



**PLANNING DEPARTMENT**  
**Community Development Agency**

County Administration Center  
810 Court Street • Jackson, CA 95642-2132  
Telephone: (209) 223-6380  
Website: [www.amadorcounty.gov](http://www.amadorcounty.gov)  
E-mail: [planning@amadorcounty.gov](mailto:planning@amadorcounty.gov)

---

**APPLICATION CHECKLIST FOR**  
**MEDICAL HARDSHIP USE PERMIT**

A Public Notice will be mailed after the following information has been completed and submitted in person to the Planning Department Office:

- \_\_\_\_\_ 1. Complete the attached Application.
- \_\_\_\_\_ 2. Attach a letter explaining the need for the Medical Hardship Use Permit.
- \_\_\_\_\_ 3. Attach a Doctor's letter verifying the need for the Medical Hardship Use Permit.
- \_\_\_\_\_ 4. If Applicant is not the property owner, a consent letter must be attached.
- \_\_\_\_\_ 5. Attach a Plot Plan (no larger than 8-1/2" x 11") of the parcel showing the location of the request in relation to property lines, road easements, well, septic and all other structures, etc. (See Plot Plan Guidelines).
- \_\_\_\_\_ 6. Obtain Clearances from the Environmental Health Department (or Water/Sewer Agency), and Building Department.
- \_\_\_\_\_ 7. Sign Medical Hardship Regulations.
- \_\_\_\_\_ 8. \$ Planning Department Fee.



PLANNING DEPARTMENT
Community Development Agency

County Administration Center
810 Court Street • Jackson, CA 95642-2132
Telephone: (209) 223-6380
Website: www.amadorgov.org
E-mail: planning@amadorgov.org

MEDICAL HARDSHIP USE PERMIT APPLICATION

Applicant must provide a letter explaining the need for the medical hardship unit and a letter from the Doctor verifying the need. Clearances from the Environmental Health Department (or public water/sewer provider), Public Works Agency and Building Department must be obtained prior to submitting this Use Permit Application to the Planning Department.

ENVIRONMENTAL HEALTH DEPARTMENT CLEARANCE: (209) 223-6439

CAN CONNECT TO EXISTING SEPTIC
PERMIT #

CANNOT CONNECT TO EXISTING SEPTIC
PERMIT #

Environmental Health Department Representative Signature

Date

PUBLIC SEWER / WATER PROVIDER CLEARANCE:

Public Sewer / Water Provider Representative Signature

Date

BUILDING DEPARTMENT CLEARANCE: (209) 223-6422

Permit Required? NO YES - Permit#

Building Department Representative Signature

Date

PLEASE COMPLETE THE FOLLOWING:

Applicant's Name Phone No. Please Print

Mailing Address Street No./P.O. Box City State Zip Code

Property Location Street No. City State Zip Code

Description and size of Unit (RV, Trailer, Motorhome, Mobile Home)

Assessor Parcel No.

Submit the following with this application: Plot Plan (8-1/2" X 11" size paper) Application Fee
Letter from owner explaining need Letter from Doctor verifying need Signed Medical Hardship Regulations

Applicant's Signature Date

TO BE COMPLETED BY PLANNING DEPARTMENT: Application Contains:

- 1. Application Fee: 2. Plot Plan
3. Letter from owner explaining need 4. Letter from Doctor verifying need
5. Review for compliance with County Code Section 19.48.055 B.1 6. Signed Medical Hardship Regulations

Date Submitted: Received by: (Planning Dept. Rep. Initials)

APPROVED DENIED Date Expires:
Planning Department Representative Signature

CONDITIONS/REASON(S):

The applicant or any interested person may appeal the Planning Director's decision pursuant to Chapter 19.64 (Appeals) of the Amador County Code within 10 days of the decision on this application.

PLANNING COMMISSION ACTION ON APPEAL, IF ANY:

## **PLOT PLAN**

### **Include the Following:**

1. Outline of property with dimensions.
2. Sizes, dimensions and distances from property lines of all structures on property.
3. Proposed location of unit with dimensions.
4. Names of nearest roads and intersection.
5. North arrow and scale.
6. Driveway location.
7. Any other pertinent information.

**19.48.055 Temporary uses--Hardship situations.**

A. The planning commission (or, in medical hardship cases under subsection (B) (1) of this section, the planning director) may permit temporary uses for mobilehomes or recreational vehicles as defined in this title for hardship situations, as defined below in this section, for periods as prescribed below in this section.

B. For the purposes of this section, a "hardship situation" means:

1. A person or family with an existing dwelling on a parcel wants to:
  - a. Have a temporary mobilehome or recreational vehicle to provide accommodations for an immediate family member in need of medical or other constant care for a long-term duration; or
  - b. Have a temporary mobilehome or recreational vehicle to provide accommodations to a caregiver who provides care and assistance for a resident of the existing dwelling on the parcel; or
2. Fire, flood, or other disaster has destroyed or damages a dwelling to the point where it is no longer habitable and the property owner needs a temporary mobilehome or recreational vehicle in which to reside for a period which may be longer than allowed under Section [19.48.080](#) C of this code.

C. Temporary medical hardship uses described in subsections (B) (1) (a) and (b) of this section for mobilehomes or recreational vehicles may be granted by the planning director without public hearing for two-year periods and renewed from time to time for two-year periods provided that in all such cases proof of a medical need satisfactory to the county is submitted and reestablished with each renewal application. Each such initial or renewal application shall be made and public notice of such application shall be given in the manner described in Chapter [19.56](#), use permits. Such notice shall indicate the intent of the planning director to grant or renew the temporary use permit without a hearing unless sufficient reasons are provided not to renew the use permit. A description of the appeals process (Chapter [19.64](#)) shall be contained within the notice. The planning director shall decide upon the use permit renewal application within ten days after the notice is mailed. Approved use permits shall become valid following the ten-day appeal period if no appeals are filed.

D. Initial temporary disaster relief hardship use permits described in subsection (B)(2) of this section for mobile homes or recreational vehicles may be granted by the planning director for a two-year period without public hearing if the planning director finds sufficient cause to approve the application; provided, however, that the application shall be made and public notice of such application shall be given in the manner described in Chapter [19.56](#), use permits. Such notice shall indicate the intent of the planning director to grant the temporary use permit without a hearing unless sufficient reasons are provided not to grant the use permit. A description of the appeals process (Chapter [19.64](#)) shall be contained within the notice. The planning director shall decide upon the use permit application within ten days after the notice is mailed. Approved use permits shall become valid following the ten-day appeal period if no appeals are filed. Requests for renewal of such use permits shall be made to the planning commission, which may renew the permit for an additional one-year period upon a showing of good cause. No more than one renewal shall be allowed. (Ord. 1408 §2, 1996; Ord. 1149 §3, 1987).

Signature \_\_\_\_\_ Date \_\_\_\_\_