

Project Title: _____

- | | | |
|--|--|---|
| ☐ Comp Plan Amendment (\$1,160) | ☐ Conditional Use Permit (\$750) | ☐ Temporary Use Permit |
| ☐ Zone Text Amendment (\$1,120) | ☐ Preliminary Plat (5-Lots or More) (\$1,000) | ☐ Conditional Use Permit (\$750) |
| ☐ Rezone (\$1,000) | ☐ Short Plat (4-Lots or Less) (\$500) | ☐ Minor (Type I) Variance |
| ☐ Vacation/Alteration (\$750) | ☐ Preliminary Site Plan (\$750) | ☐ Major (Type II) Variance |
| ☐ Site Plant Review: | ☐ Lot Line Adjustment (\$250) | ☐ Other |

Minor: Non-Mitigation (\$750)

Major: Requiring Mitigation (\$1,000)

ALL REQUIRED SUPPLEMENTAL INFORMATION MUST BE SUBMITTED ALONG WITH THIS APPLICATION

APPLICANT

LANDOWNER (If Applicable)

Name: _____

Name: _____

Address: _____

Address: _____

City: _____ State: ____ Zip: _____

City: _____ State: ____ Zip: _____

Phone: _____ Fax: _____

Phone: _____ Fax: _____

Email: _____

Email: _____

SURVEYOR (If Applicable)

AGENT (If Applicable)

Name: _____

Name: _____

Address: _____

Address: _____

City: _____ State: ____ Zip: _____

City: _____ State: ____ Zip: _____

Phone: _____ Fax: _____

Phone: _____ Fax: _____

Email: _____

Email: _____

DESCRIPTION OF PROPOSAL: Brief Description of Proposal (Kind of use, # of units/lots, etc.)

Proposed Start Date: _____ Proposed Completion Date: _____

Will this be completed in Phases: ☐ YES ☐ NO

Phasing Schedule: _____

(Phasing plan must be shown on site plan or preliminary plat)

PARCEL INFORMATION

Parcel Number: _____

Parcel Size: _____ (sq ft/acres)

Property Location (Address): _____

Legal Description of Property (*Please provide proof of ownership*):

Zoning District: _____ Comprehensive Plan Designation: _____

Road(s) Serving Property: _____ Road Frontage: _____

Physical Description of the Site (slope, vegetation, etc.): _____

Topographical Features: _____

Natural or Man-made Limitations of the Site: _____

Existing Use: ☐ Residential ☐ Commercial ☐ Industrial ☐ Vacant

Existing Lot Coverage: **Structures** _____ % _____ SqFt. **Other** _____ % _____ SqFt.

Existing Structures: _____

Existing Utilities: ☐ City Water ☐ City Sewer ☐ Natural Gas ☐ Phone ☐ Electricity

☐ Other: _____

Surrounding Land Uses: ☐ Residential ☐ Commercial ☐ Industrial ☐ Vacant

-  All appropriate fees must accompany this application. Fees are non-refundable and subject to change. Please contact the Planning Department for current fee totals.
-  This application must be completed in its entirety for all items applicable to your project.
-  Supplemental information is generally required for land use approval. Ensure that all required information is submitted along with this application.

SIGNATURE

I, the undersigned, swear or affirm under penalty of perjury that the above responses are made truthfully and to the best of my knowledge. I further swear or affirm that I am the owner of record of the area proposed for the previously identified land use action or, if not the owner, attached herewith is written permission from the owner authorizing my action on his behalf.

Landowner/Applicant/Agent _____

Date _____

STAFF USE ONLY

☐ Complete Application _____

☐ Comp Plan Verified _____

☐ Zoning Verified _____

☐ Legal Parcel

☐ Use Allowed

SEPA Required: ☐ Yes ☐ No

Hearing Date: _____

Ownership Verified: ☐ Yes ☐ No