



PROJECT APPLICATION LAND USE, ENVIRONMENTAL & SITE DEVELOPMENT



For Departmental Use Only

Related Application #s:

Project Name: _____

Please Identify the Permit Types for This Project

A Supplemental Application and Checklist must be submitted with this application.

- Buffer Reductions
 - Critical Area Buffer Reduction
 - Critical Area Variance
 - Reasonable Use Exception
- Comp Plan Amendment
 - Area Wide
 - Pre-Application Meeting
 - Site Specific
 - Textual
- Conditional Use (CUP) / Administrative CUP
- CUP/Administrative CUP Revision
- Conditional Waiver from View Blockage Requirements
- Critical Areas Ordinance Site Visit
- Flood Hazard Areas Variance
- Home Business
- Pre-Application Meeting
- Master Plan Scoping
- Open Space
 - Open Space Land
 - Farm and Agriculture Conservation Land
 - Timber Land
- Performance Based Development (PBD)
- Rezone
- Right of Way - Public Works
- Road Approach (w/o Building Permit or SDAP)
- SEPA Review
- Shoreline Permits - JARPA
 - Shoreline Conditional Use – JARPA
 - Shoreline Substantial Development – Commercial - JARPA

- Site Development Activity Permit (SDAP)
 - Minor __Engineered; __Non-engineered
 - Grading (<500 cyds)
 - Grading 2 (≥500 cyds, but <5,000 cyds)
 - Commercial
 - Subdivision
 - Short Subdivision
 - Large Lot Subdivision
 - Right of Way Use/Improvement - Minor
 - Single-family residence
 - Major Development
 - Grading 3 (≥5,000 cyds)
 - Commercial
 - Subdivision
 - Short Subdivision
 - Large Lot Subdivision
 - Right of Way Use/Improvement – Major
 - Single-family residence

Land Subdivision

- Preliminary
 - Preliminary Subdivision
 - Preliminary Short Subdivision
 - Preliminary Large Lot Subdivision
- Final
 - Final Plat
 - Final Short Plat
 - Final Large Lot Plat
 - Binding Site Plan

<input type="checkbox"/> Shoreline Substantial Development – Residential - JARPA <input type="checkbox"/> Shoreline Variance - JARPA <input type="checkbox"/> Shoreline Revision <input type="checkbox"/> Shoreline Exemption – JARPA <input type="checkbox"/> Shoreline Exemption-Mooring Buoys - JARPA <input type="checkbox"/> Sign Permit <input type="checkbox"/> Timber Harvest <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> Variance - Zoning	<input type="checkbox"/> Amendment <input type="checkbox"/> Preliminary Subdivision Amendment <input type="checkbox"/> Preliminary Short Subdivision Amendment <input type="checkbox"/> Preliminary Large Lot Subdivision Amendment <input type="checkbox"/> Alteration <input type="checkbox"/> Final Plat Alteration <input type="checkbox"/> Final Short Plat Alteration <input type="checkbox"/> Final Large Lot Plat Alteration <input type="checkbox"/> Binding Site Plan Alteration <input type="checkbox"/> Vacation Plat, Short Plat, Large Lot, Binding Site Plan
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The authorized agent/representative is the primary contact for all project-related questions and correspondence. The County will email requests and information about the application to the authorized agent/representative and will 'copy' (Cc) the owner noted below. The authorized agent/representative is responsible for communicating information to all parties involved with the application. It is the responsibility of the authorized agent/representative and owner to ensure their mailbox accepts County email (i.e., County email is not blocked or sent to 'junk mail'). There may be instances where regular USPS or courier mail is used.

Applicant/Property Owner Information

Property Owner:

Name: _____

Address: _____

Phone #: _____ Cell Phone #: _____

Email Address: _____

Applicant:

Owner
 Applicant (other than owner)
 Authorized Agent/Representative

Name: _____

Address: _____

Phone #: _____ Cell Phone #: _____

Email Address: _____

Note: For projects with multiple owners, attach a separate sheet with each owner(s) information and signatures.

Professional:

Engineer Architect Surveyor Contractor

Check if this is the Authorized Agent/Representative for this project.

Name: _____ Title: _____

License Number: _____ Liability Certificate: _____

Address: _____

Work Phone #: _____ Cell Phone #: _____

Email Address: _____

Professional:

Engineer Architect Surveyor Contractor

Check if this is the Authorized Agent/Representative for this project.

Name: _____ Title: _____

License Number: _____ Liability Certificate: _____

Address: _____

Work Phone #: _____ Cell Phone #: _____

Email Address: _____

Project Information

Project Name:

Description of Work (include proposed uses):

Property Information:

Site Address: _____

Section: _____

Township: _____

Range: _____

Assessor Tax Parcel Number(s): _____

Total Parcel Area: _____

Area of Project Site (in square feet if less than 1 acre; in acres, if greater): _____

Present Zoning: _____

Present Use of Property: _____

Proposed Zoning: _____

Access (name of street(s) from which access will be gained): _____

Environmental Features on or near Site (show areas on site plan):

- Yes No Don't Know Marine Shoreline: _____ Shoreline Designation: _____
- Yes No Don't Know Creek or stream (name): _____
- Yes No Don't Know Lake (name): _____ Shoreline Designation: _____
- Yes No Don't Know Endangered or threatened species (identify): _____
- Yes No Don't Know Wetlands
- Yes No Don't Know Steep slopes or Geological hazard
- Yes No Don't Know Flood hazard area
- Yes No Don't Know Critical Aquifer Recharge Area

Utilities:

Water Source:

Existing: Yes No

Proposed: Yes No

Well: Yes No

Public Water: Yes No

Name of Water Provider: _____

Power:

Existing: Yes No

Proposed: Yes No

Name of Power Provider: _____

Sewer:

Existing: Yes No

Proposed: Yes No

Septic: Yes No

Public Sewer: Yes No

Name of Sewer Provider: _____

Other Utilities:

Existing: Yes No

Proposed: Yes No

Name of Utility Provider(s): _____

NOTE: If any of the above utilities needs to be installed and disturbance will occur in a public maintained or unmaintained county road and/or Right-of-Way easement then a Right-of-Way Supplemental Application is required.

I affirm, under penalty of perjury, that all answers, statements, and information submitted with this application are correct and accurate to the best of my knowledge. I also affirm that I am the owner of the subject site. Further, as owner, I grant permission to any and all employees and representatives of the County of Kitsap and other governmental agencies to enter upon and inspect said property as reasonably necessary to process this application. I understand, in accordance with the Department of Community Development fee policies, the base fee is determined by an average processing time. If staff hours required to process the permit exceeds the base fee, additional charges may be incurred, and I agree to pay all fees of the County that apply to this application. I understand refunds may also be issued for those permits that require less processing time.

If more than three signatures, please attach a separate sheet.

Print Name

Owner Signature

Date

Print Name

Owner Signature

Date

Print Name

Owner Signature

Date