



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.

Accessory Dwelling Unit Binding Site Plan Clearing Permit Conditional Use Permit Critical Area Permit Minor Critical Area Permit Design Review Grading Permit Home Occupation Institutional Interpretation Landmark – Historic Certificate of Alteration Legal Lot Determination Nonconforming Use Certificate	☐ Parking Adjustment Applic ☐ Planned Development ☐ Rezone ☐ SEPA ☐ Shoreline Permit ☐ Shoreline Exemption ☐ Subdivision-Short Plat/Lot Adjustment ☐ Subdivision-Preliminary Pl. ☐ Subdivision-Final Plat ☐ Variance ☐ Wireless Communication ☐ Zoning Compliance Letter ☐ Other:	Date Ro Case #: Process Line Neighbor Area Nu Zone: _ Pre-Ap.	syd:
Project Information			
Project Address			Zip Code
Tax Assessor Parcel Number (s)			
Project Description			
Applicant / Agent Name Mailing Address	Primary Contact for Applic	ant	
City	Stat	e Zip C	ode.
Phone	Email	e zip C	
	EIIIaII		
Owner (s) Applicant Name	□ Primary Contact for Appl	icant	
Mailing Address			_
City	Stat	e Zip C	ode
Phone	Email		
Property Owner(s)			
I am the owner of the property described ab- for the City staff and agents to enter onto the public notice. I certify under penalty of perju- information submitted herewith is true, comp I also acknowledge that by signing this appli	e subject property at any reason iry of the laws of the State of Wa plete and correct.	able time to consider the shington that the inforn	ne merits of the application and post nation on this application and all
project including, but not limited to, expiration Applicant for this project, it is my responsibile	n notifications. If I, at any point ity to update this information with	during the review or ins n the City in writing in a	spection process, am no longer the timely manner.
Signature by Owner/Applicant/Agent		, Г	Date
City and State where this application is sign	ed:		State



Permit Center

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WIRELESS COMMUNICATION FACILITY

BMC 20.13 (Process Type I, II, and III-A)

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

<u>Pre</u>	-Ap	pplication Steps:		
		Pre-Application conference or waiver (Type II and III-A only)		
		Pre-Application neighborhood meeting or waiver (Type II and III-A only)		
<u>Apr</u>	olica	ation Requirements:		
		A completed Land Use Application Form		
		All of the materials and information required by this form		
		Mailing list and labels for 500 foot radius		
Pro	jec	t Data:		
1.	Ту	pe of Application:		
		Wireless Communication Facility (WCF) – Permit Only		
		No SEPA checklist required (Process Type I) OFBA should introduce (Process Type II)		
		□ SEPA checklist required (Process Type II)		
		WCF Permit through Conditional Use Permit Application (Process Type III-A)		
		WCF Permit through Planned Development Application (Process Type II)		
2.	ls	a special exception requested under BMC 20.13.140?	Yes □	No □
3.		the proposal on a site that has been designated as a local landmark under MC 17.80?	Yes □	No □
4.	ls	the site on the state or federal register of historic places?	Yes □	No □
5.	ls	the proposal located within a design review district?	Yes □	No □
I / V 20.		hereby make application for a wireless communication facility under the pr	rovisions	s of BMC
6.	Pr	operty size:		
7.	If a	a lease is proposed for a portion of the property, provide the description and size	of the a	rea to be

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SU	SUBMITTAL CHECKLIST:			
	Application form(s).	All requested information must be provided.		
	Filing fee	See separate Fee Schedule.		
	Mailing list and labels	Required for Process Type II or III-A.		
	SEPA Environmental Checklist	If required.		
	Vicinity map	Show location of the property.		
	Site plan	Provide two (2) 11" x 17" copies of the site plan. Provide all information required on the attached Site Plan Checklist. Include the owner's property boundary and site lease area.		
	Facility design	 Provide two (2) 11" x 17" copies of scaled elevation drawings showing: Existing or proposed support structure or building with antenna installation and dimensioned heights Equipment cabinets or buildings with dimensions Fencing Buffering and screening Architectural treatment Lighting rods, if proposed Anti-climbing devices Colors and finishes Other features necessary to show compliance with the applicable standards. 		
	Plan reductions	Provide 8.5" x 11" reduction of site and facility design plans.		
	Photo-simulations	Show how the proposed facility will appear from adjacent properties. Include views from residential areas, public properties and public streets.		
	Authorization to attach	If the facility will be attached to an existing support structure or building, submit a valid agreement for attachment or collocation.		
	A location evaluation study	If the facility includes a new support structure, submit the information required in BMC 21.13.150 (E.)		
	Engineer's report	Submit the information required in BMC 21.13.150 (G.)		
	FCC License	Proof of license, if applicable.		
	FAA Aeronautical Study	Provide a copy of the FAA findings, if applicable.		
	Declaration form	Complete attached declaration form.		
	Narrative statement	Provide a written response to the questions on the attached Narrative Statement form.		
	Other applications	Submit any other required land use applications applicable for the site (planned development, conditional use permit, design review, westland, shareline, landmark alteration, etc.)		

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design review, wetland, shoreline, landmark alteration, etc.)

<u>Sι</u>	ubmittals Required With Building Permit Application:
	Surety to guarantee cost of antenna and/or tower removal as required by BMC 20.13.060 M. (Please use attached Agreement and Surety Bond format.)
	If the facility is on a leased site, a copy of the lease agreement showing that it does not preclude the site owner from entering into leases on the site with other providers.
	The building permit shall require, prior to final inspection, submittal of a maintenance bond, assignment of funds or other financial guarantee acceptable to the City, at 50 percent of the value of landscaping installation (including labor and materials.) The surety shall be in effect for 2 years from the date of planting.
NA	ARRATIVE STATEMENT
	ease provide a written narrative, answering the following questions. Key your response to the estion number.
1.	Describe why the proposed site is the most preferred site available under the criteria in BMC 20.13.050. List other sites that were investigated and explain why potential sites with a higher priority level could not be used.
2.	If the application includes a new support structure, explain why antennas could not be attached to existing structures instead of constructing a new support structure. Does the structure allow for collocated antennas?
3.	Are lights required by FAA?
4.	Does the facility include generators or air conditioning equipment? Provide noise level information confirming that the facility meets State noise standards under WAC 173.60. (Copies of WAC 173.60 available on request.)
5.	Explain why the facility is at the minimum height and bulk necessary to function satisfactorily.
6.	What impact will the project have on views from adjacent residential and public properties and from public streets? How will negative impacts be minimized?
7.	How will attached antennas and accessory structures/equipment be screened or designed so as to have minimal visual impact on the structure to which they are attached and its site?
8.	If the application includes a request for a special exception under BMC 20.13.140, provide the following information:
	□ Describe the exception requested.
	□ What alternative locations and designs have been investigated and why were they rejected?
	Why would adherence to the development standards in BMC 20.13 result in a physical barrier, which would block signal reception or transmission or prevent effective communication?

the greatest extent possible?

reduction?

☐ How is the obstruction or inability to receive a communication signal the result of factors beyond the property owner's or applicant's control? Provide supporting information.

□ Why will the proposed facility minimize negative visual impacts on adjacent residential uses to

□ If reduced setbacks are requested, how will screening or camouflaging be used to mitigate the

CITY OF BELLINGHAM SITE PLAN SUBMITTAL REQUIREMENTS AND CHECKLIST

Provide a site plan containing the following information. This checklist is divided by type of development. Provide the information under each heading that applies to your project.

The Planning and Community Development Department may require additional information when necessary to evaluate the proposal.

Please contact the Planning and Community Development Department at 360-778-8300 if you have any questions.

Include this information on all site plans:

Existing Site Conditions

- □ Scale, north arrow and date drawn. Scale shall be standard architectural or engineering. The scale must allow clear depiction of all required information and should be between 1" = 20' and 1" = 40'.
- All lot lines and site boundary dimensions.
- □ Location, dimensions, gross floor area height, and use of existing structures. Indicate all structures to be demolished.
- Distances between structures and property lines.

New Development

- □ Location, dimensions, and use of proposed buildings and structures.
- Distances between proposed buildings, parking areas and property lines.
- □ Location, dimension and number of parking spaces (including accessible spaces) and driveway access.
- All existing street and alley rights of way and abutting the site. Include street name, width of right of way.
- Location of existing and proposed utilities within the site such as sewer, water, gas and electricity.
- Location and type of proposed exterior lighting.
- Location of proposed signs.
- Land uses, lot lines and approximate location of structures and pavement on abutting properties.

Conceptual Landscaping Plan

- □ Scale (use the same scale as the site plan).
- □ Abutting street right of way to the curb.
- Rockeries, retaining walls and fences.
- Surface storm water facilities.
- Buildings and paving.
- Topographic contours.
- Wetlands, ponds, streams and proposed buffers.

- Existing vegetation to be retained.
- General location of proposed trees, shrubs and ground cover.
- □ Plant schedule providing the scientific name, common name, height, size, and spacing of proposed plants.

Environmentally Sensitive Areas on or Adjacent to the Site

- ☐ Areas of flood hazard (FEMA floodplain or floodway).
- Wetlands on site and within 100 feet of the project boundary.
- Streams, ponds or lakes on site and within 200 feet of the project boundary.
- □ Marine shoreline within 200 feet of the project site.
- Proposed wetland and water body setbacks and buffers.
- Conservation easements or other development restrictions affecting the site.

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WCF PERMIT DECLARATION

I	, owner of a proposed antenna to be located at:	
	hereby declares that it has ana	llyzed the
proposed antenna facility, and cert	ifies that, to the best of our knowledge, the antenna usag	je will not
interfere with other adjacent or neighbors	ghboring transmission or reception communications signa	als (other
than interference related to: (1) cor	mmunications signals in unlicensed frequency bands, (2)	forces of
nature, including but not limited to	over-water communications, high winds, solar effects or t	temperature
inversions, or (3) third party commo	unications equipment that is operating outside of technica	al
specifications for such equipment),	and that it will comply with all applicable federal and state	te laws and
regulations and with the Bellinghar	n Municipal Code.	
	(Company Name)	
	by	
OTATE OF WASHINGTON)		
STATE OF WASHINGTON)	SS	
COUNTY OF		
I certify that I know or have satisfac	ctory evidence thatis	the person
	I person acknowledged that he signed this instrument, on	
• •	the instrument and acknowledged it as the	
	of	to be
the free and voluntary act of such p	party for the uses and purposes mentioned in the instrum	ent.
·		
	DATE	
	DATE	
(Seal or Stamp)	SIGNATURE OF NOTARY PUBLIC	
	TITLE	
	DATE APPOINTMENT EXPIRES	

AGREEMENT AND SURETY BOND FOR WIRELESS COMMUNICATION FACILITY REMOVAL

The C	ITY OF BELLINGHAM, a first-class municipal corporation of the State of Washington, the
SECU	RED;, a Surety Company licensed to do
busine	ess in the State of Washington, the SURETY; and, a Corporation,
PRIN	CIPAL; do hereby agree as follows:
I.	THE PROJECT: The Principle agrees to remove the antennas it proposes to install at the following location:
	within 90 days of discontinuation of operation or abandonment of said antennas. The Principle
	also agrees to notify the Planning and Community Development Director of the City of
	Bellingham no less than 30 days prior to the proposed date of discontinuation or abandonment.
II.	FINANCIAL OBLIGATION OF THE SURETY: The maximum financial obligation of the Surety
	under this Bond is \$, the same being 150% of the total estimated cost
	of the project to remove the antennas.
III.	CONDITION OF THE BOND: the Surety agrees to either undertake and complete the project,
	or pay the Secured sufficient funds to administer and complete the project, including reasonable
	liquidated damages, attorney's fees and other reasonable costs incurred, on the happening of
	the following event:
	Failure of the Principle to complete the project in accordance with WCF Permit #
	and City of Bellingham Ordinance No. 1998-07-057, as amended, unless
	released from this obligation in writing by the City of Bellingham Director of Planning;
	2. Any material breach of the permit requirements referenced herein;
	3. Any failure of the Principle to comply with the requirements imposed by law or by any
	government agency with jurisdiction.
IV.	PROVIDED, HOWEVER, That
	1. It is understood and agreed that the obligation of the surety may be terminated by the
	surety giving sixty (60) days advance notice in writing to the Secured, and

2.

The liability of the Surety shall in no event exceed the aggregate penal sum of this Bond,

regardless of the number of Continuation Certificates executed by the Surety.

EXECUTED this	_ day of	, 20 for the
PRINCIPLE,		_
		SIGNATURE
EXECUTED this	day of	, 20 for the
SURETY,		
		SIGNATURE
		TITLE
		ADDRESS
ACCEPTED and APPR	OVED for the	SECURED, THE CITY OF BELLINGHAM, this _
day of		
		Mayor
		ATTEST:
		Finance Director
		APPROVED AS TO FORM:
		Office of the City Attorney
		ACCEPTED FOR ADMINISTRATION:
		Department Head

MAILING LIST INSTRUCTIONS:

Addresses for the following Property Owner All property owners of Applicable Mayor's Napplicable Neighbor	uired from the Assessor's office or databang members have been included on the I Applicant / Contact for Proposal within the required 500' radius (100' for Heighborhood Advisory Commission Rephood Association Representatives (This cuments/planning/applications-forms/nbrhd-memory)	abel sheet Dellingham Herald Iome Occupation Applications) resentatives information can be found at
All of the information con	een printed on <u>Avery 5160</u> labels (see at npletely fits on a single label mation Verification form has been com	, ,

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

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

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
 - 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.
 - 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

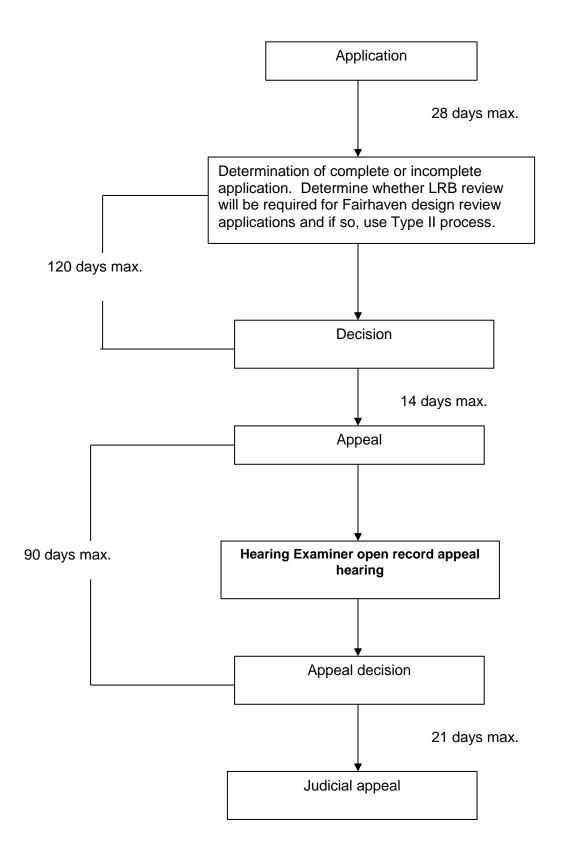
I / We			_, being duly sworn on oath, hereby cer	tify that I
have familiarized my	self with the rul	es and	regulations with respect to preparing an	d filing this
application, that the	foregoing stater	nents a	and the statements contained in any pap	ers or plans
submitted herewith a	are true to the b	est of m	ny knowledge and belief, and that the lis	t of names
and addresses of pr	operty owners w	vithin 50	00' of the subject is complete and correc	t according
to the records of the	Whatcom Asse	ssor's (Office as of,	20 <u> </u> . I
understand that if th	is list does not o	ontain	accurate information as listed in the Ass	essor's
Office, this application	on may be succe	essfully	challenged and result in the necessity t	o reapply.
	Signature:			
	Date:			
	Signature:			
	Date:			
STATE OF WASHIN	IGTON)		
	-0014) SS		
COUNTY OF WHAT	COM)		
SUBSCRIBED AND	SWORN TO BE	FORE	ME THIS DAY O	F
, 20				
,				
			Signature of Notary Public:	
			Name Printed	
			My appointment expires	

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

Parcel Number	Site Address	Property Owner	Mailing Address

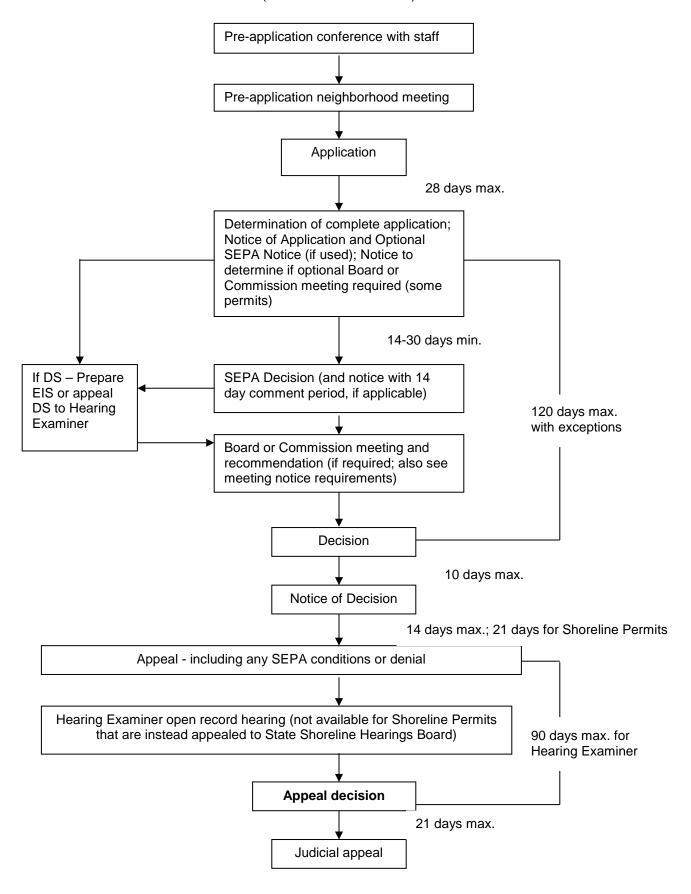
TYPE I PROCESS

(Minor Administrative Decisions)



TYPE II PROCESS

(Administrative Decisions)



TYPE III PROCESS

(Hearing Examiner Decision)

