

## <u>LAND USE APPLICATION</u> Community Development Department

102 Rochester St. W. p: 360.446-2265 PO Box 258 f: 360.264.2720

Rainier, WA 98576 <u>www.cityofrainierwa.org</u>

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		For Office Use O  Deposits:  Receipt #:		TOTAL FEES:
PROJECT.				
Name/Description: Physical Address:			Parcel #:	
PROPERTY OWNER.				
Name:  Mailing Address:  E-mail:			Phone: ZIP:	
APPLICANT/AGENT.				
Name: Mailing Address: E-mail:			Phone: ZIP:	
Owner  TYPE OF APPLICATION. Plea	Applicant/Ag		r applicable fees.	
Physical Development Pern Design Standards R Site Development F  Use Permits Administrative Use Home Occupation Conditional Use Public Facilities Use  Public Facilities Use  Binding Site Plan — Boundary Line Adju Lot Combination/Se	eview Permit  Ame LDR ivision  Preliminary Final estment egregation	critical Area Reporture SEPA Threshold Dewalver – Critical Area Reporture Sepa Threshold Dewalver – Critical Area Environmental Important Statement Review Mitigation Plan Resemble Mezone Text Amendment Master Planned Dewalver Plan Amendment	t Review ttermination rea Report pact view Interpr	Administrative Variance Appeal of an Administrative or Planning Commission Decision Extension Request Reasonable Use Determination Variance  retations of the LDRs Administrative Interpretation Zoning Decision  Requests Annexation Pre-Application Conference Request
Density Transfer PrShort Plat – PrelimiShort Plat – FinalSubdivision – Prelimi	nary			Right-of-Way Vacation City Council Reconsideration

to the City. At a minimum, one hard copy of all m submittal requirements are included. Have you attached the following?	aterials	s is req	uired for an application to be found complete. Please ensure all
require multiple fees. Additionally, some response to Applicable Review Standard outlined in the Rainier Municipal Code. If a intended as a reference to assist you in subsetting the standard outlined in the Rainier Municipal Code.	equests or more s. All a pre-app bmitting filing fe	s requir inform applicat plication g a com	ions require response to applicable review standards, which are in conference is held, the City Planner may provide you a checklist aplete application.  **not constitute a complete application. Plans and other material**
	t the fo	regoin	d representative to act for the property owner or am the owner g statements and answers herein contained and the information est of my knowledge and belief.
Signature of Owner or Authorized Applicant/Agent			Date
Name Printed			Title
State of  County of  Signed or attested before me on	_) )	by	
			(N. J. C. J. M. C. J. M.
			(Notary Signature) (Print Name:)
			NOTARY PUBLIC in and for the State of Washington Residing at
			My appointment expires:

**SUBMITTAL REQUIREMENTS.** One copy of the application package (this form, plus all applicable attachments) should be submitted

Land Use Application 2 Effective 05.01.2018