



**Permit Center**  
210 Lottie Street  
Bellingham, WA 98225  
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TO BE COMPLETED BY STAFF	
Date Received	11-24-09
Case Number	<del>MS 2009-00080</del> ZON 2009-00014

## COMPREHENSIVE PLAN AMENDMENT DOCKET APPLICATION FORM

Use this form to request docketing of a proposed comprehensive plan amendment. Applications may be submitted at any time but must be received by **December 1** of each year for review during the following year. Please complete the following and attach additional pages as needed. Incomplete applications will not be accepted.

1. An application must include the following materials:

- Docket Application Form.
- Fee payment calculated at 10% of the total comprehensive plan amendment fee.\* The fee is not refunded if the proposal is not docketed. The fee is calculated as follows:

(a) General comprehensive plan amendments:  $\$1,849 \times 0.1 = \$185$  due at docket application.

OR

(b) Site specific comprehensive plan amendments:  $\$1,849$  base fee +  $\$213$  per acre over first acre ( $\$12,750$  max.)  $\times 0.1 =$  fee due at docket application. Final fees will be calculated at the time the application is submitted.

\*Recognized Neighborhood Associations are exempt from this fee.

2. Applicant: RALPH BLACK Phone: 360/739-4160  
Address: PO Box 28340  
City/State/Zip: Bellingham / WA / 98228  
Email: TRAVISXBLACK@GMAIL.COM Fax: 360/647-7979

Name of contact if applicant is a group: \_\_\_\_\_

I have read the application materials and acknowledge that if the proposed amendment is approved by the City Council for inclusion in the annual docket, a complete Comprehensive Plan Application must be submitted within **30 days of the Council's docket decision** in order to continue to final review. Failure to submit a complete application prior to the deadline will result in removal from the docket.

Applicant signature: Ralph Black

3. If the proposal includes general Comprehensive Plan or Neighborhood Plan amendments that are not site-specific, please describe your amendment proposal as specifically as possible and attach it to this form. If specific wording changes are proposed, show the changes in strikethrough and underline format. Reference the location in the Plan where the change is proposed.

1 10-P2  
OP-1

**4. Explain why the amendment is needed.**

To comply with the concomitant agreement signed by the City of Bellingham

**5. Describe why the amendment will result in long-term benefits to the community as a whole and is in the best interest of the community.**

Allow for planning of a pedestrian oriented community with integrated trail systems and live work space.

**6. Describe how the proposed amendment to the plan is supported by or consistent with the existing goals and policies of the comprehensive plan and the State Growth Management act.**

The newly annexed King Mt. area is an urban village with compact development that reduces the reliance on cars and increases walk ability open space and mixed use type housing.

**7. Have circumstances changed sufficiently since the adoption of the comprehensive plan and/or neighborhood plan to justify the proposed change? If so, please explain.**

Yes. The city's new infill and urban village ordinances and associated areas would now apply.

**8. Have the underlying assumptions found in the comprehensive plan and/or neighborhood plan upon which the land use designation, density or other provisions are based changed, or is new information available which was not considered at the time that plan was adopted? If so, please explain.**

Yes. The information new requires an urban village plan to be developed and adopted.

**9. Does the proposed amendment promote a more desirable land use pattern for the community as stated in the goals and policies in the comprehensive plan? Are there environmental constraints (such as wetlands, steep slopes, significant stands of trees, etc.) present on the site to such a degree that development of the site is economically or physically unfeasible under the existing land use designation? Please explain.**

Yes. The site would be developed consistent with an approved urban village plan. There are no environmental constraints in the area.

**10. What impacts would the proposed amendment to the plan have on the current use or other properties in the vicinity? What measures could be taken to ensure compatibility with the uses of other property in the area?**

Properties are undeveloped and would be developed consistent with this plan.

10-P2  
OP-2

PROPERTY INFORMATION

Complete this section if the proposal includes a site-specific amendment to a comprehensive plan land use designation.

1. Property Owner

Name: RALPH, SUSAN, MIKE & HEATHER BLACK: Alliance Properties, LLC Phone: 360/739-4160
Address: PO Box 28340
City/State/Zip: Bellingham WA / 98228
Email: TRAVISXBLACK@GMAIL.COM Fax: 360/647-7979

2. Owner's Authorized Agent/Contact

Name: RALPH BLACK Phone: 360/739. 4160
Address: PO Box 28340
City/State/Zip: Bellingham WA / 98228
Email: TRAVISXBLACK@GMAIL.COM Fax: 360/647-7979

3. Assessor Parcel Numbers: 380307363476, 380307344430, 380307370378, 380307416495, 380307435364, 380307504475, 380307498346, 380308075527, 38030804244

4. Attach a map (8.5" x 11") identifying the property included in the proposed amendment and showing parcels and streets located within and adjacent to the site.

5. Neighborhood Name: King Mt. Area Number: 13

Current Comprehensive Plan Land Use Designation: Residential Multi High Density

6. Proposed Comprehensive Plan Land Use Designation: Urban Village

7. Current Zoning: Residential Multi High Density

8. Proposed Zoning: Urban Village

Property Owner(s)

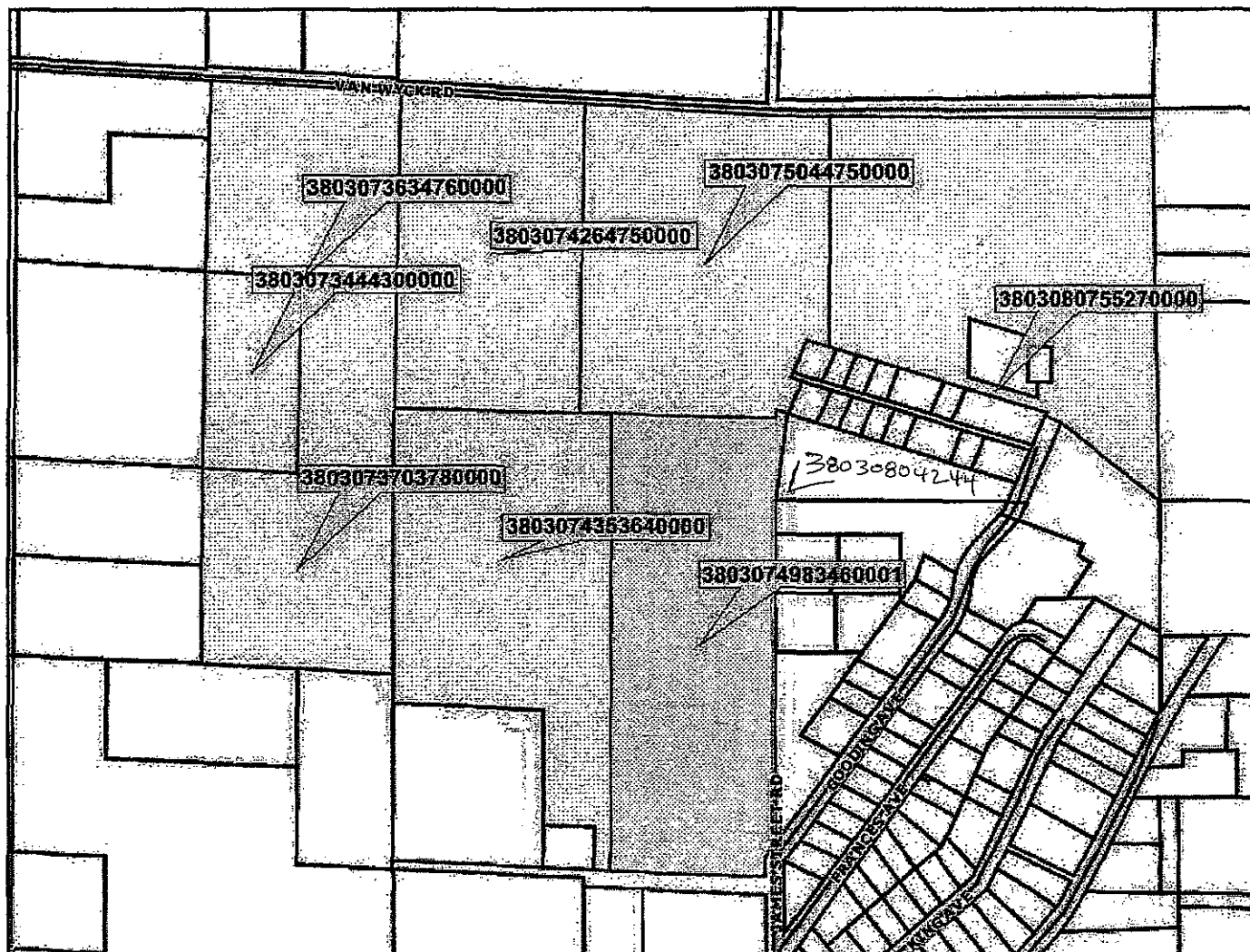
I am the owner of the property described above or am authorized by the owner to sign and submit this application. I grant permission for the City staff and agents to enter onto the subject property at any reasonable time to consider the merits of the application and post public notice. I certify under penalty of perjury of the laws of the State of Washington that the information on this application and all information submitted herewith is true, complete and correct.

I also acknowledge that by signing this application I am the responsible party to receive all correspondence from the City regarding this project including, but not limited to, expiration notifications. If I, at any point during the review or process, am no longer the Applicant for this project, it is my responsibility to update this information with the City in writing in a timely manner.

Signature by Owner/Applicant/Agent: [Handwritten Signature]

Date: 11/24/09

City and State where this application is signed: Bellingham WA
City State



	<p>2200 Rimland Drive, Suite 110          Bellingham, Washington 98226          Phone: (360) 647-8155          Fax: (360) 738-0298</p>	<p>Sentry Dynamics, Inc. and it's customers make no representations, warranties or conditions, express or implied, as to the accuracy or completeness of information contained in this report.</p>	<p>geoAdvantage          www.digitshare.org/208.777.1252</p>
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