



# Application for Land Use Actions

I (We) are submitting application for the following land use action(s) and/or approval(s). [Please mark which application(s) apply.]

Land Use Action Application	Submittal Requirements
Binding site plan	<a href="#">Binding site plan packet</a>
Boundary line adjustment*	<a href="#">Boundary line adjustment packet</a>
Site-specific comprehensive plan amendment	
P-suffix amendment	
Special district overlay removal	
Zone reclassification	<a href="#">Zoning variance packet</a>
Zoning variance	
Conditional use permit	<a href="#">Conditional use permit packet</a>
Special use permit	<a href="#">Special use permit packet</a>
Urban planned development	
Reasonable use exception	
Shoreline conditional use	<a href="#">Shoreline packet</a>
Shoreline substantial development	
Shoreline redesignation	
Shoreline exemption*	
Shoreline variance	
Subdivision – Formal	<a href="#">Land Use – Subdivision packet</a>
Plat alteration	
Subdivision – Short	<a href="#">Land Use – Short Subdivision packet</a>
Plat vacation	
Zoning Certification & Historical Letter*	<a href="#">Informational sheet</a>

\* Available online via MyBuildingPermit.com (MBP)

I, \_\_\_\_\_, being duly sworn, state that I am the owner or officer of the corporation owning property described in the legal description filed with this application and that I have reviewed the rules and regulations of the Department of Local Services, Permitting Division (Permitting) regarding the preparation and filing of this application and that all statements, answers and information submitted with this application are in all respects true, accurate and complete to the best of my knowledge and belief.

During the review of this application, it may be necessary for Permitting staff to make one or more site visits. By signing this application form, you are giving permission for these visits. If it is rental property, the owner hereby agrees to notify tenants of possible site visits.

Property Owner or Owner Agent				
FULL NAME		PHONE NUMBER	EMAIL ADDRESS	
MAILING ADDRESS			CITY	STATE ZIP CODE
COMPANY NAME (if applicable)			SIGNATURE	

### Certification and Transfer of Application Status

If applicable, attach a completed Certification and Transfer of Application Status form identifying the authorized applicant for this application.

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- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Binding site plan   | <input type="checkbox"/> Public agency & utility                  | <input type="checkbox"/> Site development permit                    |
| <input type="checkbox"/> Boundary line adjustment  | <input type="checkbox"/> Reasonable use exception                 | <input type="checkbox"/> Site-specific comprehensive plan amendment |
| <input type="checkbox"/> Conditional use permit  | <input type="checkbox"/> Reuse of public schools                  | <input type="checkbox"/> Special district overlay                   |
| <input type="checkbox"/> Critical areas alteration exception<br><input type="checkbox"/> Private <input type="checkbox"/> Public | <input type="checkbox"/> Right-of-Way use permit                  | <input type="checkbox"/> Special use permit                         |
| <input type="checkbox"/> Drainage variance   | <input type="checkbox"/> Road variance                            | <input type="checkbox"/> Subdivision – Formal                       |
| <input type="checkbox"/> Period review for mining  | <input type="checkbox"/> Shoreline conditional use                | <input type="checkbox"/> Subdivision – Short                        |
| <input type="checkbox"/> Plat Alteration   | <input type="checkbox"/> Shoreline exemption                      | <input type="checkbox"/> Temporary use permit                       |
| <input type="checkbox"/> Plat vacation   | <input type="checkbox"/> Shoreline redesignation                  | <input type="checkbox"/> Urban planner development                  |
| <input type="checkbox"/> P-suffix amendment  | <input type="checkbox"/> Shoreline substantial development permit | <input type="checkbox"/> Zone reclassification                      |
| <input type="checkbox"/> Other:  | <input type="checkbox"/> Shoreline variance                       | <input type="checkbox"/> Zoning variance                            |
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**Send the posting package for the notice board for this application to:**

☐ the owner/applicant      ☐ the consultant/agent (engineer, architect, etc.)

**Send letters, including those requesting additional information for this application, to:**

☐ the owner/applicant      ☐ the consultant/agent

**Note:** Application forms and submittal requirements are subject to revision without notice.

**For Formal Subdivisions only:**

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Name of Subdivision

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Registered Land Surveyor (company)

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Name (individual)

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Street address

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Telephone

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City                                  State    Zip

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E-mail

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Engineer (company)

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Name (individual)

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Street address

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Telephone

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City                                  State    Zip

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E-mail

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Developer (company)

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Name (individual)

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Street address

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Telephone

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City                                  State    Zip

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E-mail

**Land Surveyor's Certification**

I hereby certify that the accompanying plat  
has been inspected by me and conforms to  
all rules and regulations of the platting  
resolution and standards for King County,

**Land Surveyor Seal**

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Signed

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Date