

# MASTER LAND USE FORM

12835 Newcastle Way, Suite 200, Newcastle, WA 98056 www.newcastlewa.gov

## 

**Name of Project:** Click here to enter text.

**Permit numbers for any associated applications (if known)**: Click here to enter text.

**Applicant/Contact Person Information:**

Name: Click here to enter text.

Business/Entity: Click here to enter text.

Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text. Zip: Click here to enter text.

Phone: Click here to enter text. E-mail: Click here to enter text.

**Owner(s) Information:**

Name (s): Click here to enter text.

Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text. Zip: Click here to enter text.

Phone: Click here to enter text. E-mail: Click here to enter text.

**Site Location (Address):** Click here to enter text.

**Site Assessor’s Parcel No(s):** Click here to enter text.

**Applicant’s Statement:** I, Click here to enter text. (name) hereby affirm, under penalty of perjury, that I am the applicant of this proposal and that the property(ies) affected by this application, including any easements, is(are) under my exclusive ownership, or that this application has been submitted with the consent of all owners of the affected property(ies), including any easements.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click here to enter a date.

**Owner or Owner’s Representative Statement:**

I(We) Click here to enter text. (name(s)) hereby affirm, under penalty of perjury, that I(we) am(are) the exclusive owner(s) of the property(ies) affected by this application, including any easements, or that I(we) am(are) the authorized representative(s) of the owner(s) in all matters pertaining to this application.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click here to enter a date.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click here to enter a date.

**Requested Land Use Permits**

Check all land use permits for which you are applying in the boxes provided below, and attach a supplemental application form for each checked application type: (Supplemental Application Forms provided by City)

| **Project Approval Type** | | | | | |
| --- | --- | --- | --- | --- | --- |
| **Type I** | **Type II** | **Type III** | **Type IV** | **Type V** | **Type VI** |
| Temporary use permit   Boundary line adjustment | Preliminary short plat  Final short plat      Binding site plan      Type II home occupation permit      Variance – director approval    Site plan review      Residential condominium binding site plan review     Other (describe) Click here to enter text. | Conditional use permits     Essential public facility permits  Special use permits   Variance – hearing examiner approval      Reasonable use exceptions (private/ public) | Subdivisions – final plats      Subdivisions – preliminary plats    Vacation of recorded subdivisions      Alteration of recorded subdivisions    Site-specific rezone    Preliminary planned unit development     Final planned unit development      Development Agreement | Zoning code amendment (text)      Zoning map amendment    Adoption of the development regulations and amendments     Adoption of the comprehensive plan and amendments     Annexations | Zoning code amendment (text)      Adoption of development regulations and amendments      Amendment to capital facilities element pursuant to NMC [19.17.040](http://www.codepublishing.com/WA/Newcastle/#!/Newcastle19/Newcastle1917.html#19.17.040)(E) |

**Agreement to Pay Fees**

By signing below I, the applicant, understand, acknowledge and agree (a) that the payment of fees and deposits associated with this application does not entitle me to an approved land use permit; (b) that my deposit will be drawn upon by the City to cover the City’s actual costs in processing this application, including the costs of City staff time and resources including, but not limited to, the costs of consultants hired by the City to review my application materials, including consultant studies and inspections, (c) that the deposit may need to be replenished if the City’s actual costs to complete my application exceeds the amount of deposit, and (d) the failure to replenish the deposit as requested by the City may result in delay or inability to process the requested land use permit application, as well as other possible sanctions. I further understand and agree that if the application process is completed and the deposit balance does not cover the final costs, a bill will be sent to me, in which case I will have 30 days to remit payment before the amount is deemed past due and subject to collection procedures, including potential referral to a collection agency:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click here to enter a date.

**Site Information**

**Zoning Designation:** Click here to enter text.

**Parcel/Lot Size**: Click here to enter text. sq.ft. / Click here to enter text. acres

**Access to the site is by:**

Frontage on paved public road

Frontage on unimproved public right-of-way

Frontage on private road.

Private road is  paved unpaved

Number of lots or dwelling unit currently served by private road: Click here to enter text.

Width of private road: Click here to enter text.feet.

Easement across private property.

Width of easement: Click here to enter text.feet.

Number of lots served by the easement: Click here to enter text.

**Existing Structures on the site?**

Yes - Type of structure(s): Click here to enter text.

No

**Existing uses on the site:** Click here to enter text.

**Existing Easements on the site?**

Yes

Type:Click here to enter text.

Location (describe): Click here to enter text.

No

**Critical areas\* on the site?**

Slopes in excess of 40%:  Yes  No  Unknown

Wetlands:  Yes  No  Unknown

Streams:  Yes  No  Unknown

Standing or running water (intermittent or continuous):  Yes  No

\* If the yes box is checked on any of the above, critical area fees apply. If unknown at the time of application, critical area fees may be later assessed if critical areas are suspected or identified.

**Sewer/Water**

The site is currently served by:

Public sewer  Septic  Public water  Well

**Section 2 – Project Description**

Please provide a general description of the project or proposal:

Click here to enter text.

Please describe the current conditions of the site:

Click here to enter text.

What are sizes of proposed improvements (e.g. size of buildings, number of units, number of parking spaces, size of parking areas, total impervious coverage, etc.

Click here to enter text.

Describe/summarize any difficult site parameters that may impact your proposed project or development:

Click here to enter text.

**Section 3 – Questions from the Applicant**

**Please let us know if you have any questions:**

Click here to enter text.