. This proposal will not provide a negative impact from odor, dust, noise, lighting, or other emissions nor will it have a negative impact on neighborhood property values. The use is compatible with the residential neighborhood and has been used as an assisted living home under previous owners.

#### **PUBLIC NOTIFICATION**

The P&Z Commission public hearing was advertised in the paper 15 days prior to the meeting and letters were mailed to all property owners within 300 feet of the site. A sign was also posted at the property notifying any interested parties of the CUP request and the public hearing date. Staff has not received any comments from citizens or neighboring property owners.

### **PLANNING DIVISION RECOMMENDATION**

The proposed increase of residents from 10 to 16 for a group care home does increase the intensity of the use. Staff has

CUP-1-17  
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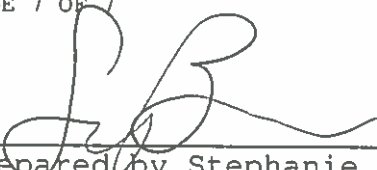
worked with the owner over the past few months to make sure the site can accommodate 16 residents. The improvements to the property will help improve the neighborhood and provide a service to the community. Staff has suggested multiple conditions as part of this CUP in order to maintain regulations for a group care home facility in a residential neighborhood recognizing that the area has many multi-family units already. Staff recommends approval of the proposal subject to the conditions listed under the Recommended Motion.

### **RECOMMENDED MOTION**

I move that the Planning and Zoning Commission (APPROVE/DENY) case CUP-1-17, a request by Kopper Crest Estates LLC, represented by Debera Kopp to amend a Conditional Use Permit (CUP) to allow a group care home facility with a maximum of 16 residents at 201 W. 20<sup>th</sup> Avenue, on the southeast corner of W. 20<sup>th</sup> Avenue and S. Apache Drive, zoned High Density Multiple-Family Residential (RM-2), subject to the following conditions of approval:

1. The maximum number of residents shall not exceed sixteen (16).
2. This CUP is for a group care home facility described as one of the following types:
  - Assisted Living
  - Adult Foster Care
  - Adult Day Health Care Services
  - Homes for Developmentally Disabled
  - Substance Abuse Therapy
3. At no time shall two or more types of group care homes be permitted for residents at this property, at the same time.
4. The owner shall notify Development Services Staff in writing when the type of group care home facility changes.

5. Development Services Staff shall have the right to audit or inspect the property if complaints are received.
6. One double-sided sign with a maximum size of eighteen (18) square feet shall be permitted, subject to issuance of an applicable sign permit.
7. The applicant shall redevelop the site in accordance with the submitted plans within twelve (12) months of the granting of the CUP, or the CUP shall become void.
8. The applicant shall install the landscape improvements in accordance with the submitted landscape plan as part of the building permit process. Decomposed granite shall be used to cover all landscaped areas.
9. The site, as indicated by the site plan, shall accommodate nine (9) parking spaces with two approved to access off of 20<sup>th</sup> Avenue.
10. All proper permits shall be obtained prior to any construction.
11. The alley and driveway apron abutting the property shall be paved in accordance with the City Engineer's requirements, including application for right-of-way encroachment permit.
12. The facility operators shall provide 24-hour supervision.
13. If eviction of a resident is to occur, a notice must be sent to family of the resident regarding proposed eviction, with time limits and include alternate living accommodation referrals.
14. The property must be in compliance with all building, municipal, and zoning codes before a Certificate of Occupancy is issued.
15. If home is used as a substance abuse therapy facility, the Development Services Staff must see the proposed plan of operation, to include programming counseling, and drug and alcohol screening.



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Prepared by Stephanie Bubenheim  
Assistant Planner

Attachments:

- Exhibit #1 - CUP-1-17 Application
- Exhibit #2 - CUP-1-17 Narrative dated January 24, 2017
- Exhibit #3 - CUP-1-17 Zoning Map
- Exhibit #4 - Aerial Map
- Exhibit #5 - Parcel Map #100-29
- Exhibit #6 - Resolution No. 97-04
- Exhibit #7 - Resolution No. CUP-1-09
- Exhibit #8 - CUP-1-09 Approved Site and Landscape Plans
- Exhibit #9 - CUP-1-17 Site and Landscape Plans
- Exhibit #10 - Apache Junction City Code Section 1-16-12-D-3



## EXHIBIT A: Planning and Zoning Application Form

Office Use Only: Filing Date \_\_\_\_\_  
Staff \_\_\_\_\_  
Fees Received \_\_\_\_\_  
Case \_\_\_\_\_

### TYPE OF APPLICATION

<input type="checkbox"/> Annexation	<input type="checkbox"/> Abandonment (Plat/Easement/ROW)	<input type="checkbox"/> Board of Adjustment
<input type="checkbox"/> Cargo Container Permit	<input type="checkbox"/> Certificate of Legal Nonconformity	<input checked="" type="checkbox"/> Conditional Use Permit
<input type="checkbox"/> Development Agreement	<input type="checkbox"/> Development Plan Review	<input type="checkbox"/> General Plan Amendment
<input type="checkbox"/> Lot Splits, Joins & Adjustments	<input type="checkbox"/> Ordinance Text Amendment	<input type="checkbox"/> Planned Development Rezoning
<input type="checkbox"/> Preliminary/Final Plat	<input type="checkbox"/> Preliminary Development Review	<input type="checkbox"/> Sign Permit
<input type="checkbox"/> Special Use Permit	<input type="checkbox"/> Temporary Use Permits	<input type="checkbox"/> Zoning Map Amendment
<input type="checkbox"/> Other _____		

### SITE INFORMATION

SITE ADDRESS/LOCATION 201 W 20th Avenue ASSESSORS PARCEL NUMBER 102-22-2980  
GROSS AREA: \_\_\_\_\_ NET AREA \_\_\_\_\_ EXISTING ZONING RM-2

### BRIEF DESCRIPTION OF THE PROPOSED PROJECT/USE:

Kopper Crest proposes a residential/rehabilitation care facility to be integrated for use and service to the community as needed. for child or adult care home, home for chronically mentally ill, homes for the developmentally disabled, group care agencies, and similar residential living arrangements for medically fragile, handicapped or disabled persons

### APPLICANT INFORMATION

Property Owner(s) Debera Kopp for Kopper Crest Estates  
Address 21012 S Cooper Rd Chandler Az 85206  
Phone Number 480 313 2636 Fax Number 480 383 6768 Email dkopp@gmail.com

Applicant Contact Person/Project Manager Debera Kopp or Tom Norris  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_ Email \_\_\_\_\_

Architect/Engineer Tom Norris  
Address 16835 E Camelback Rd Suite B12 Scottsdale Az 85251  
Phone Number 480 734 7711 Fax Number \_\_\_\_\_ Email tom@norrisarchitects.com

OWNERS SIGNATURE: [Signature] for Kopper Crest Estates DATE: 4-26-17

**Kopper Crest Estates  
Apache Junction, AZ  
Conditional Use Permit Submittal (CUP)  
January 24, 2017**

**Project Narrative**

**Introduction:**

My name is Debera Kopp, I am the manager of Kopper Crest Estates, LLC and have been a business owner and operator in Arizona for over 30 years. Currently I own two residential care facilities, a consulting firm and PEO. My husband is a licensed contractor and combines efforts with my businesses to contribute to our overall success. My family lived in Apache Junction for eight years where in, since 2013, I have been the owner of a ten bed residential care facility off of Royal Palm Road. A complete renovation was needed to bring the building up to a standard of use and now it is the nicest house on the block. The population attended to at that location is of higher medical acuity with a wide variety of disabilities and disease processes. At each location, I employ from 3 to 7 individuals, both on a full and part time basis.

The Kopper Crest Estates Facility will be located at 201 W 20th Avenue, Apache Junction AZ 85120.

Kopper Crest Estates, LLC proposes a residential care facility to be located in an existing building to be renovated to such accommodations set for use as a residential care facility. As seen on the plans, Kopper Crest Estates proposes some change to the exterior of the current building and the overall site which will drastically improve the outward appearance of the property.

The proposal will serve a maximum of 16 residents, individuals in a residential setting that are handicapped or disabled and the organization will be *fully licensed by the State of Arizona* (see attached exhibit A) The potential populations to consider are individuals requiring to reside in a residential and/or rehabilitation facility where our organization provides to those, a continuum of care to include child or adult care homes, homes for the chronically mentally ill, homes for the developmentally disabled, group care agencies and similar residential living arrangements for medically fragile, handicapped or disabled persons who may or may not be afflicted with addictions. NOT to include Sober Living.

As proposed, the Kopper Crest Estates project complies with the City of Apache Junction use parameters, and specifically meets the special criteria applicable to a "residential care facility" and the more general criteria applicable to conditional uses.

- ♦ Kopper Crest Estates other proposed site improvements are the following:
  - Changes to the site will include interior remodeling of the 3000 square foot building.
  - landscape area for outdoor use
  - Installation of a fence around the area.
  - Nine parking spaces created, which is more than sufficient to meet Kopper Crest Estates needs. Staff and visitors will be accommodated with proposed parking spaces. Residents from our population rarely, if ever, drive.
  - No changes are proposed to the site's access to public roads

Kopper Crest Estates project meets the needs, both expressed and exhibited, in our community and respectfully requests the City of Apache Junction's approval of the conditional use permit for use as a residential care facility.

Construction of the remodel will begin immediately upon receipt of required permits.

Exhibit A  
per AZDHS website

Arizona Department of Health Services  
Residential Facilities Licensing  
Providers - Classes / Health Care Institution - Residential

- Assisted Living Facility
- Behavioral Health Residential Facility

Kopper Crest Estate, LLC will be a licensed residential care facility by the AZ Department of Health Services in an assisted or behavioral health capacity

NOT:

Sober Living or  
Community House or

a dumping ground for any persons with an illness or disability who will be a detriment or burden to the neighborhood or the community

Our intent is to provide reasonable accommodations, treatment, therapy, counseling, personal or directed care and any permitted modalities to promote the safety, health and wellbeing of our residents. Once an order has been given by the medical practitioner to an individual classed under the populations listed in the narrative to reside in our facility, they are considered handicapped. Our desire is to serve that population.

I reviewed with AZDHS the specifics between AL and RTC and they said absolutely nothing other than personnel. They mirror each other as the standards, services and

In ARS 36-401.43 (<http://www.azleg.gov/ars/36/00401.htm>) Supervisory care is defined as: 43. "Supervisory care services" means general supervision, including daily awareness of resident functioning and continuing needs, the ability to intervene in a crisis and assistance in the self-administration of prescribed medications. This is exactly what behavioral health treatment provides. We meet this definition as well.

In that same section, Residential Care Institution defines both Assisted Living Homes and Behavioral Health Homes as: "Residential care institution" means a health care institution other than a hospital or a nursing care institution that provides resident beds or residential units, supervisory care services, personal care services, behavioral health services, directed care services or health-related services for persons who do not need continuous nursing services. This is what Occupancy refers to when it describes Residential Care/Assisted Living Homes and what building codes must be followed. It is the same for both, as described above.

The ARS code specifically stated that the people that live in the residence are "disabled" as defined by ARS 41-1491 (<http://www.azleg.gov/ars/41/01491.htm>) which states:

5. "Disability" means a mental or physical impairment that substantially limits at least one major life activity, a record of such an impairment or being regarded as having such an impairment. Disability does not include current illegal use of or addiction to any drug or illegal or federally controlled substance. Disability shall be defined and construed as the term is defined and construed by the Americans with disabilities act of 1990 (P.L. 101-336) and the ADA amendments act of 2008 (P.L. 110-325; 122 Stat. 3553).

**\*\* This ADA law specifically covers those in treatment from Substance Abuse Disorders.**

## **Fair Housing Act Analysis**

Sixth, ninth, and Tenth Circuits have explicitly rejected rational-basis test because of the FHA specifically makes the disabled a protected class for the purpose of statutory claims, even if they are not a protected class for constitutional purpose

Intermediate Scrutiny-zoning restrictions must be intended to

achieve a legitimate government purpose

actually achieve that legitimate government purpose

be the least drastic means necessary to achieve that legitimate government purpose

**Bangerter v. Orem City Corporation**

"Restrictions that are narrowly tailored to the particular individuals affected could be acceptable under the FHAA if the benefits to the handicapped in their housing opportunities clearly outweigh whatever burden may result to them"

**City of Edmonds v. Washington State Idg. Code Council**, 18 F.3d 802, 803, 804 (9th Cir, 1994); see 42 U.S.C. §3602(h).

The Fair Housing Act makes it unlawful "[t]o discriminate in the sale or rental, or to otherwise make unavailable or deny, a dwelling to any buyer or renter because of handicap.

Persons recovering from drug and/or alcohol addiction are disabled under the FHA and therefore protected from housing discrimination.

Zoning practices that discriminate against disabled individuals can be discriminatory, and therefore violate §3604, if they contribute to "mak[ing] unavailable or deny[ing]" housing to those persons

Exhibit A



**INITIAL LICENSE APPLICATION FOR A HEALTH CARE INSTITUTION**  
**ARIZONA DEPARTMENT OF HEALTH SERVICES**  
**PUBLIC HEALTH LICENSING SERVICES – RESIDENTIAL LICENSING**

In accordance with A.R.S. §41-1030

B. An agency 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 or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.

D. This section may be enforced in a private civil action and relief may be awarded against the state. 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 the state for a violation of this section.

E. A state employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the Agency's adopted personnel policy.

F. This section does not abrogate the immunity provided by section 12-820.01 or 12-820.02.

**1. HEALTH CARE INSTITUTION INFORMATION**

Name of Health Care Institution: _____			Tax ID No. _____
Street Address: _____			
City: _____	State: _____	Zip Code: _____	
Mailing Address: _____			
City: _____	State: _____	Zip Code: _____	
Phone No. _____	Fax No. _____	E-mail: _____	
<p>Select one class or subclass (Listed in A.A.C. R9-10-102):</p> <p><input type="checkbox"/> Adult behavioral health respite home</p> <p><input type="checkbox"/> Adult behavioral health therapeutic home</p> <p><input type="checkbox"/> Adult day health care facility</p> <p><input type="checkbox"/> Adult foster care home</p> <p><input type="checkbox"/> Assisted living center</p> <p><input type="checkbox"/> Assisted living home</p> <p><input type="checkbox"/> Behavioral health residential facility</p> <p><input type="checkbox"/> Behavioral health respite home</p>			
If a facility that is not required to comply with A.A.C. R9-1-412, indicate licensed capacity: _____			
If no licensed capacity, indicate 0			
Except for a behavioral health facility, is the health care institution located within ¼ mile of agricultural land?			
<input type="checkbox"/> YES <input type="checkbox"/> NO			
If yes, the name and address of each owner or lessee of agricultural land regulated under A.R.S. § 3-365. Name of owner or lessee of agricultural land: _____			
Street Address: _____			
City: _____	State: _____	Zip Code: _____	
Name of owner or lessee of agricultural land: _____			
Street Address: _____			
City: _____	State: _____	Zip Code: _____	
<p><b>SUBMIT, for each owner or lessee identified, a copy of the written agreement between the applicant and the owner or lessee of the agricultural land as prescribed in A.R.S. § 36-421(D).</b></p>			



INITIAL LICENSE APPLICATION FOR A HEALTH CARE INSTITUTION  
ARIZONA DEPARTMENT OF HEALTH SERVICES  
PUBLIC HEALTH LICENSING SERVICES - RESIDENTIAL LICENSING

Is the health care institution located in a leased facility? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, provide a copy of the lease showing the rights and responsibilities of the parties and exclusive rights of possession of the leased facility.
Is the health care institution ready for a licensing inspection by the Department? <input type="checkbox"/> YES <input type="checkbox"/> NO If no, indicate the date the health care institution will be ready for a licensing inspection: _____
Health care institution's days and hours of operation: Sun _____ Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____
Is health care institution accredited? <input type="checkbox"/> YES <input type="checkbox"/> NO Name of accrediting organization (must be from a nationally recognized organization): _____
SUBMIT, if applicable, a copy of the full accreditation report and cover letter.
Is health care institution requesting certification under Title XIX of the Social Security Act? <input type="checkbox"/> YES <input type="checkbox"/> NO

II. OWNER INFORMATION

The owner is a (select one):		
<input type="checkbox"/> Sole proprietorship	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership
<input type="checkbox"/> Limited liability partnership	<input type="checkbox"/> Limited liability company	<input type="checkbox"/> Governmental agency
Owner's Name: _____		
Street Address: _____		
City: _____	State: _____	Zip Code: _____
Phone No. _____	Fax No. _____	E-mail: _____



**INITIAL LICENSE APPLICATION FOR A HEALTH CARE INSTITUTION**  
**ARIZONA DEPARTMENT OF HEALTH SERVICES**  
**PUBLIC HEALTH LICENSING SERVICES—RESIDENTIAL LICENSING**

If the owner is a partnership or a limited liability partnership, list the name of each partner;

If the owner is a limited liability company, list the name of the designated manager or, if no manager is designated, the names of any two members of the limited liability company;

If the owner is a corporation, list the name and title of each corporate officer; or

If the owner is a governmental agency, list the name and title of the individual in charge of the governmental agency or the name of an individual in charge of the health care institution designated in writing by the individual in charge of the governmental agency:

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

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

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

SUBMIT, if applicable, a copy of the owner's articles of incorporation, partnership or joint venture documents, or limited liability documents.

Has the owner or any person with 10% or more business interest in the health care institution had a license to operate a health care institution denied, revoked, or suspended? ☐ YES ☐ NO

If yes, indicate:

The reason for denial, revocation, or suspension:

The date of the denial, revocation, or suspension: \_\_\_\_\_

The name and address of the licensing agency that denied, revoked, or suspended the license :



**INITIAL LICENSE APPLICATION FOR A HEALTH CARE INSTITUTION**  
ARIZONA DEPARTMENT OF HEALTH SERVICES  
PUBLIC HEALTH LICENSING SERVICES - RESIDENTIAL LICENSING

Has the owner or any person with 10% or more business interest in the health care institution had a health care professional license or certificate denied, revoked, or suspended? ☐ YES ☐ NO

If yes, indicate

The reason for denial, revocation, or suspension: \_\_\_\_\_

The date of the denial, revocation, or suspension: \_\_\_\_\_

The name and address of the licensing agency that denied, revoked, or suspended the license or certification: \_\_\_\_\_

What is the health care institution's proposed scope of services?

Does the applicant agree to allow the Department to submit supplemental requests for information under A.A.C. R9- 10- 108(C)(2) ? ☐ YES ☐ NO

**III. SUPPLEMENTAL APPLICATION FOR ASSISTED LIVING CENTERS AND ASSISTED LIVING HOMES**

Services provided (select all those that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Supervisory care services | <input type="checkbox"/> Behavioral health services other than behavioral care |
| <input type="checkbox"/> Personal care services    | <input type="checkbox"/> Directed care services                                |

**IV. SUPPLEMENTAL APPLICATION FOR BEHAVIORAL HEALTH RESIDENTIAL FACILITIES**

Services provided (select all those that apply):

- |   |  |
|---|--|
| <input type="checkbox"/> Residential services to individuals under 18 years of age  |  |
| <input type="checkbox"/> Residential services to individuals 18 years of age or older whose behavioral health issue limits the individual's ability to function independently |  |
| <input type="checkbox"/> Personal care services   | <input type="checkbox"/> Outdoor behavioral health program |

For a behavioral health residential facility, the licensed capacity for:

Individuals under 18 years of age: \_\_\_\_\_

Individuals 18 years of age and older: \_\_\_\_\_

For an outdoor behavioral health care program, the licensed capacity for:

Individuals between the age of 12 and 17 years of age: \_\_\_\_\_

Individuals between the age of 18 and 24 years of age: \_\_\_\_\_

For an outdoor behavioral health care program, SUBMIT a copy of the outdoor behavioral health care program's accreditation report.

If providing respite services, the requested number of individuals who do not stay overnight in the behavioral health residential facility: \_\_\_\_\_



**INITIAL LICENSE APPLICATION FOR A HEALTH CARE INSTITUTION**  
ARIZONA DEPARTMENT OF HEALTH SERVICES  
PUBLIC HEALTH LICENSING SERVICES – RESIDENTIAL LICENSING

**V. FEES**

SUBMIT applicable fees required by R9-10-106. All fees are non-refundable except as provided in A.R.S. § 41-1077.

**VI. STATUTORY AGENT OR INDIVIDUAL WHO ACCEPTS SERVICE OF PROCESS AND SUBPOENAS**

Name: _____	Title: _____
Street Address: _____	
City: _____	State: _____ Zip Code: _____
Phone No. _____	

**VII. GOVERNING AUTHORITY**

Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____

**VIII. CHIEF ADMINISTRATIVE OFFICER**

Name: _____ Title: _____
Highest Educational Degree: _____
Work experience related to the health care institution class or subclass related to licensing requested: _____

**IX. SIGNATURES**

A.R.S. §36-422(B) states an initial licensing application filed shall contain the written or electronic signature of:

1. If the applicant is an individual, the owner of the health care institution.
2. If the applicant is a partnership or corporation, two of the partnership's or corporation's officers.
3. If the applicant is a governmental agency, the head of the governmental agency.

_____ Signature	_____ Title
_____ Signature	_____ Title



## INITIAL LICENSE APPLICATION FOR A HEALTH CARE INSTITUTION

ARIZONA DEPARTMENT OF HEALTH SERVICES

PUBLIC HEALTH LICENSING SERVICES - RESIDENTIAL LICENSING

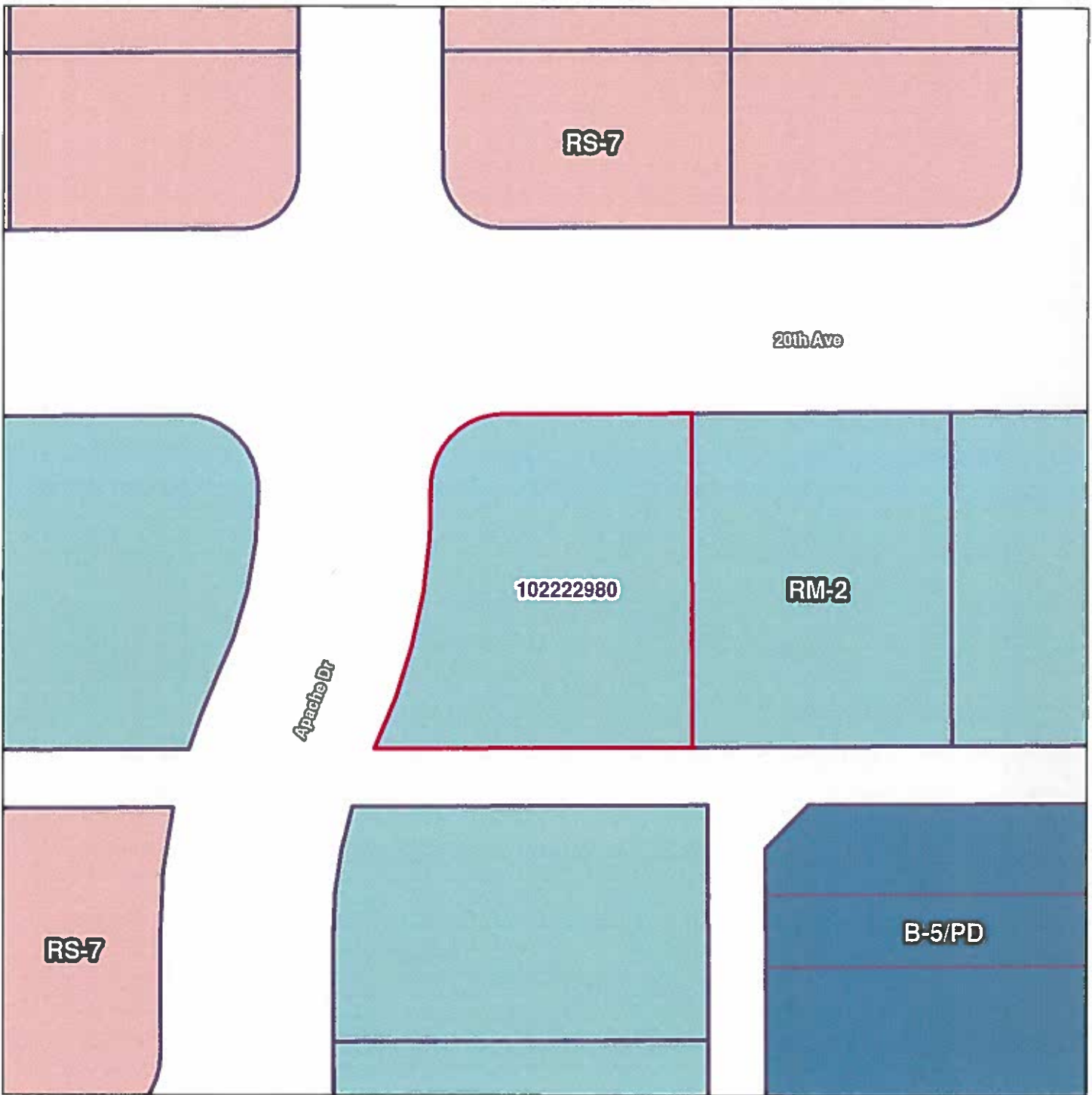
### X. ADDITIONAL DOCUMENTATION

Is the health care institution required to comply with physical plant codes and standards incorporated by reference in A.A.C. R9-1-412?

☐ YES ☐ NO

If yes, provide documentation of the health care institution's architectural plans and specifications approval in R9-10-104. If no, provide one of the following:

- Documentation from the local jurisdiction of compliance with local building codes and zoning ordinances; or
- If documentation from the local jurisdiction is not available, documentation of the unavailability of the local jurisdiction compliance and documentation of a general contractor's inspection of the facility that states the facility is safe for occupancy as the applicable health care institution class or subclass; and
- The licensed capacity requested by the applicant for the health care institution: \_\_\_\_\_
- If applicable, the licensed occupancy requested by applicant: \_\_\_\_\_
- A site plan showing each facility, the property lines of the health care institution, each street and walkway adjacent to the health care institution, parking for the health care institution, fencing and each gate on the health care institution premises, and if applicable, each swimming pool on the health care institution premises; and
- A floor plan showing, for each story of a facility, the room layout, room usage, each door and each window, plumbing fixtures, each exit, and the location of each fire protection device.



## City of Apache Junction CUP-1-17 Zoning Map

### **LEGEND**

- Subject Site
- Parcel

### **Zoning**

- B-5/PD
- RM-2
- RS-7

**DISCLAIMER:** This exhibit was produced without benefit of a field survey and is not intended to represent a survey document of any kind. Distances shown hereon are approximate. Parcel lines shown hereon were provided by Pinal County and may not reflect the exact position or alignment of parcel lines, roadway center lines, or easement lines.



May 02, 2017

0 10 20 30 40 50 100 Feet

Created By Joseph Klorer, GIS Specialist



## City of Apache Junction CUP-1-17 Aerial Map

### LEGEND

- Subject Site
- Parcel

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April 17, 2017

0 10 20 30 40 50 100 Feet



Created By: Joseph Kliner, GIS Specialist

SEC. 29, PT-SE, SE  
TN.1N RG.8E

Subject Site

102-22  
3/4

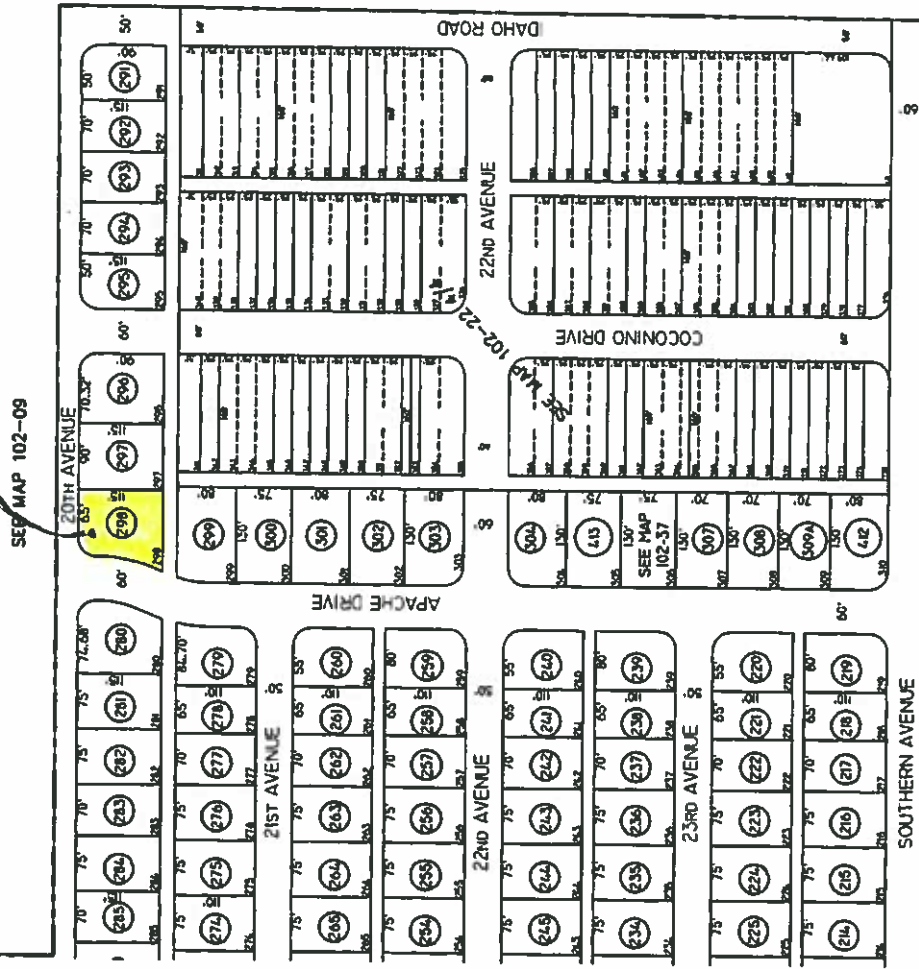
SUPERSTITION VILLA  
BK.12 - PG.39

THE ORIGINAL PLAT OF THIS SUBDIVISION IS  
ON FILE WITH THE PINAL COUNTY RECORDERS  
OFFICE. FOR COMPLETE INFORMATION OF PLAT  
AND COME'S CALL (520) 868-7100.

THIS MAP IS FOR TAX PURPOSES ONLY.  
THIS OFFICE WILL NOT ASSUME LIABILITY FOR  
REPRESENTATIONAL MEASUREMENTS OR ADJUSTMENT.

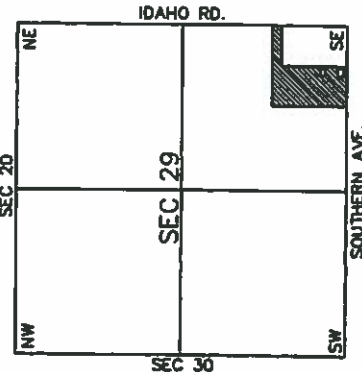


SCALE: 1" = 150'  
08-26-2002



SEE MAP 102-22 2/4

VICINITY MAP



SEE MAP 102-05

SEE MAP 102-46

SEE MAP 102-01

PINAL COUNTY ASSESSORS MAP

PLANNING AND ZONING COMMISSION  
RESOLUTION NO. 97-04

A RESOLUTION OF THE PLANNING AND ZONING COMMISSION OF THE CITY OF APACHE JUNCTION, ARIZONA, APPROVING A CONDITIONAL USE PERMIT, CASE NO. CUP-96-05, TO ALLOW THE ESTABLISHMENT OF AN ADULT CARE HOME, OWNER OCCUPIED/OPERATED AND LICENSED BY THE ARIZONA DEPARTMENT OF HEALTH SERVICES FOR OCCUPANCY OF A MAXIMUM OF TEN RESIDENTS AT THE SOUTHEAST CORNER OF WEST 20TH AVENUE AND SOUTH APACHE DRIVE.

WHEREAS, said Conditional Use Permit for the Adult Care Home shall be site specific for the property located at 201 West 20th Avenue, which is legally described as follows:

Superstition Villa Subdivision, Lot 298, according to the plat of records in the Office of the County Recorder of Pinal County, Arizona, recorded in Book 12 of Maps, Page 39 and re-dedicated in Docket 430, Page 600; AND

WHEREAS, it has been acknowledged that the Adult Care Home is in the best interest of the community's needs; AND

WHEREAS, it has been acknowledged that the facility shall be operated by Brenda J. Bowman and Marc G. Helms; AND

WHEREAS, satisfactory evidence has been received to indicate that the facility would be compatible with other uses in the CR-5 zoning district; AND

WHEREAS, it is understood that the Conditional Use Permit may be revoked by the Zoning Administrator upon a finding that there has been material noncompliance with any condition prescribed in conjunction with the granting of this Conditional Use Permit.

NOW, THEREFORE, BE IT RESOLVED by the Planning and Zoning Commission of the City of Apache Junction, Arizona, that a Conditional Use Permit be approved to allow the applicants in this Conditional Use Permit application, or their successors, to operate an Adult Care Home for occupancy by a maximum of ten (10) residents and shall maintain all appropriate licensing as required by the Arizona Department of Health Services, as described in Case Number CUP-96-05, pursuant to Section 15.0600 of the Apache Junction, Arizona, Zoning Ordinance, subject to the following conditions:

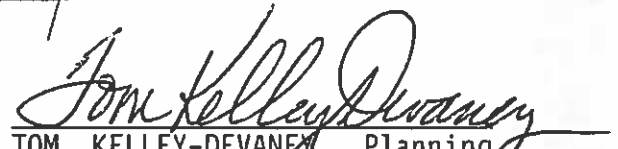
- 1) This Conditional Use Permit shall expire four (4) years from the date of approval. An application for renewal of the conditional use permit must be received by the Development Services Department on or before September 24, 2000.

- 2) A revised site plan shall be submitted indicating the location of the on-site parking spaces and relocation of the dumpster to the rear of the property.
- 3) A landscaping plan shall be submitted for review. A certificate of occupancy shall not be issued prior to the installation and inspection of landscaping for the parcel, in accordance with a landscaping plan approved by the Development Services Department.
- 4) A conditional use permit is subject to review and possible revocation at any time during the life of the use permit should violations of the use permit occur or other significant changes in the activity effect the neighboring community.

PASSED AND ADOPTED BY THE PLANNING AND ZONING COMMISSION OF THE CITY OF APACHE JUNCTION, ARIZONA, THIS 24TH DAY OF SEPTEMBER, 1996.

THIS PLANNING AND ZONING COMMISSION RESOLUTION SHALL BECOME EFFECTIVE ON OCTOBER 24, 1996.

SIGNED AND ATTESTED TO THIS 28<sup>th</sup> DAY OF JANUARY, 1997.

  
TOM KELLEY-DEVANEY, Planning  
and Zoning Commission Chairman

ATTEST:

  
Executive Secretary

APPROVED AS TO FORM:

  
GLENN J. GIMBUT  
City Attorney

PLANNING AND ZONING COMMISSION  
RESOLUTION NO. CUP-1-09

A RESOLUTION OF THE PLANNING AND ZONING COMMISSION OF THE CITY OF APACHE JUNCTION, ARIZONA, APPROVING A CONDITIONAL USE PERMIT, CASE NO. CUP-1-09, TO ALLOW AN ADULT CARE HOME TO BE LOCATED AT 201 WEST 20<sup>TH</sup> AVENUE, APACHE JUNCTION, ARIZONA.

WHEREAS, a Conditional Use Permit ("CUP") application was filed by Bruce Bogucki on March 26, 2009, pursuant to Apache Junction City Code, Volume II, Land Development Code, Chapter 1, Zoning Ordinance, Article 15, Residential Districts, Section 15.0604, Uses Subject to a Conditional Use Permit in the CR-5 Multiple Family Residence Zone, for the use of a residential health care facility doing business on the following legally described property:

Superstition Villa Lot 298; APN# 102-22-298; and

WHEREAS, the existing four-plex has been established on the subject parcel since 1983 and is recognized by the City of Apache Junction as a lawful conforming use in the Multiple-Family Residence Zone (CR-5); and

WHEREAS, a CUP (CUP-5-96) was approved in 1996 for the same type of business, but expired in 2000 and was never renewed thereafter in accordance with the conditions of CUP-5-96; and

WHEREAS, on March 26, 2009, the Applicant submitted a CUP application in order to obtain City Zoning approval in order to continue the business; and

WHEREAS, the Applicant has satisfied the burden of proof of the above mentioned factors, and those set forth in the Apache Junction City Code, Volume II, Land Development Code, Chapter 1, Zoning Ordinance, Article 6, General Provisions and Exceptions, Section 6.0101, Conditional Use Permits.

NOW, THEREFORE, BE IT RESOLVED by the Planning and Zoning Commission of the City of Apache Junction, Arizona, that a CUP is hereby approved, subject to the following conditions of approval:

1. This CUP is for an Adult Care Home use only. Any other proposed use will cause expiration of this CUP.
2. The number of clients shall not exceed ten (10) at any time.
3. The applicant shall install the landscape improvements in accordance with the submitted landscape plan within thirty (30) days of approval of this CUP.
4. The existing wood fence may remain as long as it is maintained in new condition. If the applicant chooses to replace the wood fence with a new wood fence, he may do so as long as it is also continually maintained in new condition.
5. The Planning and Zoning Commission has the authority to review and revoke the CUP at any time during its life ~~any time the conditions of approval have been violated~~ or have not been complied with.
6. The site, as indicated by the site plan, shall accommodate seven (7) parking spaces since the clients do not drive.

PASSED AND ADOPTED BY THE PLANNING AND ZONING COMMISSION OF THE CITY OF APACHE JUNCTION, ARIZONA, THIS 28<sup>TH</sup> DAY OF APRIL, 2009.

SIGNED AND ATTESTED TO THIS 28th DAY OF April, 2009.




GAIL EVANS, Chair  
Planning and Zoning Commission

ATTEST:



FRED BAKER  
Planning Manager

APPROVED AS TO FORM:

 4.30.09  
\_\_\_\_\_  
RICHARD J. STERN  
City Attorney

CUP-1-09

CENTER LINE OF ROAD

CUP-40-43  
NORTH

30'

STOP & STREET SIGN

81'

EXISTING 3' WIDE SIDE WALK

SUBDIV

11 1/2'

PROPOSED CHAIN LINK FENCE

115.0

TREE

PROPOSED RED WOOD FENCE

RECEIVED

PLANNING

SCALE 1" = 16 FEET

CENTER OF ROAD

CHAIN LINK GATE

SPACE #1

SPACE #2

SPACE #3

SPACE #4

SPACE #5

REDWOOD GATE

EXISTING PARKING

SPACE #6

SPACE #7

SPACE #8

WATER METER

POWER POLE

CENTER OF ALLEY 250 DUMPER

TELEPHONE BOX

SITE MAP

REVISED 9-18-96

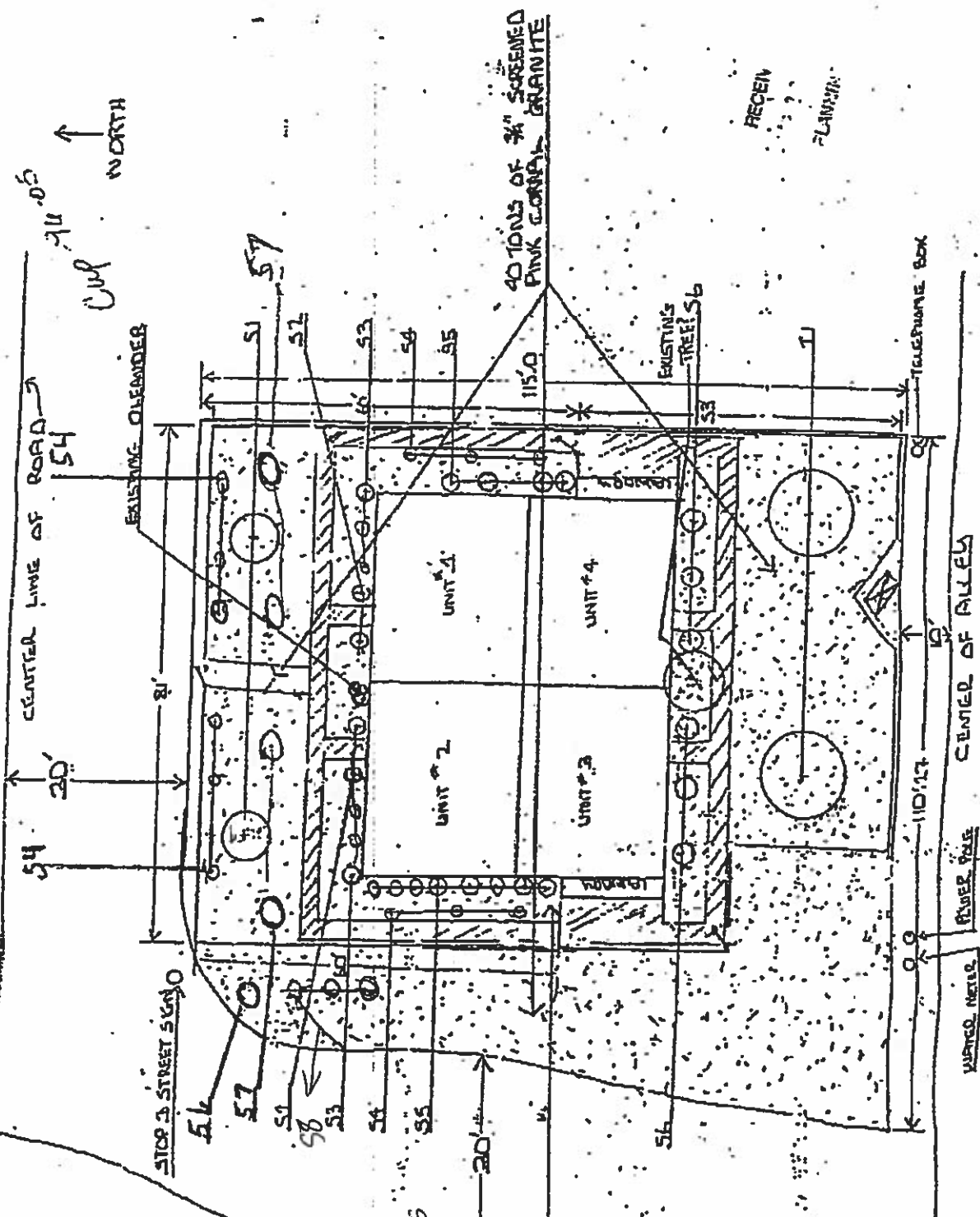
SEP 23 PM 1:14

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CUP-1-09

PLANT MATERIAL SCHEDULE	
PLANT	QUANTITY
1 PIRANTEX PASH	15 GAL
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
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98	98
99	99
100	100

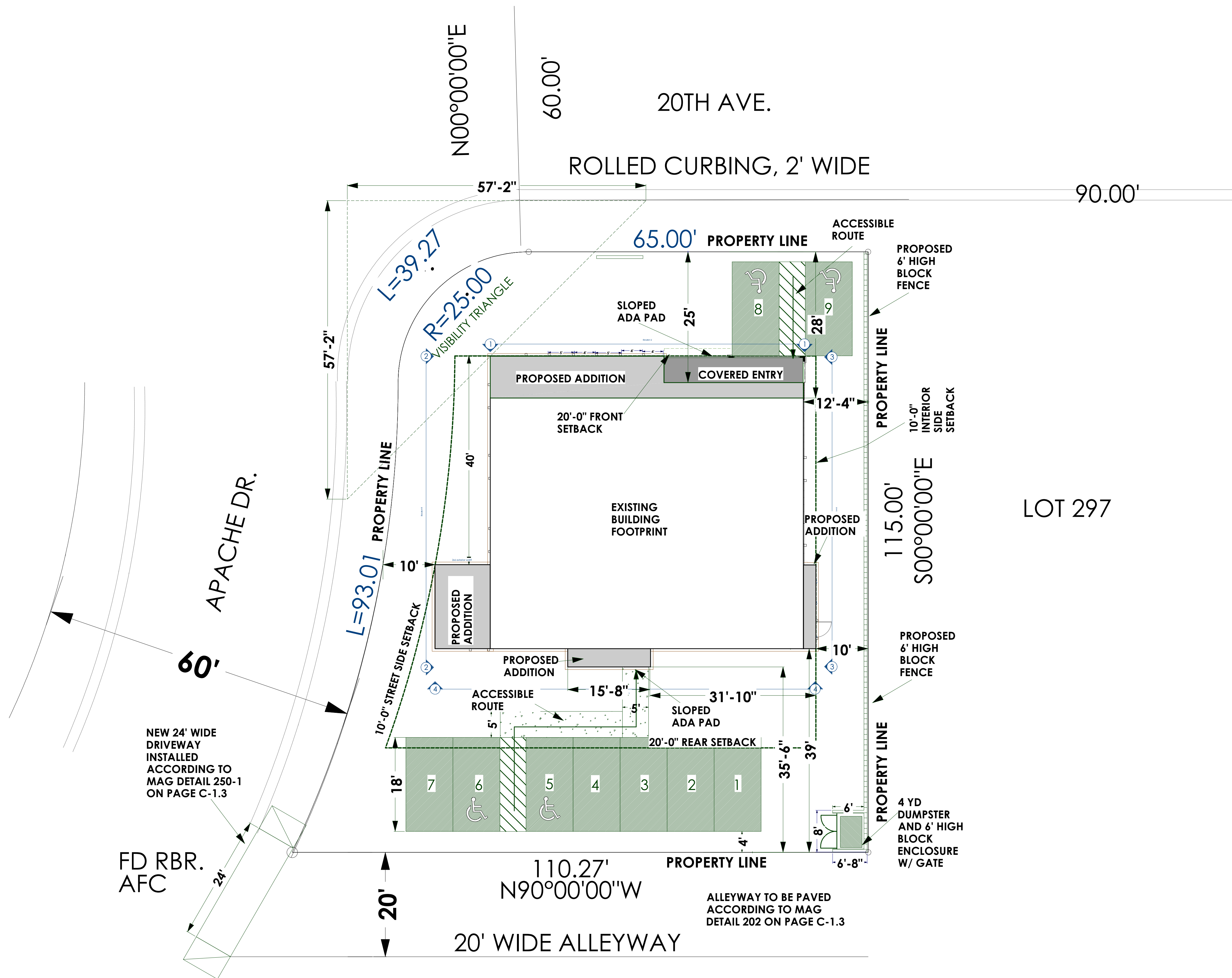
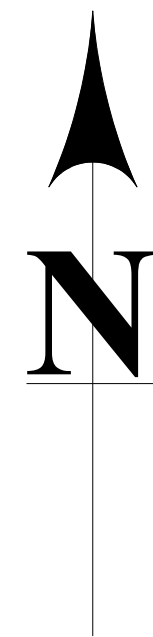


SCALE 1" = 16 FEET

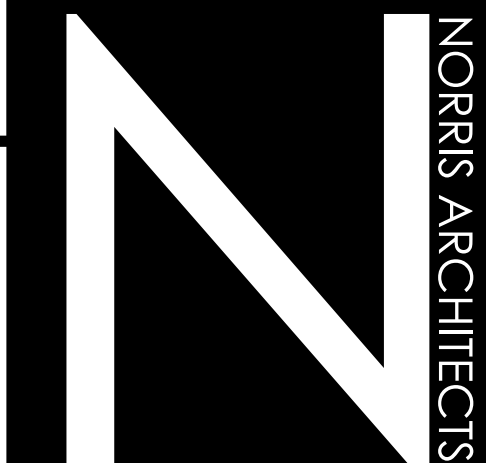
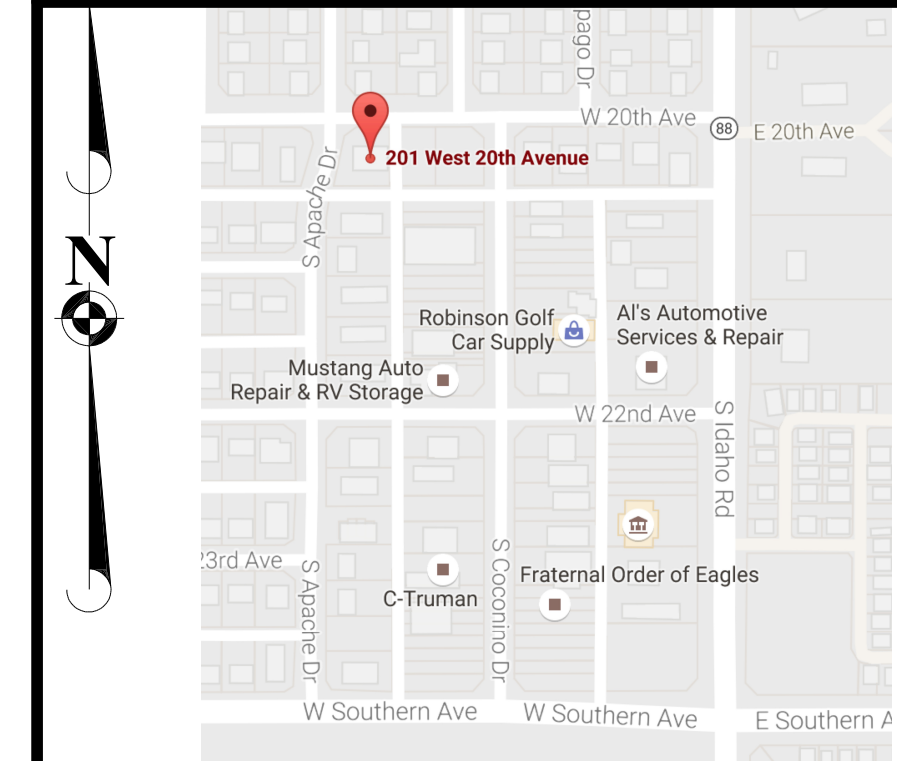
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RECEIVED



## VICINITY MAP



**NORRIS ARCHITECTS**  
6835 E Camelback Rd B-12  
Scottsdale, AZ 85251  
480-734-7711  
Tom@NorrisArchitects.com

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## SITE DATA

**ZONING:** RM-2 MULTIFAMILY

**EXISTING FOOTPRINT:** 2,876 SQ. FT.  
**ADDITION:** 607 SQ. FT.  
**NEW COVERED ENTRY:** 135 SQ. FT.  
**NEW TOTAL FOOTPRINT:** 3,618 SQ. FT.

**LOT SIZE:** 10,809 SQ. FT.  
**LOT COVERAGE:** 33.4%

**NOTE:** NO EXISTING PARKING  
**PROPOSED PARKING:**  
4 ACCESSIBLE SPACES  
5 NON-ACCESSIBLE SPACES  
9 TOTAL PARKING SPACES

**NOTE:** ALL PARKING SPACES TO BE PAVED

**OWNER:**  
KOPPER CREST ESTATES LLC  
JOE KOPP  
745 N GILBERT RD STE 124  
GILBERT, AZ 85234  
480-322-2983  
joekoppjr@gmail.com

**PROJECT ADDRESS:**  
201 W 20th Ave  
Apache Junction, AZ 85210

**PROJECT APN:**  
102-22-2980

**PROJECT LEGAL:**  
SUPERSTITION VILLA LOT 298

**PROJECT NAME:**  
KOPPER CREST ESTATES  
ASSISTED LIVING CENTER

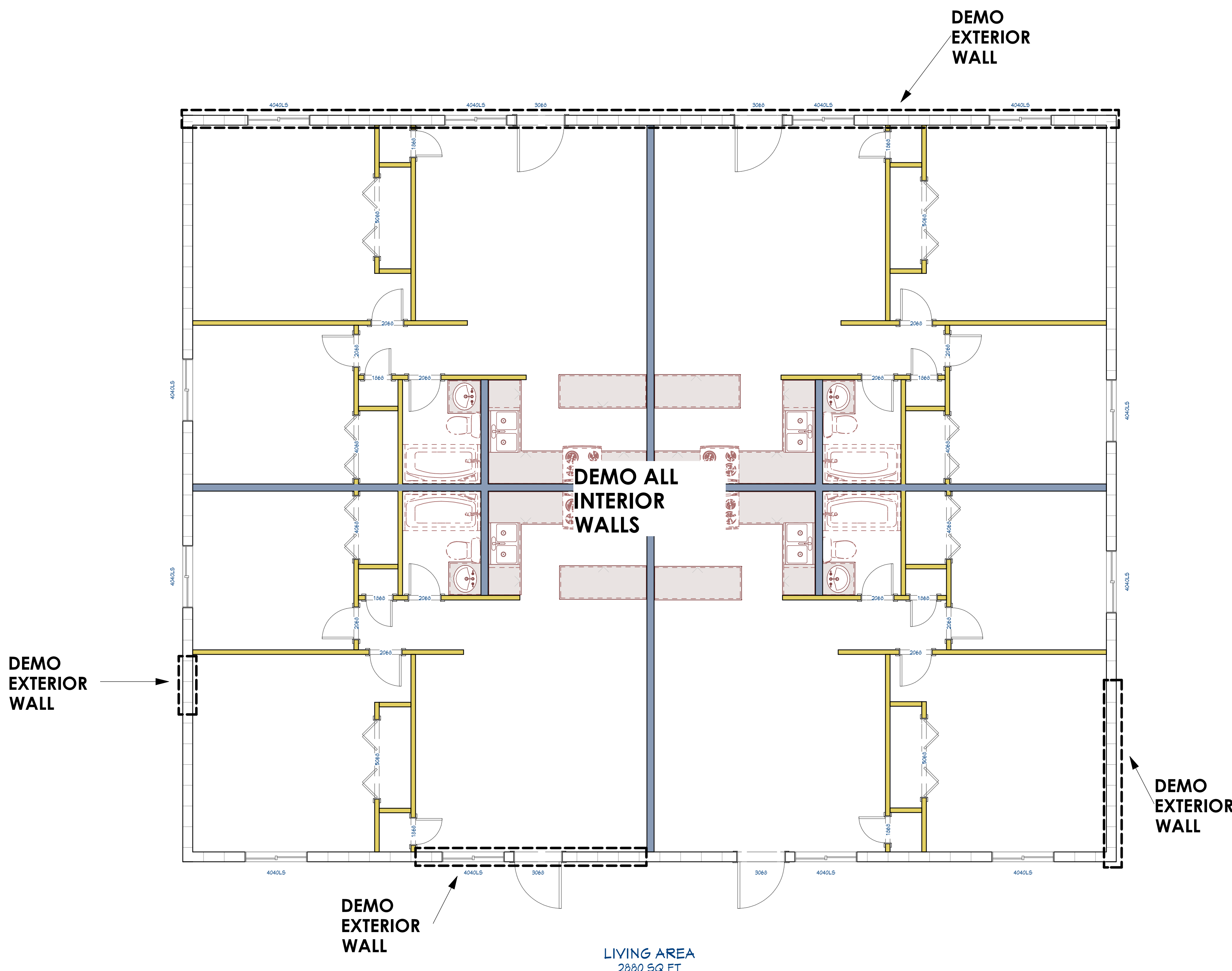
**ARCHITECTURAL SEAL**



**DATE:** 3.29.17

## SITE PLAN

SCALE 1"=10'



# AS BUILT/DEMO PLAN

SCALE 1/4" = 1'-0"



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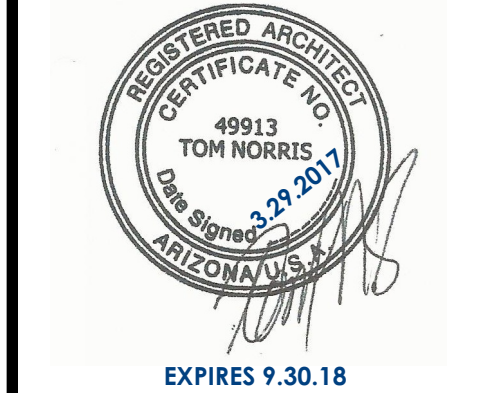
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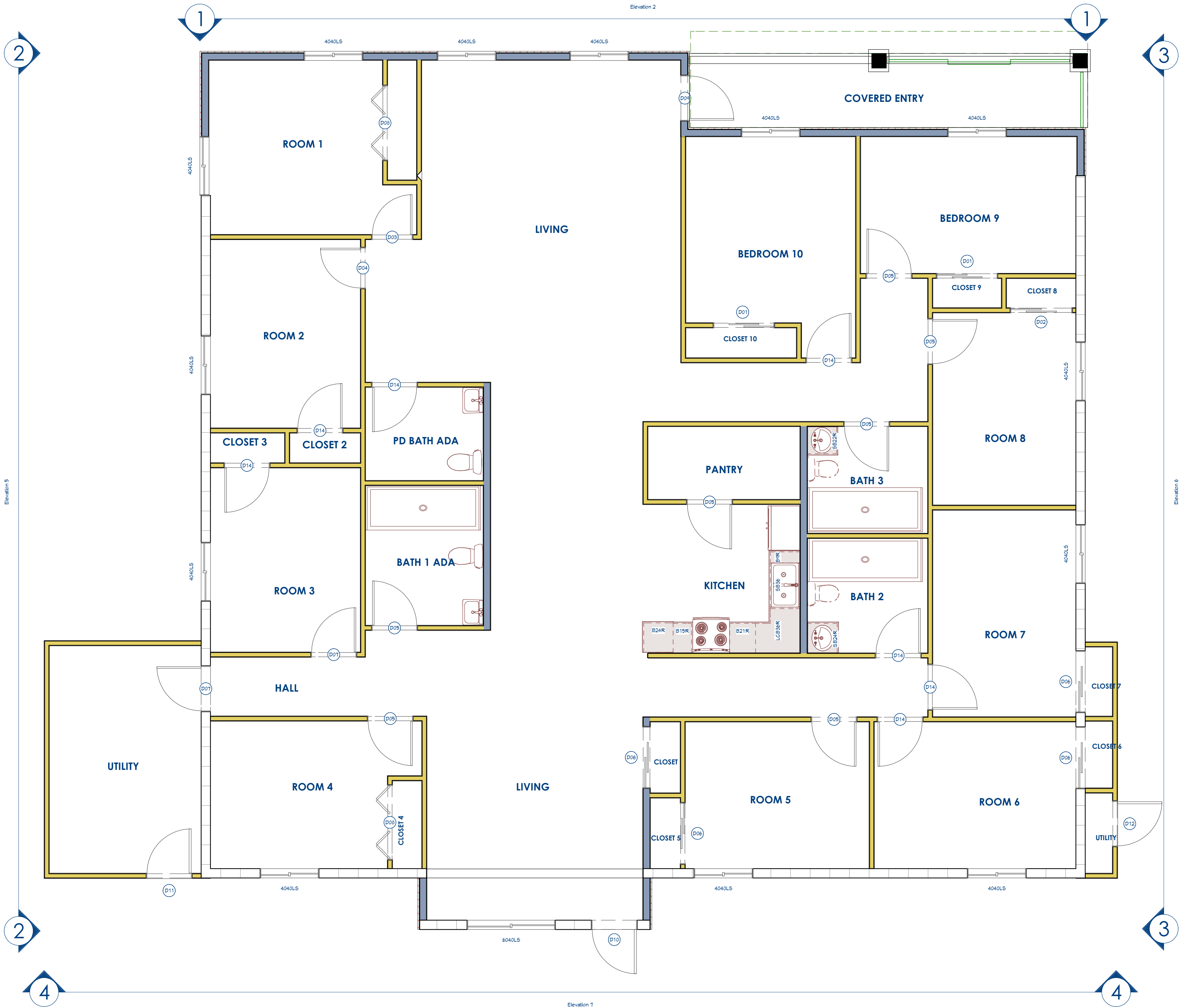
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ASSISTED LIVING CENTER

ARCHITECTURAL SEAL



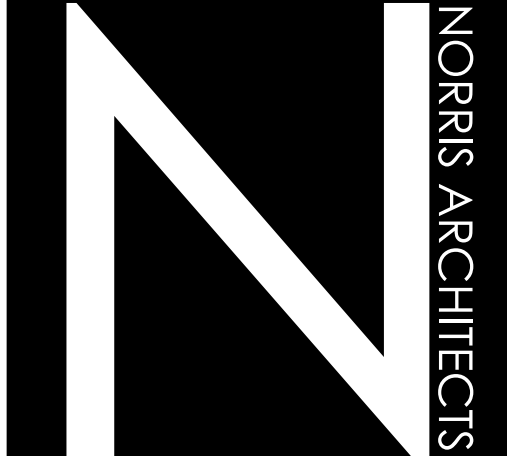
DATE: 3.29.17

DOOR SCHEDULE										
NUMBER	LABEL	QTY	SIZE	WIDTH	HEIGHT	DESCRIPTION	HANDLE, EXTERIOR	HANDLE, INTERIOR	TEMPERED	COMMENTS
D01	4168	2	4168 R IN	48 9/16"	80"	SLIDER-DOOR P04				
D02	4168	1	4168 R IN	49 5/16"	80"	SLIDER-DOOR P04				
D03	2868	1	2868 R IN	32 1/4"	80"	HINGED-SLAB	HANDLE: LEVER	HANDLE: LEVER		
D04	2868	1	2868 R IN	32 3/8"	80"	HINGED-SLAB	HANDLE: LEVER	HANDLE: LEVER		
D05	3068	7	3068 L IN	36"	80"	HINGED-SLAB	HANDLE: LEVER	HANDLE: LEVER		
D06	4168	4	4168 R IN	49"	80"	SLIDER-DOOR P04				
D07	3068	2	3068 R IN	36"	80"	HINGED-SLAB	HANDLE: KNOB	HANDLE: KNOB		
D08	5068	2	5068 L/R	60"	80"	4 DR. BIFOLD-SLAB	HANDLE: PULL HANDLE (2)			
D09	3068	1	3068 R EX	36"	80"	EXT. HINGED-GLASS	HANDLE: LEVER	HANDLE: KNOB		
D10	3068	1	3068 L EX	36"	80"	EXT. HINGED-SLAB	HANDLE: LEVER	HANDLE: KNOB		
D11	3068	1	3068 R EX	36"	80"	EXT. HINGED-SLAB	HANDLE: LEVER	HANDLE: KNOB		
D12	3068	1	3068 L EX	36"	80"	EXT. HINGED-SLAB	HANDLE: LEVER	HANDLE: LEVER		
D14	3068	7	3068 R IN	36"	80"	HINGED-SLAB	HANDLE: LEVER	HANDLE: LEVER		



FLOOR PLAN WITH NOTES

SCALE 1/4" = 1'-0"



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PROJECT APN:  
102-22-2980

PROJECT LEGAL:  
SUPERSTITION VILLA LOT 298

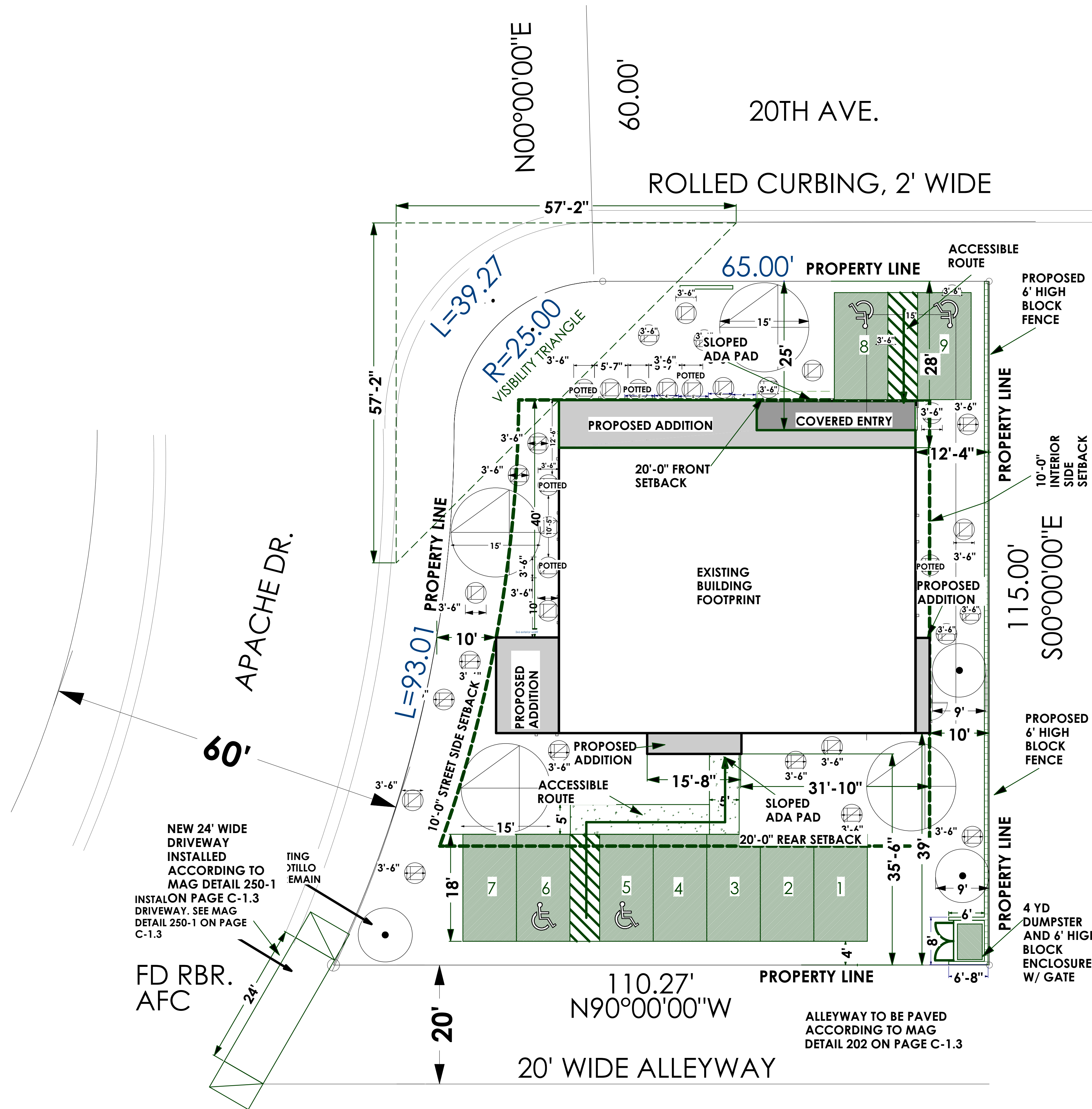
PROJECT NAME:  
KOPPER CREST ESTATES  
ASSISTED LIVING CENTER

ARCHITECTURAL SEAL



DATE: 3.29.17

PAGE: A-2.1



LANDSCAPE LEGEND

	AGAVE TEQUILANA - 5 GALLON	QTY - 30 PLANTED, 4 POTTED
	WILSON OLIVE (FRUITLESS OLIVE) - 15 GAL.	QTY. - 5 PLANTED
	OCOTILLO (5 GALLON)	QTY. - 1 PROPOSED, 1 EXISTING

HARDSCAPE LEGEND

	JAXTON PATIO STONE
--	--------------------

NOTE: PLANTS ARE SHOWN AT ESTIMATED MATURE SIZE

SITE DATA

ZONING: RM-2 MULTIFAMILY

EXISTING FOOTPRINT 2,876 SQ FT.  
ADDITION: 607 SQ FT.  
NEW COVERED ENTRY: 135 SQ FT.  
NEW TOTAL FOOTPRINT: 3,618 SQ FT

LOT SIZE: 10,809 SQ FT.  
LOT COVERAGE: 33.4%

NOTES:

PLANTS IN THE VISIBILITY TRIANGLE SHALL NOT TO BE TALLER THAN 3 FEET.

ALL LANDSCAPING SHALL BE SERVICED WITH A PERMANENT UNDERGROUND AUTOMATED IRRIGATION SYSTEM DESIGNED IN COMPLIANCE WITH THE "MINIMUM STANDARDS FOR LANDSCAPE IRRIGATION" BY THE ARIZONA CHAPTER, AMERICAN SOCIETY OF IRRIGATION CONSULTANTS, WHICH IS ON FILE WITH THE DIRECTOR OR DESIGNEE.

REMOVE ANY PRIVATE ENCROACHMENTS LOCATED IN THE PUBLIC RIGHT-OF-WAY.

NO PROPOSED UTILITY CONNECTIONS AS UTILITIES ARE ALREADY CONNECTED TO SITE.

1/2 MINUS GROUND COVER TO BE PROVIDED ON SITE

PROJECT NAME:

KOPPER CREST ESTATES ASSISTED LIVING CENTER

ARCHITECTURAL SEAL

DATE: 3.29.17

NEW LANDSCAPE PLAN

SCALE 1"=10'

PAGE:

C-1.2

NORRIS ARCHITECTS

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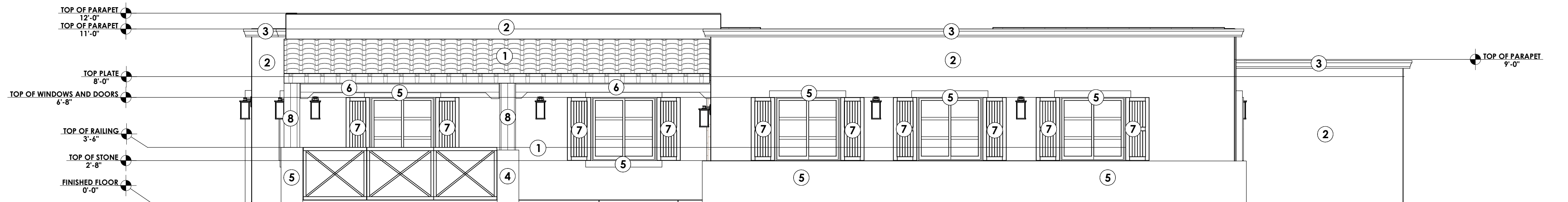
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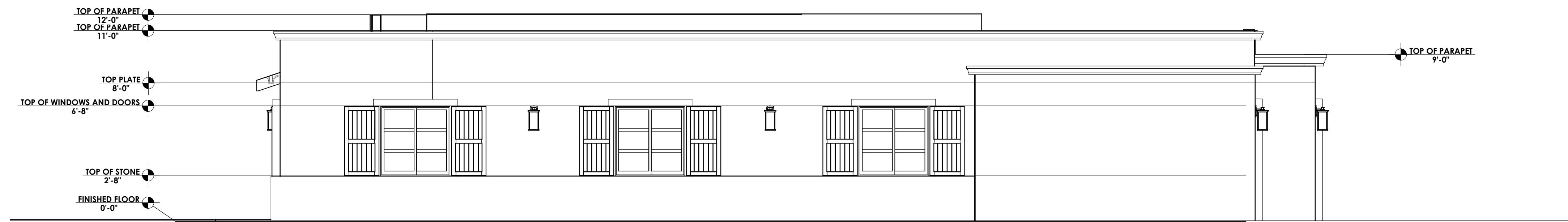
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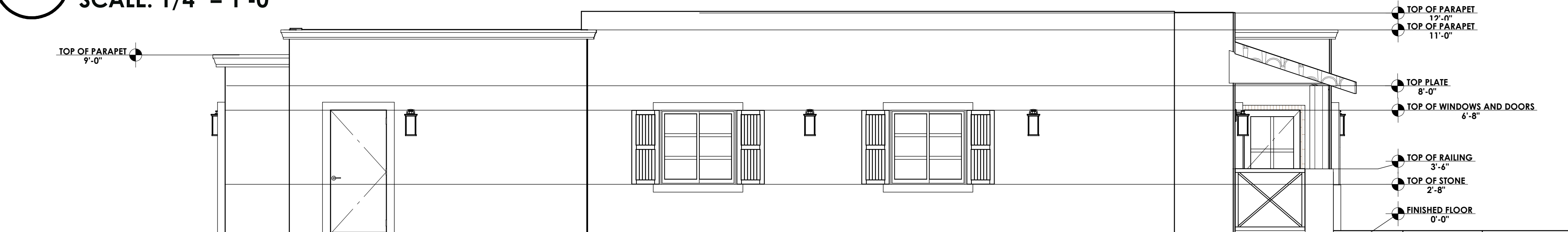
SUPERSTITION VILLA LOT 298



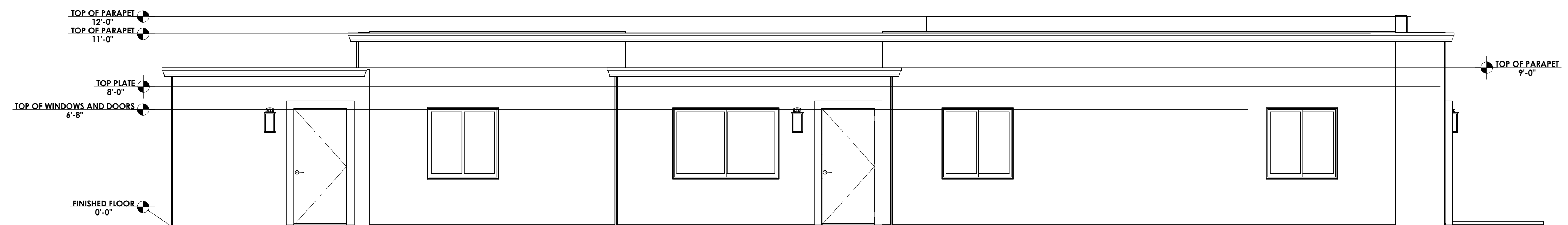
**1** FRONT ELEVATION  
SCALE: 1/4" = 1'-0"



**2** LEFT ELEVATION  
SCALE: 1/4" = 1'-0"



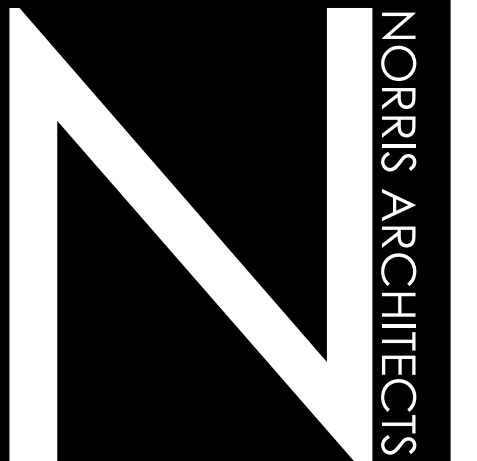
**3** RIGHT ELEVATION  
SCALE: 1/4" = 1'-0"



**4** REAR ELEVATION  
SCALE: 1/4" = 1'-0"

## MATERIALS LEGEND

1. BORAL ROOFING - MISSION S CHARCOAL BROWN BLEND
2. STO STUCCO - PAINTED SW7030 - ANEW GRAY
3. STO STUCCO - PAINTED SW7504 - KEYSTONE GRAY
4. PLY GEM STONE CUT COBBLESTONE 10-SQ FT EASTON FAUX STONE VENEER
5. JAXTON PAVERS, CUT IN HALF (LONGWAY) TO FORM WINDOW AND DOOR CASING
6. WOOD FAUX BEAMS - FINISHED WITH MINWAX JACOBAN
7. SEVERE WEATHER FAUX SHUTTERS PRE-FINISHED IN BROWN
8. DURABUILT TRADITIONAL ALMOND VINYL SIDING PANEL POSITIONED VERTICALLY ON COLUMNS



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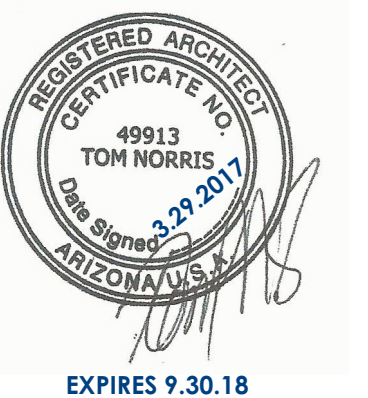
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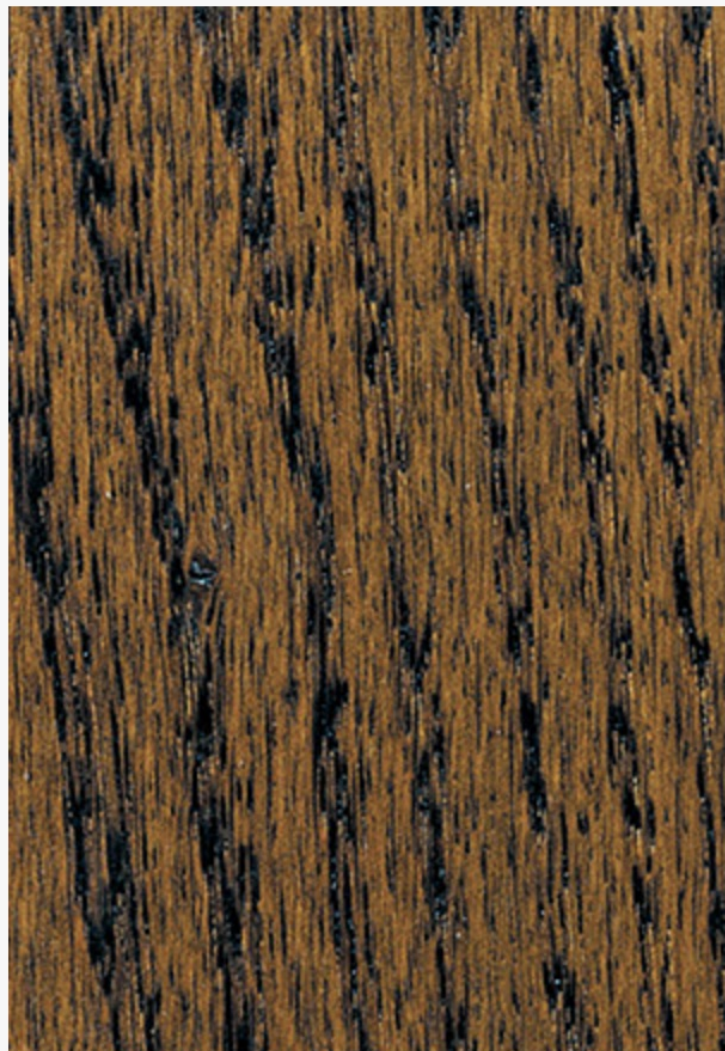










ARCHITECTURAL SEAL



DATE: 3.29.17

# ELEVATIONS

SCALE: VARIES PAGE: A-3.1

FAUX SHUTTERS	MINWAX JACOBEEAN WOOD STAIN	BORAL ROOFING MATERIAL	PAVERS/WINDOW/DOOR CASING	STONE	<div><div>N</div><div>NORRIS ARCHITECTS</div></div> <div>NORRIS ARCHITECTS 6835 E Camelback Rd B-12 Scottsdale, AZ 85251</div> <div>480-734-7711</div> <div>Tom@NorrisArchitects.com</div> <div>© 2016 Norris Architects. All rights reserved. This design and drawing are protected by the copyright laws of the United States and international treaties. Use, reproduction, copying, or transmission in any form or by any means, without the express written permission of Norris Architects is prohibited and may subject you to civil and criminal liability.</div> <div>OWNER: KOPPER CREST ESTATES LLC JOE KOPP 745 N GILBERT RD STE 124 GILBERT, AZ 85234 480-322-2983 joekoppjr@gmail.com</div> <div>PROJECT ADDRESS: 201 W 20th Ave Apache Junction, AZ 85210</div> <div>PROJECT APN: 102-22-2980</div> <div>PROJECT LEGAL: SUPERSTITION VILLA LOT 298</div> <div>PROJECT NAME: KOPPER CREST ESTATES ASSISTED LIVING CENTER</div> <div>ARCHITECTURAL SEAL</div> <div><div><div>REGISTERED ARCHITECT</div><div>CERTIFICATE NO.</div><div>49913</div><div>TOM NORRIS</div><div>One Signa 3.29.2017</div><div>ARIZONA U.S.A.</div></div><div>EXPIRES 9.30.18</div></div> <div>DATE:3.29.17</div> <div>PAGE: A-2.2</div>
		<div>MISSION S - Charcoal Brown Blend SKU: 1M5C5192</div> <div>Designed to reflect the classic style and distinctiveness of Spanish architecture popular in the earl combinations that create a beautiful, rustic appearance with classic style and the durability of con</div> 	<div>Jaxon Patio Stone (Common: 6-in x 9-in; Actual: 5.8-in x 8.8-in)</div> <div>Item # 460669 Model # 205612</div> <div>★★★★★ (2 Reviews)</div>  	<div>Ply Gem Stone Cut Cobblestone 10-sq ft Easton Faux Stone Veneer</div> <div>Item # 655415 Model # 755110108021B</div> <div>☆☆☆☆☆ No reviews</div>  	
PAINT		PERSPECTIVE RENDERING			
<div>SW 7030 Anew Gray Interior / Exterior Locator Number: 243-C2</div>  <div>EXTERIOR WALLS</div> <div>SW 7504 Keystone Gray Interior / Exterior Locator Number: 243-C4</div>  <div>EXTERIOR PARAPET MOLDING</div>					
SIDING		<div>MATERIALS</div> <div>SCALE 1/4" = 1'-0"</div>			
<div>Durabuilt Traditional Almond Vinyl Siding Panel 9-in x 145-in</div> <div>Item # 591691 Model # 3654008</div> <div>☆☆☆☆☆ No reviews</div>  					

[Print](#)

## Apache Junction, AZ Land Development Code

**§ 1-16-12 CONDITIONAL USE PERMITS, ADMINISTRATIVE USE PERMITS AND BUILDING PERMITS.**

(A) *Authorization and applicability.* It shall be unlawful to erect, construct, reconstruct, alter or change the structure, land and/or use of any property within the city without first obtaining the required building permit, administrative use permit, and/or conditional use permit from the Development Services Department.

(B) *Building permits.* The City of Apache Junction Building Official and the city's adopted building codes establish the requirements and procedures for building permits.

(C) *Administrative use permits.* An Administrative Use Permit ("AUP") may be approved by the Zoning Administrator following review of the application and a finding that the use and/or structure complies with specific standards specified for such use and/or structure in the Zoning Code. Uses and/or structures requiring approval of an AUP, along with permit approval criteria, are identified in Tables 5-1 and 5-3 (see Vol. II, §§ 1-5-1 and 1-5-3).

(D) *Conditional use permits.* Conditional uses are those uses that are generally compatible with the land uses permitted by right in a zoning district, but which require individual Planning and Zoning Commission review and Conditional Use Permit ("CUP") approval of their location, design, operation and configuration along with the imposition of conditions in order to ensure the appropriateness of the use at a particular location. Uses requiring a CUP are identified in Tables 5-1 and 5-3 (see Vol. II, §§ 1-5-1 and 1-5-3). The CUP application and process requirements are as follows:

(1) *CUP application.* An application for a CUP shall be filed with the Development Services Department in accordance with the "City of Apache Junction Conditional Use Permit Application Checklist" available at the Development Services Department.

(2) *CUP public hearing and notice.* The Commission shall hold a public hearing on any proposed CUP or CUP amendment, and provide the following notice. The failure of any person or entity to receive notice shall not constitute grounds for any court to invalidate the actions of the Commission or Council.

(a) *Newspaper publication.* Notice of the time, date and place of the hearing, including a general description of the matter to be considered and a general description of the area affected, shall be published in a newspaper of general circulation that is published or circulated in the community. The publication notice shall be at least 15 calendar days before the hearing, and shall be published as required by A.R.S. § 9-462.04, as amended.

(b) *Property posting.* The notice of public hearing shall be posted by the applicant in accordance with the instructions provided in the application form.

(c) *Mailing notice.* The city shall notice by first class mail each real property owner, as shown on the last assessment of the property, within 300 feet of the property subject to the CUP proposal.

(3) *Findings.* A CUP may be granted upon a finding by the Commission that the use covered by the permit, the manner of its conduct, and any structure involved will not be detrimental to persons residing or working in the area, to adjacent property, to the neighborhood, or to the public welfare in general. The burden of proof for satisfying the aforementioned requirements shall rest with the applicant. In arriving at the above determination, the Commission shall consider but not be limited to the following factors:

- (a) Adequacy of roadways, off-street parking, public facilities and services to accommodate the proposed use;
- (b) Negative impacts arising from the emission of odor, dust, gas, noise, lighting, vibration, smoke, heat or glare;
- (c) Contribution to the deterioration of the neighborhood or the negative impact on neighborhood property values;
- (d) Compatibility with surrounding uses and structures;
- (e) Conformance with the General Plan and city policies;
- (f) Screening and buffering of uses; and
- (g) Unique nature of the property, use and/or development's physical characteristics.

(4) *CUP modification of dimensional zoning standards.* When a proposed development exhibits unique characteristics related to land, topography, architectural style, scale, historical interest or other distinguishing feature that necessitates a measure of regulatory relief, CUP modification of certain dimensional zoning standards may be approved by the Commission in accordance with the findings described above in Vol. II, § 1-16-12(D)(3). The following dimensional zoning standards may be subject to this type of modification:

(a) *Accessory dwelling units.* Accessory dwelling unit size and height standards required in Vol. II, § 1-6-19 of this Chapter may be modified.

(b) *Accessory structures.* Accessory structure size, height, design and setback standards required in Vol. II, § 1-6-5 may be modified.

(c) *Landscaping.* Landscaping size, type, amount and location standards required in Vol. II, Article 1-8 may be modified.

(d) *Signs.* Sign size, type, amount and location standards required in Vol. II, Article 1-11 may be modified.

(5) *Expiration.* CUPs granted by the Commission shall be void if the use is not commenced within 12 months of the approval date or within the time stipulated by the Commission.

(6) *Revocation.* An approved CUP may be revoked by the Commission following public hearing and a finding that there has been material noncompliance with any condition prescribed in the permit and/or the use generates a demonstrated public safety, health or welfare concern.

(7) *Appeal and City Council review.* The approval or denial of a CUP by the Commission shall be final unless, within 20 calendar days from the date of the Commission's decision, the applicant or any persons aggrieved by the decision appeals the decision to the Council. The appeal shall be in writing, filed with the Development Services Department, and shall indicate

how the Commission was in error. The appeal shall be accompanied by a fee equal to 50% of the original filing fee. The appeal shall require a Council public hearing and notification provided in the same manner as required for the Planning and Zoning Commission hearing. The Council, at its public hearing, shall uphold, modify or overrule the decision of the Commission. The decision of the Council shall be final.

(Ord. 1402, passed 5-6-2014)