



# City of East Wenatchee

Community Development Department  
271 9<sup>th</sup> Street NE  
East Wenatchee, WA 98802  
Phone 509-884.5396 Fax 509.884-6233

Date Received:	
Received in By:	
Receipt #:	
Check #:	
File #:	

## MASTER LAND DEVELOPMENT PERMIT APPLICATION

In addition to this application form, you must submit all application materials required for the type of permit for which you are applying.

### TYPE OF PERMIT REQUESTED:

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> Major Subdivision            | <input type="checkbox"/> Short Plat            | <input type="checkbox"/> Binding Site Plan            | <input type="checkbox"/> Conditional Use     |
| <input type="checkbox"/> Final Plat                   | <input type="checkbox"/> Final Short Plat      | <input type="checkbox"/> Final Binding Site Plan      | <input type="checkbox"/> Variance            |
| <input type="checkbox"/> Plat Alteration              | <input type="checkbox"/> Short Plat Alteration | <input type="checkbox"/> Binding Site Plan Alteration | <input type="checkbox"/> Planned Development |
| <input type="checkbox"/> Comprehensive Plan Amendment |  | <input type="checkbox"/> Zone change                  | <input type="checkbox"/> Site Development    |

### GENERAL INFORMATION:

Name of Development/Project:
Applicant Name:
Applicant Mailing Address:
Phone Number: _____ Fax: _____ E-Mail: _____
Description of Proposal:

### RELATIONSHIP OF APPLICANT TO PROPERTY

- Owner     Purchaser     Lessee     Other: \_\_\_\_\_

**\*\*Note: A notarized ownership certificate is required for all permit applications.**

**AGENT** (Complete this section if an Agent will be acting on behalf of the Applicant during permit processing.)

Authorized Agent:
Mailing Address:
Phone No: _____ Fax No: _____ E-mail: _____

**\*\*Note: Only the Agent will receive correspondence regarding this application.**

### OTHER PERMITTING INFORMATION:

Are you applying for a consolidated permit review? <input type="checkbox"/> YES <input type="checkbox"/> NO    If yes, what other permits/applications are you submitting at this time? _____ (Consolidated Permit Reviews require all applications to be submitted concurrently.)
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### PROPERTY INFORMATION:

Location of Subject Property (address, etc.):
Legal Description    Lot                      Block                      Subdivision (attach complete legal if more space is needed):
Tax Parcel Number:                      ¼ Sec.:                      Sec.:                      Township.:                      Range:
Size (ac/sq ft):                      Comp. Plan Designation:                      Zone:
Current Use:
Are there Critical Areas on Property?

### PERSONS PROVIDING PROFESSIONAL SERVICES

Surveyor Name and Address: _____
Washington Registration #                      Phone:                      Fax:                      E-mail: _____

Engineer _____			
Name and Address: _____			
Washington Registration # _____	Phone: _____	Fax: _____	E-mail: _____

**IDENTIFY THE PROVIDERS OF THE FOLLOWING UTILITIES/FACILITIES/SERVICES**

Source of Potable Water \_\_\_\_\_ Irrigation District \_\_\_\_\_

Source of Sewage Disposal \_\_\_\_\_

**CERTIFICATION:**

I/We declare that, to the best of my/our knowledge, the information, plans, maps, and other materials I/we submitted in support of this application truly and accurately represent my/our proposed project. Furthermore, I/we acknowledge that:

1. This application shall be subject to all additions to and changes in the laws, regulations and ordinances applicable to the proposed project until a determination of completeness has been made consistent with Chapter 19 EWMC;
2. No City employee, agent, or elected official has the authority to assure the success of this application or the success of my/our proposed project; no City employee, agent, or elected official has assured me/us of success of this application or the success of my/our proposed project; and I/we are not relying on any assurance of the success of this application or the success of my/our proposed project made by any City employee, agent, or elected official;
3. The City of East Wenatchee has not guaranteed success of this application, and/or issuance of an affirmative notice of decision.
4. The City of East Wenatchee does not guarantee success of this application, and/or issuance of an affirmative notice of decision. The City's assistance to the Applicant(s)/Owner(s) does not preclude the need to address impacts raised by the public or by other federal, state or local agencies;
5. In the event of any legal proceeding to challenge this application, any environmental determination or any other aspect of the proposed project, the Applicant(s)/Owner(s) shall be solely responsible to defend such challenge and pay all reasonable costs and reasonable attorney's fees necessary for such defense;
6. If an Authorized Agent is identified, that individual will be the only person receiving correspondence and notices regarding this application;
7. All persons executing this acknowledgement in a representative capacity shall be personally liable and hereby personally guarantee payment of all fees, expenses and costs required during the processing of this application;
8. If the Applicant(s)/Owner(s)/Agent(s) fails to respond to a request by the City to submit additional information, or the Applicant(s)/Owner(s)/Agent(s) request, in writing, that further processing be suspended or postponed, and if such failure to respond or requested suspension/postponement exceeds six months, the application shall be considered abandoned and all proposed development, uses and activities shall only be further considered after the submission of an new application and payment of fees;
9. This application does not constitute approval of the proposed project and it is acknowledged that additional permit applications and approvals may be necessary to conduct specific activities; and
10. City staff, the hearing body, and other agencies with jurisdiction are authorized to photograph and physically inspect the subject property during the processing of this application.

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

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