



SUPPLEMENTAL APPLICATION SITE ASSESSMENT

Kitsap County Code is available online at <http://www.codepublishing.com/wa/kitsapcounty/>

Select One

- Danger Tree/Harvest Site Visit
- Drainage/Stormwater
- Zoning
- CAO Site Visit
- Building
- View Enhancement

Requestor's Name: _____ Assessor Tax Parcel #: _____

Section 1 – General Information

Requestor's Mailing Address: _____

Phone number: (_____) _____

Email Address: _____

Site Address: _____

Are you the property owner or authorized agent? Yes No

Do you want to be at the site assessment? Yes No

*Is this site assessment related to a feasibility study? Yes No

If yes, what is the date of expiration? _____

If this is Zoning Site Assessment Request, have you had a Staff Consultation? Yes No

If yes, Staff Consultation Permit Number: _____

Section 2 – Project Details

What concerns or plans do you have with the property: _____

If you are proposing a project, please give a detailed explanation of the proposed use and any questions you would like answered: _____

Are there any existing reports (geo-technical, wetland delineations, geological assessments, habitat management plans, engineering plans or construction drawings) completed for this property?

- Yes (please attach them to this request)
- No

**If DCD cannot meet your scheduling constraints consultants may be available to assist you with this assessment*

