



**Permit Center**

210 Lottie Street, Bellingham, WA 98225

Phone: (360) 778-8300 Fax: (360) 778-8301 TTY: (360) 778-8382

Email: [permits@cob.org](mailto:permits@cob.org) Web: [www.cob.org/permits](http://www.cob.org/permits)

**Land Use Application**

Check all permits you are applying for in the boxes provided. Submit this application form, the applicable materials listed in the corresponding permit application packet(s) and application fee payment.

<input type="checkbox"/> Accessory Dwelling Unit <input type="checkbox"/> Binding Site Plan <input type="checkbox"/> Clearing Permit <input type="checkbox"/> Conditional Use Permit <input type="checkbox"/> Critical Area Permit <input type="checkbox"/> Minor Critical Area Permit <input type="checkbox"/> Design Review <input type="checkbox"/> Grading Permit <input type="checkbox"/> Home Occupation <input type="checkbox"/> Institutional <input type="checkbox"/> Interpretation <input type="checkbox"/> Landmark – Historic Certificate of Alteration <input type="checkbox"/> Legal Lot Determination <input type="checkbox"/> Nonconforming Use Certificate	<input type="checkbox"/> Parking Adjustment Application <input type="checkbox"/> Planned Development <input type="checkbox"/> Rezone <input type="checkbox"/> SEPA <input type="checkbox"/> Shoreline Permit <input type="checkbox"/> Shoreline Exemption <input type="checkbox"/> Subdivision-Short Plat/Lot Line Adjustment <input type="checkbox"/> Subdivision-Preliminary Plat <input type="checkbox"/> Subdivision-Final Plat <input type="checkbox"/> Variance <input type="checkbox"/> Wireless Communication <input type="checkbox"/> Zoning Compliance Letter <input type="checkbox"/> Other: _____	<b>Office Use Only</b> Date Rcvd: _____ Case #: _____ Process Type: _____ Neighborhood: _____ Area Number: _____ Zone: _____ Pre-App. Meeting: _____ Concurrency: _____
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**Project Information**

Project Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Tax Assessor Parcel Number (s) \_\_\_\_\_

Project Description \_\_\_\_\_

**Applicant / Agent**

Primary Contact for Applicant

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Owner (s)**

Applicant

Primary Contact for Applicant

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**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 inspection 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 \_\_\_\_\_, Date \_\_\_\_\_

City and State where this application is signed: \_\_\_\_\_, \_\_\_\_\_  
City State



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**CONDITIONAL USE PERMIT - SUBMITTAL REQUIREMENTS**  
**(PROCESS TYPE III-A)**

(PLEASE PRINT CLEARLY OR TYPE IN BLUE OR BLACK INK)

**Pre-Application Steps:**

- Pre-application conference or waiver, if applicable – see pre-application form
- Pre-application neighborhood meeting or waiver
- Transportation Concurrency Certificate, if applicable

**Application Requirements:**

- A completed Land Use Application form
- All of the materials and information required by this form
- SEPA Checklist, if applicable
- Application fee payment
- Mailing list and labels for 500 foot radius

**Project Data:**

*Your application will be judged against the following criteria. Please answer these questions thoughtfully and attach additional pages as needed.*

1. Address of Subject Property \_\_\_\_\_
2. Nature of Request (be specific) \_\_\_\_\_  
\_\_\_\_\_
3. Site area of subject property is \_\_\_\_\_ square feet
4. Total gross floor area of new construction is \_\_\_\_\_ square feet
5. Legal Description of Property \_\_\_\_\_  
\_\_\_\_\_

**Explain why the proposed use will:**

6. Promote the health, safety and general welfare of the community \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Satisfy the purpose and intent of the land use zone in which it is located \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Not be detrimental to the surrounding neighborhood \_\_\_\_\_  
\_\_\_\_\_

**Explain how the proposed use will:**

9. Be harmonizing with the general policies and specific objectives of the Comprehensive Plan  
(ask Planning Staff for assistance) \_\_\_\_\_  
\_\_\_\_\_

10. Enable the continued orderly and reasonable use of adjacent properties by providing a  
means for expansion of public roads, utilities, and services \_\_\_\_\_  
\_\_\_\_\_

11. Be designed so as to be compatible with the essential character of the neighborhood \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Be adequately served by public facilities and utilities including drainage provisions \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. Not create excessive vehicular congestion on neighborhood collector or residential access  
\_\_\_\_\_  
\_\_\_\_\_

14. Not create a hazard to life, limb, or property resulting from the proposed use, or by the  
structures used therefore, or by the inaccessibility of the property or structures thereon \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15. Not create influences substantially detrimental to neighboring uses. "Influences" shall  
include, but not necessarily be limited to: noise, odor, smoke, light, electrical interference,  
and/or mechanical vibrations \_\_\_\_\_  
\_\_\_\_\_

16. Not result in the destruction, loss, or damage to any natural, scenic, or historic feature of  
major consequence \_\_\_\_\_  
\_\_\_\_\_

## **PRE-APPLICATION NEIGHBORHOOD MEETING REQUIRED PRIOR TO APPLICATION**

See Neighborhood Meeting Instructions form.

### **PLANS REQUIRED**

Submit five (5) full sets of the following plans (if larger than 11" x 17") and one (1) 8 ½" x 11" reduction of suitable quality for copying. Provide scaled plans. Plans must be of an appropriate size and standard scale to show the required information.

A. Site Plan(s):

1. Scale shall be appropriate but in no case less than 1" = 40' scale.
2. The property lines of subject parcel.
3. All proposed and existing structures, including pavement areas, parking design and location of storm water facilities.
4. If the project involved new construction, show existing and proposed topography lines.

B. Landscape Plan:

1. A general landscaping plan showing the location of existing vegetation, any trees to be removed, and proposed types and locations of new landscaping.

C. Floor Plans for all existing and proposed buildings:

1. Scale shall be 1/8"=1' or 1/4"=1' or larger standard scale.

D. Building Elevations (side views) for all proposed structures or additions including:

1. Show existing and proposed grade levels and label height of building above grade (see height definitions in BMC 20.20)
2. General types of proposed exterior materials.

E. Location, size, and type of any proposed signs.

F. Plans, photos, perspective views or other materials that illustrate how the proposal satisfies the criteria for Conditional Use approval.

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### **PUBLIC HEARING**

The applicant or an authorized representative must be present at the public hearing.

# MAILING LIST INSTRUCTIONS:

As you get ready to prepare your labels keep the following checklist in mind:

- The information was acquired from the Assessor's office or database
- Addresses for the following members have been included on the label sheet
  - Property Owner       Applicant / Contact for Proposal       Bellingham Herald
  - All property owners within the required 500' radius (100' for Home Occupation Applications)
  - Applicable Mayor's Neighborhood Advisory Commission Representatives
  - Applicable Neighborhood Association Representatives (This information can be found at
  - <http://www.cob.org/documents/planning/applications-forms/nbrhd-media-notification-list.pdf>
- Mailing information has been printed on Avery 5160 labels (*see attached example*)
- All of the information **completely fits** on a single label
- Notarized **Address Information Verification form** has been completed

**NOTE:** Errors in mailing labels may result in process delays and re-notice fees.

## Obtain Property Ownership Information from the Whatcom County Assessor's Office

- The Assessor's Office is located on the first floor of the Whatcom County Courthouse, 311 Grand Avenue, Bellingham, 360-676-6790.
- Bring enough information to identify all of the property in the project site, such as tax parcel numbers, legal descriptions, address(es) or boundary on a plat map. Assessor's Office staff can help you find the Assessor's map(s) containing the project parcel(s).
- Utilize the Assessor's map to measure the required ownership notice distance (listed on the application) and record the parcel number for each property within or partially within the required distance of 500 feet (*100 feet for Home Occupation*) from the boundary of the project parcel. If the owner of the project property owns other property within the notice distance but not included in the project site, contact the Planning Division to determine whether the notice radius must be increased.
- Record the property owner's name and mailing address by accessing each parcel number via the computer terminals at the Assessor's Office or through the Internet by accessing the database under "Real Property Search" at [www.whatcomcounty.us/assessor/index.jsp](http://www.whatcomcounty.us/assessor/index.jsp). Click on the parcel number in the first data screen to bring up a screen with the owner's full address and zip code. The maps are also available at this site if you wish to check a parcel number.
- If the site is a condominium, include the owner of each unit.

## Print addresses on Avery 5160 labels

- Labels **must** include the address and fit on one Avery 5160 label:
- Please **DO NOT**
  - o **Repeat names** on the mailing list. If someone is listed as owning more than one property, only list the owner's name and address once on the mailing list.
  - o **List** the tax parcel number on the labels

## Address Information Verification form:

Form must be notarized and include a copy of the parcel numbers and property owner's name and mailing address information attached.



# Address Information Verification

I / We \_\_\_\_\_, being duly sworn on oath, hereby certify that I have familiarized myself with the rules and regulations with respect to preparing and filing this application, that the foregoing statements and the statements contained in any papers or plans submitted herewith are true to the best of my knowledge and belief, and that the list of names and addresses of property owners within 500' of the subject is complete and correct according to the records of the Whatcom Assessor's Office as of \_\_\_\_\_, 20 \_\_\_\_ . I understand that if this list does not contain accurate information as listed in the Assessor's Office, this application may be successfully challenged and result in the necessity to reapply.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

STATE OF WASHINGTON )  
) SS  
COUNTY OF WHATCOM )

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public:

\_\_\_\_\_  
**Name Printed**

\_\_\_\_\_  
My appointment expires

<p><i>Avery 5160 labels or in Avery 5160 label format</i></p>	<p><i>Font – Arial, 11</i></p>	
<p><b>Property Owner</b> Address City, State, Zip</p>	<p><b>Applicant</b> Address City, State, Zip</p>	<p><b>MNAC Representative</b> Address City, State, Zip</p>
<p><b>Neighborhood Association Rep</b> Address City, State, Zip</p>	<p>Bellingham Herald Community News Department 1155 N. State St. Bellingham, WA 98225</p>	<p><b>All Property Owners within the specified radius:</b></p>
<p>First name Last name Address City, State, Zip</p>	<p>First name Last name Address City, State, Zip</p>	<p>First name Last name Address City, State, Zip</p>





**TYPE III PROCESS**  
(Hearing Examiner Decision)

