



LAND USE APPLICATION

CONDITIONAL USE PERMIT

COMMUNITY & ECONOMIC DEVELOPMENT

18204 59 Avenue NE • Arlington, WA 98223 • Main Line 360.403.3551

FOR AGENCY USE	Date:	File:	Fee: \$			
PERMIT TYPE						
Type of Conditional Use Permit	<input type="checkbox"/> Binding Site Plan (> 9 Lots) <input type="checkbox"/> Cottage (≥ 50 Units) <input type="checkbox"/> Major Plat Preliminary <input type="checkbox"/> Major Plat Final <input type="checkbox"/> Multi-Family (≥ 50 Units) <input type="checkbox"/> Site Plan Review	Required Submittals (Check All That Apply)	<input type="checkbox"/> Auxiliary Sheet <input type="checkbox"/> Shoreline Substantial <input type="checkbox"/> Design Review – Admin. <input type="checkbox"/> Design Review – Board <input type="checkbox"/> SEPA <input type="checkbox"/> Traffic – City <input type="checkbox"/> Traffic – County <input type="checkbox"/> Traffic – State			
SITE INFORMATION						
Site Address (Use block # if no bldg. #)		Tax Parcel ID Number(s)				
Acreage & Square Footage Of Property		Zoning Classification				
Water Supply	<input type="checkbox"/> Current <input type="checkbox"/> Proposed	Sewer Supply	<input type="checkbox"/> Current <input type="checkbox"/> Proposed			
Existing Use of Property						
On-Site Critical Areas?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Critical Area Type (e.g. wetland, steep slope, etc.)				
Has Site Been Logged in Past 6 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will Site Be Logged as Part of This Project?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
OWNER		APPLICANT		CONTACT		
Name						
Full Address						
Phone Number						
E-mail						
Relationship of Applicant to Property (check one)	<input type="checkbox"/> Owner	<input type="checkbox"/> Contract Purchaser	<input type="checkbox"/> Lessee	<input type="checkbox"/> Other: _____		
PROJECT ARCHITECT		PROJECT ENGINEER		PROJECT SURVEYOR		
Name						
Full Address						
Phone Number						
E-mail						

PRELIMINARY MAJOR PLAT & BINDING SITE PLAN APPLICATION ONLY	
Project / Plat Name	
Total No. of Proposed Lots	
Total Number of Proposed Units	
Will this be a Unit Lot Division?	<input type="checkbox"/> Yes <input type="checkbox"/> No
By Dwelling / Use Type	Single Family
	Two Family
	Multi Family
	Commercial
	Industrial
Has this property been subdivided, or has application for subdivision been made, within the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, Provide Applicant Name & Plat Name	
FINAL MAJOR PLAT APPLICATION ONLY	
Date Preliminary Plat Approved	
Improvements have been:	<input type="checkbox"/> Built <input type="checkbox"/> Bonded <input type="checkbox"/> Some Built, Some Bonded <input type="checkbox"/> Other:
SHORELINE DEVELOPMENT ONLY (Required for all Development Within or Adjacent to a Shoreline)	
Will this Proposal be a Substantial Development as Defined in AMC §20.92.010?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Shoreline Environmental Designation (if yes)	
Are you requesting a Shoreline Variance as allowed under AMC §20.92.130?	<input type="checkbox"/> Yes <input type="checkbox"/> No
FOREST PRACTICE (For Clearing >10,000sf) AND MITIGATION FOR SIGNIFICANT TREE REMOVAL (All Applications)	
Associated Land Use Permit No	
Number of Significant Trees to be Harvested	
Total Acreage to be Harvested	
Is there a Current Development Moratorium on the Site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of Forest Land Conversion	<input type="checkbox"/> Class IV – General <input type="checkbox"/> Class IV – Special _____
Significant Tree Mitigation Options (A, B, or C)	
Will Significant Trees be Removed During any Phase of this Proposed Project?	<input type="checkbox"/> Yes <input type="checkbox"/> No
A) Number of Trees to be Replanted On-Site (3:1 Ratio)	
<u>OR</u> Date Completed	(For Agency Use Only)
B) Number of Trees to be Replanted Off-Site (3:1 Ratio)	Location:
<u>OR</u> Date Completed	(For Agency Use Only)
C) Tree Mitigation In-Lieu Fee	(# of Harvested Trees) _____ X (3) X (Tree Cost) = _____
Date Paid	

APPLICANT CERTIFICATION

I certify that I am the Owner or Owner’s authorized agent. If acting as an authorized agent, I further certify that I am authorized to act as the Owners agent regarding the property at the above referenced address for the purpose of filing applications for permits or review under the Arlington Municipal Code and I have full power and authority to perform on behalf of the Owner all acts required to enable the City to process and review such applications.

I do hereby declare under penalty of perjury under the laws of the state of Washington that I have familiarized myself with the rules and regulations with respect to preparing and filing this application and that the statements and information submitted herewith are in all respects true and correct to the best of my knowledge and belief.

DATED AT _____ , Washington on this date: _____

Applicant’s Signature: _____

REAL PROPERTY OWNER CERTIFICATION

I do hereby declare under penalty of perjury under the laws of the state of Washington that I am the owner of the subject property or an officer/member of the entity owning the subject property, that it is my desire to seek the subject land use permit, and that I will abide by any requirements and conditions that may be part of the approval of this request. I also hereby grant permission for City employees, agents of the City and/or other agency officials to enter the subject property, if necessary, for the purpose of site inspections.

DATED AT _____ , Washington on this date: _____

Owner’s Signature: _____

All other property owners of the subject property must also sign below (attach additional sheets if necessary):

1) Name: _____ Signature: _____

Address: _____ Phone: _____

2) Name: _____ Signature: _____

Address: _____ Phone: _____

3) Name: _____ Signature: _____

Address: _____ Phone: _____

AUXILIARY SHEET

PRELIMINARY MAJOR PLAT

CONDITIONAL USE PERMIT

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Office Hours: Monday – Friday 8AM to 5PM (Closed Holidays)

INSTRUCTIONS

Table I below is a checklist of items that must be submitted as part of your conditional use permit application for a preliminary major plat. Table II below outlines the minimum information that must be provided on your plan sheets. Numbers in parenthesis equal the number of copies required. Please use only paper clips and/or binder clips when assembling documents.

All Boundary and Topographic Surveys must be prepared by—or under the supervision of—a professional land surveyor registered in the State of Washington.

If you have any questions about what is required, or if you would like to schedule a pre-application meeting, please call our department main line listed above.

No appointment is necessary for application submittal but it is highly encouraged.

TABLE I - CHECKLIST

- (1) CD-R with Individual PDFs of Each Item Listed Below ↓
- (1) Vicinity Map (on 8½" X 11")
- (1) Written Narrative (Description of Proposal)
- (1) Public Notice Material

SITE PLANS (see Table II)

- (2) Full Size
- (2) 11" X 17"

LANDSCAPE PLANS (see Table II)

- (2) Full Size
- (2) 11" X 17"

TREE SURVEY, IF REQUIRED (see AMC 20.76.120)

- (2) Full Size
- (2) 11" X 17"

REPORTS

- (2) Traffic Impact Analysis
- (2) Stormwater Drainage Report
- (2) Wetland Study, If Required
- (2) Geotechnical Report, If Required
- (2) SEPA Checklist

UTILITY

- (1) Utility Service Availability Letter – City of Arlington; OR
- (1) Utility Service Availability Letter – City of Marysville



TABLE II –PLAN SHEET REQUIREMENTS

COVER SHEET

- Title Block (centered at top of drawing) that includes the following:
 - City of Arlington
 - Name of Proposed Subdivision
 - File No. (call for correct number)
 - Section, Township, & Range
- Site Information:
 - Site Address (use block # if no bldg. #)
 - Legal Description of Existing Lot
 - Legal Descriptions of Proposed Lots
 - Legal Description of Area of Conveyance
 - Legal Description of Any Area for Dedication
 - Zoning Classification
 - Airport Protection District Subdistrict Avigation Easement (if required)
 - Use Classification
 - Density & Dimensional Calculations
 - Total Number of Proposed Lots
 - Total Number of Proposed Lots per Acre
 - Average Proposed Lot Size
 - Size of Each Lot (both in acreage and square feet)
 - Total Area (acreage and square footage) of Recreational and Open Space, If Provided
 - Proposed Net Density (less open space, roads, dedications, etc.)
 - Recreational & Open Space Calculations (if applicable)
 - Adjacent Street Names & Classifications
 - Required Parking Space Calculations (required & proposed)
 - Screening Types Provided, If Required (indicate for each lot line)
 - Utility Provider (Sewer & Water)
 - Special Districts: School & Fire
 - Critical Area Types Located On-Site (If Applicable)
 - Shoreline Classification (If Applicable)
- Endorsements (see AMC 20.16.370)
- Sheet Index
- Date Plans Were Prepared and/or Revised
- Vicinity Map (Include North Arrow, Scale, and pinpoint site location)
- Name, Address, Phone Number, & Email Address of the Applicant, Owner, & Engineer
Name, Address, Phone Number, Seal, & Signature of the Registered Surveyor

SITE PLAN SHEET

- Title Bar (locate along right edge of sheet) that includes the following:
 - Date Drawing was Prepared or Revised
 - Project Name & Location
 - Name, Address, & Phone Number of Applicant, Owner, Engineer, & Surveyor
- North Arrow, Graphic Scale (1"=50' or larger), & Legend
- Existing Lot Lines Within or Adjacent to the Project Site
- Proposed Lot Dimensions (length, width) and Numbers/Letters for each Lot
- Existing and Proposed Rights-of-Way (include dimensions & street name)
- Existing and Proposed Easements (include dimensions)
- Existing Critical Area Boundaries and Associated Buffers On-Site and Within 150ft. of Site
- Location of Existing Buildings On-Site (include existing and proposed setbacks)
- Site Ingress/Egress (existing and/or proposed)

- Frontage Improvements with Dimensions (if required)
- Location of Existing and Proposed Utility Lines, Sewer Lines, and Water Mains Adjacent to or Within the Proposed Subdivision.
- Building Envelope (for Lots with critical areas and/or unusual shape and topography only)
- Existing Critical Area Boundaries and Associated Buffers On-Site and Within 150ft. of Site
- Location of Recreation and Open Space, If Provided (include perimeter dimensions and square footage)
- Preliminary grading and reclamation plan.
- Preliminary Drainage Plan Showing Existing and Proposed Drainage Facilities for the Site and Adjacent Areas.
- Location of All Private or Community Wells Within the Proposed Subdivision and Within 100 Feet of the Proposed Subdivision.
- Contour Lines at 5 Foot Intervals.

LANDSCAPE PLAN SHEET

- Plant Schedule and Legend Showing Scientific and Common Names for Each Type of Tree, Shrub, and Ground Cover and their Quantity, Planting Size Mature Size, and Symbol.
- Tree, Shrub, and Lawn Planting Details
- Location and Spacing of All Trees, Shrubs, and Plants (including existing trees to be preserved)
- Irrigation Details (if required)
- Parking Area Shading Calculation (see AMC 20.76.130)
- Dimensions for Each Landscape Area, Including Frontage, Lot Boundary, and Vehicle Accommodation Area Landscaping