



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"/> Critical Area Exemption <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: _____	<p>Office Use Only</p> Date Rcvd: _____ Case #: _____ Process Type: _____ Neighborhood: _____ Area Number: _____ Zone: _____ Pre-App. Meeting: _____ Concurrency: _____
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Project Address: _____

Tax Assessor Parcel Number(s): _____

Project Description: _____

Applicant/Agent Primary Contact for Application

Name: _____ **Phone:** _____

Address: _____ **Fax:** _____

City, State, Zip: _____ **E-mail:** _____

Owner(s) Applicant Primary Contact for Application

Name: _____ **Phone:** _____

Address: _____ **Fax:** _____

City, State, Zip: _____ **E-mail:** _____

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



HOME OCCUPATION PROCEDURE AND REQUIREMENTS
(Process Type II) – BMC20.10.45

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

Application Requirements:

- A completed Land Use Application form
- Project Data below
- Site Plan, see requirements following Project Data
- Application fee payment
- Mailing list and labels for 100 foot radius

Project Data:

1. Address of Subject Property _____

2. Describe in detail the type of home Occupation proposed (business type, product produced, hours of operation, expected number of clientele per day of week, and type and frequency of deliveries)

3. If a product will be produced or sold in the occupation, how and where will the product be sold or distributed? _____

4. Number of employees: _____ Number of off-street parking spaces: _____

5. Size and location of sign, if any _____

6. Will there be any visible exterior evidence of the home occupation such as changes to the house or yard? _____

7. What impact will your proposed home occupation have upon the character and quality of the neighborhood, such as visual appearance, odors, noise, parking, traffic, or similar effects?

SELECT ONE: High Moderate Minimal

Explain: _____

Site Plan Requirements

Please attach with the application, a site plan (map) drawn in black ink, no larger than 11" x 17" showing the following:

1. The lot, clearly dimensioned
2. The location of the main building in relation to the property
3. Where the occupation would be located within the main building
4. The adjacent street(s)
5. The location and dimension of all off-street parking spaces
6. A north indicator

Bellingham Municipal Code (BMC) 20.10.045 – Home Occupations

Please review the following regulations prior to submittal of your application.

A. Authority

The Director is authorized to approve home occupation permits consistent with the regulations and provisions herein.

B. Regulations

1. Home occupations must be conducted within the main residential building by the occupant. The occupation may include such uses as personal, business, or professional services, or offices and repair shops for household items; however, veterinarian offices and clinics, hospitals, mortuaries, major and/or minor automotive repairs, eating and/or drinking establishments, stables, or kennels are prohibited.
2. There shall be no exterior modification of the building in order to accommodate the occupation, nor shall there be any outward manifestation of the occupation. No home occupation shall be located anywhere but in the main building. The primary use of the premises shall be residential and at no time shall the home occupation be the predominant use.
3. No more than one (1) assistant or employee, in addition to the resident(s), may engage in the occupation on the premises. One off-street parking space shall be provided for the use of the employee.
4. A flat, unlighted sign flush against the building is allowed. Such sign shall not exceed 2 square feet in area. The sign shall state only the name/address/phone number of the occupant and the occupation.
5. No retail sales of goods in connection with the Home Occupation shall occur on or about the subject premises.

C. Permit Procedure

1. **Exempt.** If the home occupation is limited to those activities, which involve bookkeeping and office for a business conducted elsewhere, has no outward manifestation of the business, and no customers or employees coming to the home; it shall be considered "exempt." An exempt home occupation shall be considered an Accessory Use and permitted outright with no land use permit required.
2. **Home Occupation Permit.** Applications are decided using Process Type II.

MAILING LIST INSTRUCTIONS

Using the information from the Whatcom County Assessor's Office, applicants must **submit** an accurate mailing list, which includes the name, mailing address, and parcel number of each property owner within 500 feet (100 feet for Home Occupation Applications) of the exterior boundary of the subject property, AND typed mailing labels. Errors in mailing labels may result in process delays and re-notice fees. The following information should provide you with the necessary resources.

- Obtain Property Ownership Information from the Whatcom County Assessor's Office**
 - The Assessor's Office is open Monday –Friday 8:30 – 4:30 and 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. 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** (or in Avery 5160 label format) – *Example provided*
 - Labels must include the address of the:
 - Owner
 - Applicant / Contact for the proposal
 - All property owners with the required 500 foot radius (100 feet for Home Occupation Applications)
 - Bellingham Herald
 - Applicable Mayor's Neighborhood Advisory Commission (MNAC) representative
 - Applicable Neighborhood Association(s) representative.

Alabama Hill	Cordata	Irongate	Roosevelt	South Hill
Barkley	Cornwall Park	King Mountain	Samish	Sunnyland
Birchwood	Edgemoor	Lettered Streets	Sehome	Whatcom Falls
CBD	Fairhaven	Meridian	Silver Beach	WWU
Columbia	Happy Valley	Puget	South	York

- The addresses should fit on one **Avery 5160 label** - format example provided.
- Please **DO NOT**:
 - **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.
 - **Do not list the tax parcel number on the labels**

- Submit the notarized Address Information Verification with a copy of the parcel numbers and property owner's name and mailing address information attached.**

Contact Planning Division staff at the Permit Center, Bellingham City Hall, 210 Lottie Street (360-778-8300) to determine which neighborhood representatives and associations must be added to your mailing list or to obtain addresses. This information can also be found on the city's website at

<http://www.cob.org/documents/planning/applications-forms/nbrhd-media-notification-list.pdf>



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 here/with 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 _____

Adding Neighborhood Representatives and Associations

The following addresses must be added to the mailing list for the neighborhood in which the project is located and any neighborhood within the required notice distance of 500 feet from the boundary of the project site:

1. The Mayor's Neighborhood Advisory Commission member; and
2. The neighborhood association president.

Feel free to contact Planning Division staff at the Permit Center, Bellingham City Hall, 210 Lottie Street (360-778-8300) to determine which neighborhood representatives and associations must be added to your mailing list or to obtain addresses. This information can also be found on the city's website at <http://www.cob.org/documents/planning/applications-forms/permit-center-publications/nbrhd-media-notification-list.pdf>.

The following neighborhoods are within the required notice radius: (check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Alabama Hill | <input type="checkbox"/> Happy Valley | <input type="checkbox"/> Sehome |
| <input type="checkbox"/> Barkley | <input type="checkbox"/> Irongate | <input type="checkbox"/> Silver Beach |
| <input type="checkbox"/> Birchwood | <input type="checkbox"/> King Mountain | <input type="checkbox"/> South |
| <input type="checkbox"/> CBD | <input type="checkbox"/> Lettered Streets | <input type="checkbox"/> South Hill |
| <input type="checkbox"/> Columbia | <input type="checkbox"/> Meridian | <input type="checkbox"/> Sunnyland |
| <input type="checkbox"/> Cordata | <input type="checkbox"/> Puget | <input type="checkbox"/> Whatcom Falls |
| <input type="checkbox"/> Cornwall Park | <input type="checkbox"/> Roosevelt | <input type="checkbox"/> WWU |
| <input type="checkbox"/> Edgemoor | <input type="checkbox"/> Samish | <input type="checkbox"/> York |
| <input type="checkbox"/> Fairhaven | | |
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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
- Address for the following members have been included on the label sheet:
 - The property owner
 - The applicant
 - Every property owner within the required radius of 500 feet
 - The Mayor's Neighborhood Advisory Commission (MNAC) representative
 - The appropriate neighborhood association(s) representative
 - The Bellingham Herald (*address provided on the sample label page*)
- The mailing information has been printed on Avery 5160 labels (or another similar brand)
- All of the information **completely fits** on the label
- Mailing information has been notarized

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

