

LAND USE APPLICATION



SPECIAL USE PERMIT COMMUNITY & ECONOMIC DEVELOPMENT

18204 59th Avenue NE • Arlington, WA 98223 • Main Line 360.403.3551

FOR AGENCY USE	Date:	File:	Fee: \$
PERMIT TYPE			
Type of Special Use Permit	<input type="checkbox"/> Cottage (20 ≤ 49 Units) <input type="checkbox"/> Multi-Family(20 ≤ 49 Units) <input type="checkbox"/> Site Plan Review (≥4 ac.)	Required Submittals (Check All That Apply)	<input checked="" type="checkbox"/> Special Use Submittal Requirements Checklist <input checked="" type="checkbox"/> Required Submittal Items <input type="checkbox"/> Shoreline Substantial <input checked="" type="checkbox"/> Design Review – Admin. <input type="checkbox"/> Design Review – Board
SITE INFORMATION			
Site Address (Use block # if no bldg. #)	Airport Blvd/51st Ave NE and future 173rd Street	Tax Parcel ID Number(s)	
Acreage & Square Footage Of Property	47.47	Zoning Classification	BP
	2,067,649 sf	Use Classification No.	
Water Supply	Current	Proposed	Sewer Supply
Existing Use of Property	Undeveloped		
On-Site Critical Areas?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Critical Area Type (e.g. wetland, steep slope, etc.)	
Has Site Been Logged in Past 6 years?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Will Site Be Logged as Part of This Project?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
OWNER		APPLICANT	
Name		SMARTCAP	Robert Shipley
Full Address		8021 164th Ave NE	
		Redmond, WA 98052	
Phone Number		425.422.3484	
E-mail		robertsh@smartcapgroup.com	
Relationship of Applicant to Property (check one)	<input type="checkbox"/> Owner	<input type="checkbox"/> Contract Purchaser	<input checked="" type="checkbox"/> Lessee
			<input type="checkbox"/> Other: _____
PROJECT ARCHITECT		PROJECT ENGINEER	
Name	Aso Jaff WARE MALCOMB	Sam Yoakim WARE MALCOMB	Richard van Mourik North Peak Associates
Full Address	3015 112Th Ave NE Suite 205		17270 Woodinville Redmond Rd
	Bellevue, WA 98004		Woodinville, WA 98072
Phone Number	425.670.6706	925480.6085	206.601.4682
E-mail	ajaff@waremalcomb.com	syoakim@waremalcomb.com	richv@northpeakassociates.com

PROJECT DETAILS		
Project Name	SMARTCAP Arlington Air North Phases 1 and 2	
Total Number of Existing Lots		
Total Number of Proposed Units		
By Dwelling Use Type	Single Family	
	Duplex	
	Townhouse	
	Multi-Family	
	Other	
By Non-Residential Use Type	Commercial	
	Industrial	Five class A industrial/warehouse buildings and associated site improvements.
	Other	
Has this property been subdivided?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, Provide Applicant Name & Plat Name		
SHORELINE DEVELOPMENT ONLY (Required for all Development Within or Adjacent to a Shoreline)		
Will this Proposal be a Substantial Development as Defined in AMC §20.92.010?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Shoreline Environmental Designation (if yes)		
Are you requesting a Shoreline Variance as allowed under AMC §20.92.130?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
All projects subject to a Shoreline Substantial Development Permit are required to be processed concurrently.		
FOREST PRACTICE (For Clearing >10,000sf) AND MITIGATION FOR SIGNIFICANT TREE REMOVAL (All Applications)		
Number of Significant Trees to be Harvested	+/- 1100	
Total Acreage to be Harvested	47.47	
Is there a Current Development Moratorium on the Site?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Type of Forest Land Conversion	<input checked="" type="checkbox"/> Class IV – General <input type="checkbox"/> Class IV – Special _____	
Significant Tree Mitigation Options (A, B, or C)		
Will Significant Trees be Removed During any Phase of this Proposed Project?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If, no, then no mitigation is required)	
A) Number of Trees to be Replanted On-Site (3:1 Ratio)	600	
<u>OR</u> Date Completed	(For Agency Use Only)	
B) Number of Trees to be Replanted Off-Site (3:1 Ratio)	Location:	
<u>OR</u> Date Completed	(For Agency Use Only)	
C) Tree Mitigation In-Lieu Fee	(# of Harvested Trees) ____ X (3) X (Tree Cost) = ____	
Date Paid		
Receipt №		

APPLICANT CERTIFICATION

I certify that I am the Owner or Owner’s authorized agent. If acting as an authorized agent, I further certify that I am authorized to act as the Owners agent regarding the property at the above referenced address for the purpose of filing applications for permits or review under the Arlington Municipal Code and I have full power and authority to perform on behalf of the Owner all acts required to enable the City to process and review such applications.

I do hereby declare under penalty of perjury under the laws of the state of Washington that I have familiarized myself with the rules and regulations with respect to preparing and filing this application and that the statements and information submitted herewith are in all respects true and correct to the best of my knowledge and belief.

DATED AT Redmond , Washington on this date: 6/03/2022

Applicant’s Signature: _____

REAL PROPERTY OWNER CERTIFICATION

I do hereby declare under penalty of perjury under the laws of the state of Washington that I am the owner of the subject property or an officer/member of the entity owning the subject property, that it is my desire to seek the subject land use permit, and that I will abide by any requirements and conditions that may be part of the approval of this request. I also hereby grant permission for City employees, agents of the City and/or other agency officials to enter the subject property, if necessary, for the purpose of site inspections.

DATED AT Redmond , Washington on this date: 6/03/2023

Owner’s Signature: _____

All other property owners of the subject property must also sign below (attach additional sheets if necessary):

1) Name: _____ Signature: _____

Address: _____ Phone: _____

2) Name: _____ Signature: _____

Address: _____ Phone: _____

3) Name: _____ Signature: _____

Address: _____ Phone: _____



City of Arlington

18204 59th Avenue NE
 Arlington, Washington 98223
 (360) 403-3551

Received

Stamp

Special Use Permit – Submittal Requirements						
Community Development Director or Hearing Examiner Decision						
➤ The number indicates the item is required for submittal and the number of copies required ➤ • Indicates the item shall, upon request, be required for submittal				General Information Meeting Date: _____ Submittal Date: _____		
Submittal Requirements	Complete Submittal Item?			Cottage Housing	Multi-Family Development	Site Plan Review
	Yes	No	N/A			
General Application:						
Land Use Application Form & Submittal Checklists	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	1
Water/Sewer Availability Application ¹	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	1
Public Notice Materials ^{2 & 3} Separate by Applicant	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	1
Project Narrative	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	1
Legal Description	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	1
Vicinity Map	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	1
Review Fee ⁴	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	1
USB Flash Drive with PDF's of Submitted Documents	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	1
Site Plans:						
Site Plan ⁵	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	2	2
Landscape Plan ⁵	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	2	2
Tree Survey Plan ⁵	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	2	2
Reduced Plan Sets (11x17) - All Above Site Plans or Maps	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	2	2
Engineering Reports / Information:						
Drainage Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	2	2
Geotechnical Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	2	2
Complete Streets Checklist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	2	2
Traffic Impact Analysis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	2	2
Transportation Demand Management Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	•	•	•
Parking Demand Management Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	•	•	•
Snohomish County Traffic Impact Fee Offer Worksheet ⁶	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	1
WSDOT Traffic Impact Fee Offer Worksheet ⁷	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	•	•	•

**Special Use Permit – Submittal Requirements
Community Development Director or Hearing Examiner Decisions**

Submittal Requirements	Complete Submittal Item?			Cottage Housing	Multi-Family Development	Site Plan Review
	Yes	No	N/A			
Environmental Information:						
SEPA Checklist ⁸	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1	1	1
Cascade Industrial Center Modified SEPA Checklist ⁹	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	•	•	•
Critical Area / Wetland Report or Critical Area Statement ¹⁰	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	2	2
Archaeology / Cultural Report ¹¹	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	•	•	•
Unanticipated Discovery Plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	1

NOTES:	
1.	Water / Sewer Availability shall be submitted with or prior to application submittal.
2.	See Public Notice requirements.
3.	If a hearing is requested during the permit process, then additional Public Notice information is required.
4.	See the City of Arlington Adopted Fee Schedule.
5.	See Site Plan Requirements.
6.	See Snohomish County Traffic Impact Fee Offer Worksheet and required if the project is subject to SEPA.
7.	See WSDOT Traffic Impact Fee Offer Worksheet and required if the project subject to SEPA or requested.
8.	See the SEPA Checklist Requirements for Categorical Exemption Thresholds. If not exempt, then required.
9.	All projects within the Cascade Industrial Center shall submit the CIC Modified SEPA Checklist. Public Notice Material is not required, as no Public Noticing is required with this checklist.
10.	See Critical Areas Evaluation to determine the type of report required.
11.	An Archaeological or Cultural Report may be requested by a reviewing agency or if known area of interest.
All supplemental forms, checklists or requirements can be found at http://www.arlingtonwa.gov/269/Applications-Forms	

FOR CITY USE ONLY	
<input type="checkbox"/>	This application is complete.
<input type="checkbox"/>	This application is incomplete. See items noted above.
<input checked="" type="checkbox"/>	The City of Arlington may require additional information. The applicant will be notified in writing if additional information is necessary.
These submittal requirements are for the City of Arlington permits only. Additional permits may be required by federal, state, regional or local agencies. It is the responsibility of the applicant to ascertain whether other permits are required.	
_____	_____
Community Development Representative	Date



SITE PLAN CHECKLIST

COMMUNITY & ECONOMIC DEVELOPMENT

18204 59th Avenue NE • Arlington, WA 98223 • Main Line 360.403.3551

COVER SHEET [SEE SHEET C1.0](#)

- Title Block (centered at top of drawing) that includes the following:
 - City of Arlington
 - Name of Proposed Development
- [N/A](#) File No. (call for correct number) [This has not yet been assigned](#)
- Section, Township, & Range [Attached](#)
- Site Information: [SEE SHEET C1.0](#)
 - Site Address (use block # if no bldg. #) [SEE SHEET C1.0](#)
 - Zoning Classification [SEE SHEET C1.0](#)
 - Airport Protection District Subdistrict [YES](#)
 - Use Classification (from AMC 20.40) [10.220 WAREHOUSE ZS DESIGNATION](#)
 - Legal Description [SEE SHEETS ON C1.0 & C2.0](#)
- [N/A](#) Tax Parcel ID Number [LEASE AREA , ON TITLE BLOCK C1.0 & C2.0](#)
- Density & Dimensional Calculations
 - Lot(s) Size (both in acreage and square feet) [SEE SHEETS C2.0](#)
 - Lot Dimensions (length, width) [TRIANGULAR SITE , PLEASE SEE SHEET C2.0](#)
 - Lot Number Labels (if applicable) [SEE SHEETS C1.0 & C2.0](#)
- [N/A](#) Number of Lots (if applicable) [N/A.. SINGLE LOT DEVELOPMENT](#)
- [N/A](#) Proposed Residential Density (if applicable)
 - Building Setback (for existing, proposed, & relocated bldgs. on site) [SEE SHEETS C3.0-C3.2 , A1.1](#)
 - Building Height (for existing, proposed, & relocated bldgs. on site) [SEE SHEET ON A1.1](#)
 - Total Lot Coverage (impervious surface) [SEE SHEET A1.1, PROJECT DATA TABLE](#)
- [N/A](#) Recreational & Open Space Calculations (if applicable)
 - Adjacent Street Names & Classifications [SEE SHEET A1.1, PROJECT DATA TABLE, and Traffic Impact Report](#)
 - Required Parking Space Calculations (required & proposed) [SEE SHEET A1.1, PROJECT DATA TABLE](#)
- [N/A](#) Required Bicycle Rack Spaces [WILL BE PROVIDED PER CODE REQUIREMENTS](#)
- Screening Types Provided (indicate for each lot line) [BERMS SEE SHEET C1.0](#)
- Utility Provider (sewer & water) [SEE SHEETS ON C1.0](#)
- [N/A](#) Critical Area Types Located On-Site and Associated Buffers (if applicable)
- [N/A](#) Shoreline Classification (if applicable) [N/A NOT IN THE PROXIMITY OF A SHORELINE](#)
- FEMA Flood Zone Designation (if applicable) [SEE SHEET ON C1.0](#)
- Sheet Index [SEE SHEET A0.1](#)
- Date Plans Were Prepared [SEE SHEET ON A0.1](#)
- Vicinity Map (Include North Arrow, Scale, and pinpoint site location) [SEE SHEET ON C1.0](#)
- Name, Address, Phone Number, & Email Address of the Applicant, Owner, Engineer, Surveyor, & Landscape Architect [SEE SHEET ON A0.1](#)

SITE PLAN SHEET [SEE SHEET C1.0](#)

- Title Bar (locate along right edge of sheet) that includes the following:
 - Date Drawing was Prepared or Revised
 - Project Name & Location
 - Name, Address, & Phone Number of Applicant, Owner, Engineer, & Surveyor [SHEET C1.0](#)
- North Arrow, Graphic Scale (1" = 50' or larger) and Legend [SHEETS ON C3.0-C3.2](#)
- Existing Lot Lines Within or Adjacent to the Project Site [SHEET C2.0](#)
- Existing and Proposed Rights-of-Way (include dimensions & street name) [SEE SHEETS ON C3.0-C3.2, A1.1](#)
- Existing and Proposed Easements (include dimensions) [SHEET C2.0](#) , [NO PROPOSED EASEMENT AT THIS TIME](#)
- Existing Critical Area Boundaries and Associated Buffers On-Site and Within 150ft. of Site per AMC 20.93 [SHEET A1.1](#)
- [N/A](#) Existing and Proposed Native Growth Protection Areas [N/A. THERE ARE NO PROTECTION AREAS WITHIN THE PROJECT SITE](#)
- Building (whether proposed, expanded, retained, or relocated) Setbacks From All Lot Lines [SHEETS A1.1 , C3.1-C3.2](#)
- Building (whether proposed, expanded, retained, or relocated) Dimensions and Square Footage [SHEETS A1.1 , C3.1-C3.2](#)
- Building Elevations (all sides for proposed or expanded buildings only – color renderings preferred) [SEE SHEETS A0.11-A0.14](#)
- Parking Stall, Loading Stall, Driveway, & Isle Locations & Dimensions [SEE SHEETS A1.1 & C1.0](#)
- Refuse Bin Location (including screening details) [SEE SHEETS A1.1](#)
- Lighting Details (building exterior, site, & parking area) [WILL BE PROVIDED PER CODE RFEQUIREMENTS](#)
- Site Ingress/Egress (existing and/or proposed) [SEE SHEETS A1.1](#)
- Frontage Improvements with Dimensions (if required) [SEE SHEETS A1.1](#)
- Proposed Right-of-Way Dedication (include dimensions & square footage) [SEE SHEETS ON C3.0-C3.2](#)
- Adjacent Parcels with Parcel Numbers [LEASE AREA , NO PARCEL NUMBERS, AIRPORT PROPERTY](#)

LANDSCAPE PLAN SHEET

- Title Bar (locate along right edge of sheet) that includes the following: [SEE SHEETS L1.00-L1.08](#)
- Date Drawing was Prepared or Revised [SEE SHEETS L1.00-L1.08](#)
- Project Name & Location [SEE SHEETS L1.00-L1.08](#)
- North Arrow and Graphic Scale [SEE SHEETS L1.00-L1.08](#)
- Name, Address, & Phone Number of Applicant, Owner, & Landscape Architect [SEE SHEETS L1.00](#)
- Plant Schedule and Legend Showing Scientific and Common Names for Each Type of Tree, Shrub, and Ground Cover and their Quantity, Planting Size Mature Size, and Symbol. [SEE SHEETS L1.00-L1.08](#)
- Tree, Shrub, and Lawn Planting Details [SEE SHEETS L7.01](#)
- Location and Spacing of all Trees, Shrubs, and Plants (including existing trees to be preserved)
- Irrigation Details (if required) [SEE SHEETS L-7.02](#) [SEE SHEETS L1.00-L1.08](#)
- Parking Area Shading Calculation (see AMC 20.76.130) [SEE SHEETS L-1.00](#)
- Dimensions and Square Footage for Each Landscape Area, Including Frontage, Lot Boundary, and Vehicle Accommodation Area Landscaping [SEE SHEETS L-1.00](#) [SEE SHEETS L1.00-L1.08](#)
- Percentage of Total Lot Landscaping [SEE SHEETS L-1.00](#)
- Location of Existing Significant Trees (signify which significant trees will be removed) [SEE SHEETS C1.0](#)
- Location of Where Replacement Trees are to be Planted (if applicable) [SEE SHEETS L1.00-L1.08](#)
- Table including the Number of Trees and Species to be Removed [SEE SHEETS C1.0](#)