



# LAND USE APPLICATION

## CONDITIONAL USE PERMIT

### COMMUNITY & ECONOMIC DEVELOPMENT

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

FOR AGENCY USE		Date:	File:	Fee: \$							
<b>PERMIT TYPE</b>											
<b>Type of Conditional Use Permit</b>	<input type="checkbox"/> Binding Site Plan (> 9 Lots) <input type="checkbox"/> Cottage (≥ 50 Units) <input type="checkbox"/> Major Plat Preliminary <input type="checkbox"/> Major Plat Final <input checked="" type="checkbox"/> Multi-Family (≥ 50 Units) <input type="checkbox"/> Site Plan Review	<b>Required Submittals</b> (Check All That Apply)	<input checked="" type="checkbox"/> Auxiliary Sheet <input type="checkbox"/> Shoreline Substantial <input checked="" type="checkbox"/> Design Review – Admin. <input type="checkbox"/> Design Review – Board <input checked="" type="checkbox"/> SEPA <input checked="" type="checkbox"/> Traffic – City <input type="checkbox"/> Traffic – County <input type="checkbox"/> Traffic – State								
<b>SITE INFORMATION</b>											
<b>Site Address</b> (Use block # if no bldg. #)	18625 & 18705 67th Ave NE Arlington, WA 98223	<b>Tax Parcel ID Number(s)</b>	31052300200500 00738500103100								
<b>Acreage &amp; Square Footage Of Property</b>	108,855 sf 2.50 acres	<b>Zoning Classification</b>	Neighborhood Com. - Mixed Use								
<b>Water Supply</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Current</th> <th style="width: 50%;">Proposed</th> </tr> <tr> <td style="text-align: center;">Arlington</td> <td style="text-align: center;">Arlington</td> </tr> </table>	Current	Proposed	Arlington	Arlington	<b>Sewer Supply</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Current</th> <th style="width: 50%;">Proposed</th> </tr> <tr> <td style="text-align: center;">Arlington</td> <td style="text-align: center;">Arlington</td> </tr> </table>	Current	Proposed	Arlington	Arlington
Current	Proposed										
Arlington	Arlington										
Current	Proposed										
Arlington	Arlington										
<b>Existing Use of Property</b>	Single Family Residence										
<b>On-Site Critical Areas?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Critical Area Type</b> (e.g. wetland, steep slope, etc.)	N/A								
<b>Has Site Been Logged in Past 6 years?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Will Site Be Logged as Part of This Project?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
<b>OWNER</b>		<b>APPLICANT</b>		<b>CONTACT</b>							
<b>Name</b>	Grandview North LLC	Grandview North LLC	Cascade Surveying & Eng								
<b>Full Address</b>	P.O. Box 159 Arlington, WA 98223	P.O. Box 159 Arlington, WA 98223	P.O. Box 326 Arlington, WA 98223								
<b>Phone Number</b>	360 435 7171	360 435 7171	360 435 5551								
<b>E-mail</b>	gv@grandviewinc.net	gv@grandviewinc.net	Randy@cascadesurveying.com								
<b>Relationship of Applicant to Property (check one)</b>	<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Contract Purchaser <input type="checkbox"/> Lessee		<input type="checkbox"/> Other: _____								
<b>PROJECT ARCHITECT</b>		<b>PROJECT ENGINEER</b>	<b>PROJECT SURVEYOR</b>								
<b>Name</b>	Glenn C Wells A.I.A.	Cascade Surveying & Eng	Cascade Surveying & Eng								
<b>Full Address</b>	324 West Bay Dr, Suite 102 Olympia, WA 98502	P.O. Box 326 Arlington, WA 98223	P.O. Box 326 Arlington, WA 98223								
<b>Phone Number</b>	360 352 4553	360 435 5551	360 435 5551								
<b>E-mail</b>	Randy@cascadesurveying.com		Randy@cascadesurveying.com								

PRELIMINARY MAJOR PLAT & BINDING SITE PLAN APPLICATION ONLY	
Project / Plat Name	
Total No. of Proposed Lots	
Total Number of Proposed Units	
Will this be a Unit Lot Division?	<input type="checkbox"/> Yes <input type="checkbox"/> No
By Dwelling / Use Type	Single Family
	Two Family
	Multi Family
	Commercial
	Industrial
Has this property been subdivided, or has application for subdivision been made, within the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, Provide Applicant Name & Plat Name	
FINAL MAJOR PLAT APPLICATION ONLY	
Date Preliminary Plat Approved	
Improvements have been:	<input type="checkbox"/> Built <input type="checkbox"/> Bonded <input type="checkbox"/> Some Built, Some Bonded <input type="checkbox"/> Other:
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
FOREST PRACTICE (For Clearing >10,000sf) AND MITIGATION FOR SIGNIFICANT TREE REMOVAL (All Applications)	
Associated Land Use Permit No	
Number of Significant Trees to be Harvested	
Total Acreage to be Harvested	
Is there a Current Development Moratorium on the Site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of Forest Land Conversion	<input 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 type="checkbox"/> Yes <input type="checkbox"/> No
A) Number of Trees to be Replanted On-Site (3:1 Ratio)	
<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	

**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 ARLINGTON, Washington on this date: 12-14-21

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 \_\_\_\_\_, Washington on this date: \_\_\_\_\_

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: \_\_\_\_\_

# AUXILIARY SHEET

## MULTI-FAMILY SITE PLAN

### CONDITIONAL USE PERMIT

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

Office Hours: Monday – Friday 8AM to 5PM (Closed Holidays)

#### INSTRUCTIONS

Table I below is a checklist of items that must be submitted as part of your conditional use permit application for a multi-family site plan. Table II below outlines the minimum information that must be provided on your plan sheets. Numbers in parenthesis equal the number of copies required. Please use only paper clips and/or binder clips when assembling documents.

All Boundary and Topographic Surveys must be prepared by—or under the supervision of—a professional land surveyor registered in the State of Washington.

If you have any questions about what is required, or if you would like to schedule a pre-application meeting, please call our department main line listed above.

No appointment is necessary for application submittal but it is highly encouraged.

#### TABLE I - CHECKLIST

- (1) CD-R with Individual PDFs of Each Item Listed Below ↓
- (1) Vicinity Map (on 8½" X 11")
- (1) Written Narrative (Description of Proposal)
- (1) Public Notice Material

#### SITE PLANS (see Table II)

- (2) Full Size
- (2) 11" X 17"
- (2) 8½" X 11"

#### LANDSCAPE PLANS (see Table II)

- (2) Full Size
- (2) 11" X 17"
- (2) 8½" X 11"

#### TREE SURVEY, IF REQUIRED (see AMC 20.76.120)

- (2) Full Size
- (2) 11" X 17"

#### REPORTS

- (2) Traffic Impact Analysis
- (2) Stormwater Drainage Report
- (2) Wetland Study, If Required
- (2) Geotechnical Report, If Required
- (2) SEPA Checklist

#### UTILITY

- (1) Utility Service Availability Letter – City of Arlington; OR
- (1) Utility Service Availability Letter – City of Marysville



## **COVER SHEET**

- Title Block (centered at top of drawing) that includes the following:
  - City of Arlington
  - Name of Proposed Development
  - File No. (call for correct number)
  - Section, Township, & Range
- Site Information:
  - Site Address (use block # if no bldg. #)
  - Legal Description & Tax Parcel ID#
  - Zoning Classification
  - Use Classification
  - Airport Protection District Subdistrict
  - Density & Dimensional Calculations
    - Total Site Area (acreage & square footage)
    - Total Number of Dwelling Units Proposed
    - Total Lot Coverage (of all structures on site)
    - Average Setback Between Cottages
  - Open Space Calculations
  - Required Parking Space Calculations
  - Required Bicycle Rack Spaces
  - Adjacent Street Names & Classifications
  - Screening Types Provided (indicate for each lot line)
  - Utility Provider (Sewer & Water)
  - Name of Special Districts: School and Fire
  - Critical Area Types Located On-Site (If Applicable)
  - Shoreline Classification (If Applicable)
- Sheet Index
- Date Plans Were Prepared
- Vicinity Map (Include North Arrow, Scale, and pinpoint site location)
- Name, Address, Phone Number, & Email Address of the Applicant, Owner, Engineer, & Surveyor (include seals)

## **SITE PLAN SHEET**

- 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 (include seals)
- North Arrow, Graphic Scale (1"=50' or larger), & Legend
- Existing Lot Lines Within or Adjacent to the Project Site
- Site Ingress/Egress (existing and/or proposed)
- Elevations for each Proposed Multi-Family Building (include height and number of stories)
- Disposition of each Multi-Family Building on the Site (show setbacks from lot lines and other buildings)
- Lot Dimensions (length, width), Number/Letter Label, & Square Footage for each Lot
- Existing and Proposed Rights-of-Way (include dimensions & street name)
- Existing and Proposed Easements (include dimensions)
- Existing Critical Area Boundaries and Associated Buffers On-Site and Within 150ft. of Site
- Location of Recreation and Open Space (include perimeter dimensions and square footage)
- Location of Off-Street Parking including Parking Stall and Drive-Isle Dimensions
- Location of Bicycle Rack Spaces
- Location of existing and proposed utility lines and sewer lines, and water mains adjacent to or within the proposed

site.

- Location, name, and width of all existing and proposed street rights-of-way or easements within or adjacent to the proposed development.
- Frontage Improvements with Dimensions (if required)
- Refuse Bin Location (including screening details)
- Lighting Details (parking area)
- Contour Lines Throughout Site with 5-Foot Intervals

**LANDSCAPE PLAN SHEET**

- 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.
- Tree, Shrub, and Lawn Planting Details
- Location and Spacing of All Trees, Shrubs, and Plants (including existing trees to be preserved)
- Irrigation Details (if required)
- Parking Area Shading Calculation (see AMC 20.76.130)
- Dimensions for Each Landscape Area, Including Frontage, Lot Boundary, and Vehicle Accommodation Area Landscaping



# LAND USE DESIGN REVIEW

## COMMUNITY & ECONOMIC DEVELOPMENT

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<b>DESIGN REVIEW TYPE</b>			
<b>Type of Design Review</b>	<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Board	<b>Required Submittals</b> (Check All That Apply)	<input checked="" type="checkbox"/> Auxiliary Sheet (attached) <input type="checkbox"/> Design Standards Compatibility Matrix (attached)
<b>SITE INFORMATION</b>			
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		<b>Use Classification No.</b>	1.340
	<b>OWNER</b>	<b>APPLICANT</b>	<b>CONTACT</b>
<b>Name</b>	Grandview North LLC	Grandview North LLC	Cascade Surveying & Eng.
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<b>Name</b>	Glenn C Wells A.I.A.	Cascade Surveying & Eng.	Cascade Surveying & Eng.
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