



PLANNING DEPARTMENT

Mailing Address: P.O. Box 39, Concrete, Washington 98237

Office Location: 45672 Main Street, Concrete, Washington

98237 Phone: (360) 853-8401

MASTER PERMIT APPLICATION:

TYPE OF APPLICATION (check all that apply):

- | | | |
|--|---|---|
| <input type="checkbox"/> Administrative Interpretation | <input type="checkbox"/> Grade & Fill Permit | <input type="checkbox"/> Shoreline Substantial Development Permit |
| <input type="checkbox"/> Annexation Request | <input type="checkbox"/> Home Occupation Permit | <input type="checkbox"/> Shoreline Substantial Development Permit |
| <input type="checkbox"/> Binding Site Plan (Preliminary) | <input type="checkbox"/> Long Subdivision (Preliminary) | <input type="checkbox"/> Shoreline Variance |
| <input type="checkbox"/> Binding Site Plan (Final) | <input type="checkbox"/> Long Subdivision (Final) | <input type="checkbox"/> Short Subdivision (Preliminary) |
| <input type="checkbox"/> Boundary Line Adjustment (BLA) | <input type="checkbox"/> Lot Certification | <input type="checkbox"/> Short Subdivision (Final Plat) |
| <input type="checkbox"/> Comprehensive Plan Map & Text Amendment | <input type="checkbox"/> Minor Amendment/ Modification | <input type="checkbox"/> Sign Variance |
| <input type="checkbox"/> Conditional Use Permit (CUP) | <input type="checkbox"/> Noise Standards Variance | <input type="checkbox"/> Street Vacation |
| <input type="checkbox"/> Development Agreement | <input type="checkbox"/> Planned Unit Development (PUD) | <input type="checkbox"/> Temporary Uses (up to 2 weeks) |
| <input type="checkbox"/> Essential Public Facility | <input type="checkbox"/> Plat Amendment /Modification | <input type="checkbox"/> Variance (Zoning) |
| <input type="checkbox"/> Floodplain Development Permit | <input type="checkbox"/> Reasonable Use Allowance | <input type="checkbox"/> Zoning Map Amendment (Rezone) |
| <input type="checkbox"/> Floodplain Variance | <input type="checkbox"/> SEPA Environmental Review | <input type="checkbox"/> Zoning Text Amendment |
| | <input type="checkbox"/> Shoreline Conditional Use Permit | |
| | <input type="checkbox"/> Shoreline Exemption | |

PROJECT & SITE INFORMATION:

SITE ADDRESS:	PROJECT NAME:
PARCEL NUMBER(S):	SECTION, TOWNSHIP, & RANGE
LOT SQUARE FOOTAGE & ACREAGE:	PROJECT VALUATION:
LEGAL DESCRIPTION:	PRESENT ZONING:
PRESENT USE OF PROPERTY:	CUT & FILL (CY) PROPOSED:
PRE-APPLICATION CONFERENCE HELD?: <input type="checkbox"/> Yes, _____ <input type="checkbox"/> No	WATER SOURCE: <input type="checkbox"/> Town of Concrete <input type="checkbox"/> Private Well <input type="checkbox"/> Community Well
SEWAGE DISPOSAL: <input type="checkbox"/> Town of Concrete <input type="checkbox"/> Septic	ROAD ACCESS: <input type="checkbox"/> Town /County Road <input type="checkbox"/> State Highway <input type="checkbox"/> Private Road

CRITICAL AREAS OR BUFFERS ON SITE OR WITHIN 300 FEET:		WATER BODIES WITHIN 200 FEET:	
<input type="checkbox"/> Yes / Type _____ <input type="checkbox"/> No		<input type="checkbox"/> Yes / Name: _____ <input type="checkbox"/> No	
FLOODPLAIN:			
Flood Zone:		FIRM Panel #	Date of Panel:
LOT COVERAGE AREA CALCULATIONS:			
Existing Square Footage:		Proposed Square Footage:	
IMPERVIOUS SURFACE AREA CALCULATIONS:			
Existing Impervious Square Footage:		New Impervious Surface:	
DESCRIPTION OF SUBJECT PROPOSAL: <input type="checkbox"/> Additional pages attached			
PROPOSED WORK: _____			

PROPERTY OWNER INFORMATION: <input type="checkbox"/> Multiple owners attached			
NAME:		MAILING ADDRESS:	
_____		_____	
CITY, STATE, ZIP:		PHONE #:	
_____		_____	
FAX #:		EMAIL ADDRESS:	
_____		_____	
APPLICANT INFORMATION: <input type="checkbox"/> Same as property owner			
NAME:		MAILING ADDRESS:	
_____		_____	
CITY, STATE, ZIP:		PHONE #:	
_____		_____	
FAX #:		EMAIL ADDRESS:	
_____		_____	
CONTACT PERSON: <input type="checkbox"/> Same as property owner <input type="checkbox"/> Same as applicant			
NAME:		MAILING ADDRESS:	
_____		_____	
CITY, STATE, ZIP:		PHONE #:	
_____		_____	
FAX #:		EMAIL ADDRESS:	
_____		_____	

NOTES:

- I am the property owner and I grant permission to Town of Concrete staff to enter the project site to verify presence or absence of critical areas and to perform inspections of the work proposed by this application; or
- Attached is a letter of authorization stating that I have the consent of the property owner to submit the subject application on their behalf. Additionally, the property owner has granted permission to town staff to enter the project site in order to verify the presence or absence of critical areas and to perform inspections of work proposed by this application.
- A notarized affidavit (see below) is required to be completed by all persons having an ownership interest in the subject property and the applicant, if different from the property owner(s). If the signatory is not listed as the owner in the title report, or if the signatory is signing on behalf of an entity, documentation authorizing the signatory to sign the affidavit on behalf of the individual or entity shall provided.

SIGNATURE REQUIRED:

I certify that the information, statements, answers above regarding the subject application(s) are true and correct to the best of my knowledge and belief.

Signature: _____

Title: _____

Print Name: _____

Company: _____

Date: _____

STATE OF WASHINGTON)
) ss.

COUNTY OF SKAGIT

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

Given under my hand and official seal this _____ day of _____, 20_____

Notary Public

Residing at _____

My appointment expires _____

(SEAL)