



**King County**  
**Department of Local Services**  
**Permitting Division**  
**206-296-6600**  
www.kingcounty.gov

# Rezone Application

For alternate formats, call 206-296-6600.

<b>GENERAL INFORMATION</b>	
(To be completed by Permitting Staff)	
File No.:	
Project Name:	
Applicant Name:	
Address of Property:	
Existing Zoning:	
Proposed Zoning:	
Acreage of Property:	
S.T.R.:	
Tax ID No.:	
Mapped Critical Areas:	
Related Permitting Files:	

Do not write ABOVE this line

**Note to applicants preparing this form:** The burden is on the applicant to provide adequate justification supporting this rezone request. In order to approve this application, the Hearing Examiner must find that the request meets the criteria for approval as specified in King County Code (KCC) 21A.44.060.

Applicants must answer the following questions accurately and concisely. As necessary, use additional pages for detailed explanations and/or attachments that support this request.

1. Describe the request. State the existing and requested zone classification, P-suffix revision, and/or Special District Overlay designation removal that is proposed through this application.



7. What effect will the proposed zoning and contemplated use of the subject property have on adjoining or neighboring properties?
8. How can the uses permitted within the proposed zone be made compatible with uses permitted on abutting property or dissimilar zoning?
9. Is this proposed rezone a logical expansion of any existing adjacent zone?  Yes  No  
Explain.
10. Was a reclassification request made on this property at the time of the last area zoning or at any other time in the past?  Yes  No If Yes, describe the request and action taken by the County Council.
11. Since the last area zoning of the subject property, have authorized public improvements, private development, or other circumstances materially or significantly affected the property?  
 Yes  No If Yes, what are the changed circumstances and how have they affected the property?



16. Which of the additional Hearing Examiner findings listed below (e.g., A,B,C, or D) apply to the zone reclassification request? Explain the relevant circumstance(s). **Provide a detailed response on an attached sheet(s).** Note: If the request is for a reclassification to the M (Mining) Zone, the additional Examiner findings do not apply.

**20.24.190 Additional examiner findings – reclassifications and shoreline redesignations.** *When the examiner issues a recommendation regarding an application for a reclassification of property or for a shoreline environment redesignation, the recommendation shall include additional findings that support the conclusion that at least one of the following circumstances applies:*

- A. *The proposed rezone of shoreline environment resignation is consistent with the King County Comprehensive Plan;*
- B. *The property is potentially zoned for the reclassification being requested, conditions have been met that indicate the reclassification is appropriate and the proposed rezone or shoreline environment redesignation is consistent with the King County Comprehensive Plan;*
- C. *An adopted subarea plan or area zoning specifies that the property shall be subsequently considered through an individual reclassification application and the proposed rezone or shoreline environment redesignation is consistent with the King County Comprehensive Plan; or*
- D. *The requested reclassification or redesignation is in the public interest and the proposed rezone or shoreline environment redesignation is consistent with the King County Comprehensive Plan. (Ord. 16950 § 12, 2010: Ord. 16263 § 9, 2008: Ord. 15243 § 2, 2005: Ord. 14047 § 12, 2001: Ord. 4461 § 10, 1979)*

**Name of the person who prepared the Rezone application:**

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<b>Print Name</b>	<b>Date prepared</b>
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**Signature**

**Check out the Permitting Web site at [www.kingcounty.gov/permits](http://www.kingcounty.gov/permits)**