



Permit Center

210 Lottie Street, Bellingham, WA 98225

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

Email: permits@cob.org Web: 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"/> Short Term Rental <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: _____	Office Use Only 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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SUBDIVISION VARIANCE APPLICATION

(Process Type III-A and III-B)

This application form is for variances pursuant to Chapter 23.48 BMC.

Application Submittal Requirements:

- A completed Land Use Application form.
- A completed Subdivision Variance Application form including all information required by this form.
Identification of requested variance(s).
- Written response to the variance criteria pursuant to BMC 23.48.040 for each variance requested.
- Application fee payment.
- Concurrent submittal of a land division application.

Variance Procedures

Subdivision variances are Type III-A or Type III-B processes subject to BMC 21.10.120 and shall be submitted in conjunction with an application for a land division proposal. In all situations, the hearing examiner will consider and make the final permit decision for all land division applications, except binding site plans, when a subdivision variance is proposed.

The applicant is responsible for demonstrating, in writing, how the requested variance meets the variance criteria pursuant to BMC 23.48.040.

Required plans

The requested variance shall be identified on the plans submitted with the land division application.

NOTE:

1. An approved variance shall be valid for the same period of time as the associated decisions for the land division.
2. This is a quasi-judicial proceeding and therefore, the applicant should not discuss the variance request or any associated land use application with the Hearing Examiner prior to the public hearing.
3. The applicant or an authorized representative must be present at the public hearing.

Project Data:

Name and/or permit number of land division associated with this request:

Requested variances.

Provide a list of the requested variances, which includes the following information for each requested variance:

Variance #1 (Requested variance):

Code provision/regulation: BMC _____

Applicant's response to variance criteria: _____

Variance #2 (Requested variance):

Code provision/regulation: BMC _____

Applicant's response to variance criteria: _____

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. 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.

<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 III PROCESS
(Hearing Examiner Decision)

