

LAND USE APPLICATION



CRITICAL AREA EVALUATION COMMUNITY & ECONOMIC DEVELOPMENT

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

SITE INFORMATION			
Project Name			
Site Address <small>(Use block # if no bldg. #)</small>		Tax Parcel ID Number(s)	
Acreage & Square Footage of Property		Zoning Classification	
		Use Classification 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: _____
CRITICAL AREAS			
Are you aware of any environmental documentation that has been prepared related to critical areas that includes the subject area?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any surface waters (including year-round and seasonal streams, saltwater, lakes, ponds, bogs, swamps, marshes)?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there vegetation that is associated with wetlands on the property?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Have any wetlands been identified on the property?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any known areas where the ground is consistently inundated or saturated with water?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any State or Federally listed sensitive, endangered, or threatened species or habitats known on the property?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there slopes of 15% or greater on the property?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any landslide hazard areas?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the property located within a Flood Plain or Flood Way?			<input type="checkbox"/> Yes <input type="checkbox"/> No
IF YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS THEN A CRITICAL AREA STUDY IS REQUIRED			
I grant permission to the City of Arlington to enter the property to determine the presence or absence of critical areas.			
I understand that if the information on this form is later determined to be incorrect, the project or activity may be subject to conditions or denial as necessary to meet the requirements of AMC 20.93, Arlington Critical Areas Ordinance.			
Applicant's Signature: _____			Date: _____