



LAND USE APPLICATION

File Name: _____

File No(s): _____

Receipt No.: _____ Receipt Date: _____ Received By: _____ Amount: \$ _____

Instructions for Applicants

Please read and follow all instructions on your application carefully. If you have any questions about the process or your project, it is strongly recommended that you speak with staff prior to submitting your application to help ensure that processing can advance in a timely manner. Every application must include this cover sheet, the application/checklist and all required items, and a notarized affidavit of ownership (if applicable).

Specific Type of Land Use Application to be submitted (check all that apply):

- | | | |
|--|--|--|
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Lot Line Adjustment / Combination | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Critical Areas Review | <input type="checkbox"/> Secondary Dwelling Unit | <input type="checkbox"/> Wireless Communication Facility |
| <input type="checkbox"/> Environmental Review (SEPA) | <input type="checkbox"/> Short Subdivision (Short Plat) | <input type="checkbox"/> Other (please specify): _____ |
| <input type="checkbox"/> Landscape Plan Review | <input type="checkbox"/> Subdivision (Long Plat) | |

Please Print or Type Legibly

Site Address(es):			
Assessor Parcel Number(s) – (APNs):			
Zoning:		Comp. Plan Designation:	
Applicant:			Phone:
Address:			Cell:
City:	State:	Zip:	Fax:
E-Mail:			
Contact Person, if different:			Phone:
Address:			Cell:
City:	State:	Zip:	Fax:
E-Mail:			
Property Owner(s), if different:			Phone:
Address:			Cell:
City:	State:	Zip:	Fax:
E-Mail:			
Description of Proposal:			



I certify that the information provided in this application, including all submittals and attachments, is true and correct to the best of my knowledge. I understand that this application does not constitute approval of permits and/or work to be performed. I certify that I am or represent the owner and am acting with the owner's full knowledge and consent. I further understand that...

Initials

- _____ ... This application applies only to the property for which it is approved and is non-transferable.
- _____ ... Approval of an application does not in any way replace, modify or waive any requirement for the compliance of the proposal with other applicable standards or regulations. It is the responsibility of the owner / applicant to become aware of the requirements of the BMC. The approval of any plans does not guarantee that all provisions of applicable codes have been met.
- _____ ... The burden of proof rests with the applicant.
- _____ ... An application may be amended only in writing.
- _____ ... Submittal of this application grants the appropriate city officials the right of entry to the project site during reasonable hours.
- _____ ... Items with any typewritten information must be 10-point font or larger to ensure legibility of scanned documents.
- _____ ... It is the applicant's responsibility to request required inspections a minimum of twenty four (24) hours in advance at (425) 775-5440.
- _____ ... By submitting this application, I consent to pay any fees incurred for engineering or outside consultant review.

Signature of Owner/Agent: _____ Date: _____

Please Print Name: _____

FOR CITY USE ONLY		
Date	Action / Notes	Initials



CITY OF
BRIER
ESTD 1965

CONDITIONAL USE PERMIT

File No./Name: _____

Site Address: _____

An application for a **Conditional Use Permit (CUP)** is complete when it is accompanied by the following items. Additional information may be required. No application shall be considered complete if any of the required information is missing. Only the property owner may apply for a Conditional Use Permit.

Applications are subject to a public hearing with the Planning Commission. Upon completion of the public hearing, the Commission will make a recommendation to City Council. The Council will approve, approve with conditions, or deny the application. Unless a different time period is specified by the Council, the Conditional Use Permit must be acted upon by the owner within three (3) years from the date of approval or the Conditional Use Permit will expire.

REQUIRED SUBMITTALS

- 1. Land Use Application Cover Sheet, with original signature(s).
- 2. A written summary of the proposal, including the goals of the proposal, the section(s) of the BMC which require approval of the application, and the relationship of the proposal to the use of adjacent properties.
- 3. A written description of the proposed use of the site, including hours of operation, number of employees, and any proposed storage or use of hazardous materials, if applicable.
- 4. A written statement that addresses the decision criteria in BMC 17.36.050.B.4, together with any documents that support the written statement.
- 5. A site plan, drawn to scale, showing:
 - A. Date, scale, project information, vicinity map and north arrow;
 - B. Existing and proposed right-of-way and improvements;
 - C. Existing and proposed buildings, structures, parking areas and other improvements;
 - D. Existing and proposed utilities;
 - E. Existing natural features and critical areas;
 - F. All other buildings, structures, improvements and natural features within fifty (50) feet of the subject property;
 - G. For new construction:
 - 1. A landscaping plan, showing existing and proposed landscaping and fencing – see BMC 17.50;
 - 2. Exterior elevations of all existing and proposed structures; and
 - 3. Floor plans for all existing and proposed structures.
- 6. A summary table of proposal statistics, including site area, building coverage, impervious area, required and proposed parking, and a list of uses for which the site will be used and the gross floor area or gross lot area that each use would occupy.
- 7. If the project is to be developed or occupied in phases, a proposed schedule for each phase.
- 8. A completed SEPA application, unless the proposal is categorically exempt.
- 9. Critical Areas Study, if required by Title 18 BMC.
- 10. Property owner addresses, map, envelopes and label sheet created using the “Instructions for Obtaining Property Ownership for Snohomish County.”
- 11. One (1) set of reduced copies (no larger than 11x17”) of all plans and oversized documents.
- 12. A notarized Affidavit of Ownership for all property owner(s), with original signatures.
- 13. Application Deposit: \$1200.00

For Staff Use ONLY	
Verified	Waived



CITY OF
BRIER
ESTD 1965

AFFIDAVIT OF OWNERSHIP

File No./Name: _____

Site Address: _____

Property Owner: _____

Contact Address: _____ **Phone:** _____

Any person with a verifiable interest in the subject property must complete this form. If the above property owner has an express interest in additional parcels involved in the listed project than there is space provided for below, those parcel numbers and associated legal descriptions must be provided on further copies of this form. Full legal descriptions may be attached separately.

Site Address: _____ **APN:** _____

Legal Description:

Site Address: _____ **APN:** _____

Legal Description:

Site Address: _____ **APN:** _____

Legal Description:

AFFIDAVIT OF OWNERSHIP – To Be Completed in the Presence of a Notary Public

I, _____, being duly sworn, depose and say that I am the owner of record of that certain real property identified as Snohomish County Parcel Number(s) _____, and that the information provided in this application, including all submittals and attachments, is true and correct to the best of my knowledge.

Signature of Owner: _____ Date: _____

Please Print Name: _____

STATE OF _____)

COUNTY OF _____)

) ss.

I certify that I know or have satisfactory evidence that _____ is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

SUBSCRIBED AND SWORN TO before me this _____ day of _____ 20__.

NAME (print): _____

NAME (sign): _____

Notary Public in and for the State of _____

Commission Expires: _____



CITY OF
BRIER
ESTD 1965

INSTRUCTIONS FOR OBTAINING PROPERTY OWNERSHIP

Instructions for Applicants

Please read and follow all instructions on your application carefully. Most applications require notification of surrounding property owners in order to provide citizens the opportunity to review and comment on applications that may impact them. If you have any questions about the process or your project, it is strongly recommended that you speak with staff prior to submitting your application to help ensure that processing can advance in a timely manner.

1. Contact the Snohomish County Assessor's Office:

In Person: 3000 Rockefeller Ave
1st Floor Administration East
Everett, WA 98201

By Phone: (425) 388-3433

Email: contact.assessor@snoco.org

* Note: The wait time varies by request type. Requests made in person will take approximately 30 minutes from the time of the request, and requests made by phone or email will take approximately 2-3 business days.

2. Request the property owner information for parcels within 300 feet of the subject parcel(s). You will need to provide both the parcel number(s) and the address(es).

3. The Assessor's Office can provide the information in two formats:

Option A: Hard Copy Labels, Address List, Map

* Note: Requests which generate a large number of label sheets may incur a charge.

Option B: Excel Database, Map

- Generate label sheet(s) using the Excel database.

4. Copy the label sheet(s).
5. Using the label sheet(s), create stamped and addressed legal-sized envelopes with no return address.
6. Submit the address list, map, envelopes and copy of the label sheet(s) with your application.