



REPETITIVE TRACT HOUSING PLOT PLAN GUIDELINE

www.LasVegasNevada.gov/BuildingPermits

Phone: (702) 229-6251

Following the guidelines below will help your application process in a timely and efficient manner. Incomplete and/or incorrect applications will not be processed and returned to applicant with corrections marked for your convenience.

1. Complete an application for each address/building permit being requested
 - Complete all the required fields shown on the example application attached
 - Plot plan drawing:
 - Must be printed on application/plot plan drawing area of form
 - The plan must be drawn to appropriate scale for clarity
 - The building footprint and lot property lines must be distinguishable from other graphics
 - Dimensions of the lot and setbacks must be shown
 - Address, lot and block must be indicated
 - Recorded subdivision name must be indicated
 - Design review stamp if applicable.
2. Include copies of any other documents such a “waiver of park impact fees” to insure proper credit.
3. Application/plot plans are submitted to the Building and Safety via the customer dashboard
 - LasVegasNevada.Gov/Dashboard
 - ePlan submittal instructions: [ePlan Tract Processes on the Dashboard](#)
4. The status of the reviews can be checked on our website at LasVegasNevada.Gov/CheckStatus

REPETITIVE TRACT HOUSING PLOT PLAN REVISIONS

FOR PERMITS THAT HAVE BEEN ISSUED:

- Submit revised application/plot plan to plotplan@lasvegasnevada.gov for approval
 - Indicate on the application that it is a revised plot plan and add the permit number
 - Cloud or circle any changes that have been made

FOR PERMITS THAT HAVE NOT BEEN REVIEWED, BUT APPLICATIONS AND PLOT PLANS HAVE BEEN SUBMITTED:

- Submit request and updated application/plot plan to plotplan@LasVegasNevada.gov



APPLICATION / PLOT PLAN FOR REPETITIVE TRACT PERMITS

PROJECT INFORMATION

Address: 1 Parcel No.: 2
Recorded Subdivision Name: 3
Zoning: 4 Land Use Entitlements (I.E. TMP, FMP, VAR): 5

AP # _____

SETBACKS

MINIMUM SETBACKS: 6 Front to House: _____ Front to Garage: _____
Side Yard: _____ Corner Side Yard: _____ Rear Yard: _____

PROJECT DETAILS

Plan Check #: 7 Lot #: 8 Block: 9 Book: 10 Page: 11
Approval for: ☐ SFD ☐ Patio Cover ☐ Balcony 13 Number of Stories: ☐ One ☐ Two ☐ Three 14 Model Home: ☐ Yes ☐ No

PLOT PLAN DRAWING

15 Code Year: _____

16

- 1 - Address: The address of the lot being permitted
- 2 - Parcel No: The assessor's parcel number for the lot being permitted
- 3 - Recorded Subdivision Name: The subdivision name shown on the recorded final map, **not the marketing name**
- 4 - Zoning: The current zoning classification for the project. If project lies within a PD (Planned Development) then the zoning within that development should be provided
- 5 - Land Use Entitlements: Provide all land use entitlements associated with the project
- 6 - Minimum Setbacks: Provide all setbacks in conformance with the approved zoning
- 7 - Plan Check #: Provide the model plan check # that corresponds to the model being proposed on the lot
- 8 - Lot #: The lot number of the lot being permitted
- 9 - Block #: If applicable, the block number of the lot being permitted
- 10 - Book: The book number of the recorded final map
- 11 - Page: The page number of the recorded final map
- 12 - Check all boxes that apply
- 13 - Select the number of building stories of proposed model
- 14 - Identify if model home or not
- 15 - Enter Code year which the Model is approved under
- 16 - In this blank area on the application please draw the plot plan. The plan must be drawn to appropriate scale for clarity. The building footprint and lot property lines must be distinguishable from other graphics. Dimensions of the lot and setbacks must be shown. Lot number and plan number must be indicated. Design review stamp or letter one a second page must be included if applicable.
- 17 - Complete all fields in the applicant information section

APPLICANT INFORMATION

Contractor/Agent/Owner: _____ Date: _____
State License No.: _____ City License No.: _____
Contact Name: _____ Phone Number: _____
Email Contact: _____

BUILDING DEPARTMENT USE

Received By: _____ Date: _____



AP # _____

APPLICATION / PLOT PLAN FOR REPETITIVE TRACT PERMITS

PROJECT INFORMATION

Address: _____ Parcel No.: _____

Recorded Subdivision Name: _____

Zoning: _____ Land Use Entitlements (I.E. TMP, FMP, VAR): _____

SETBACKS

MINIMUM SETBACKS: Front to House: _____ Front to Garage: _____

Side Yard: _____ Corner Side Yard: _____ Rear Yard: _____

PROJECT DETAILS

Plan Check #: _____ Lot #: _____ Block: _____ Book: _____ Page: _____

Approval for: ☐ SFD ☐ Patio Cover ☐ Balcony Number of Stories: ☐ One ☐ Two ☐ Three Model Home: ☐ Yes ☐ No

PLOT PLAN DRAWING

Code Year: _____

APPLICANT INFORMATION

Contractor/Agent/Owner: _____ Date: _____

State License No.: _____ City License No.: _____

Contact Name: _____ Phone Number: _____

Email Contact: _____

BUILDING DEPARTMENT USE

Received By: _____ Date: _____