



City of Cle Elum

Shorelines Permit

Application Packet

City of Cle Elum, Planning Division
119 West First Street, Cle Elum, WA 98922
Phone#: (509) 674-2262 Email: planning@cleelum.gov



LAND USE APPLICATION
CITY OF CLE ELUM, PLANNING DEVELOPMENT

119 WEST FIRST STREET, CLE ELUM, WA 98922
 PHONE: (509) 674-2262 EMAIL: planning@cleelum.gov

INSTRUCTIONS – PLEASE READ FIRST Please type or print your answers clearly.

Answer all questions completely. If you have any questions about this form or the application process, please ask a Planner. Remember to bring all necessary attachments and the required filing fee when the application is submitted. The Planning Division cannot accept an application unless it is complete and the filing fee paid. Filing fees are not refundable. *Consulting fees may apply.*
 This application consists of four parts. PART I - GENERAL INFORMATION AND PART IV – CERTIFICATION are on this page. PART II and III contain additional information specific to your proposal and MUST be attached to this page to complete the

PART I – GENERAL INFORMATION

| | | | | | | |
|---|------------------|---|--------------------------------|------------------------------------|--------------------------------------|--|
| 1. Applicant's Information: | Name: | | | | | |
| | Mailing Address: | | | | | |
| | City: | St: | Zip: | Phone: | () | |
| | E-Mail: | | | | | |
| 2. Applicant's Interest in Property: | Check One: | <input type="checkbox"/> Owner | <input type="checkbox"/> Agent | <input type="checkbox"/> Purchaser | <input type="checkbox"/> Other _____ | |
| 3. Property Owner's Information (If other than Applicant): | Name: | | | | | |
| | Mailing Address: | | | | | |
| | City: | St: | Zip: | Phone: | () | |
| | E-Mail: | | | | | |
| 4. Subject Property's Assessor's Parcel Number(s): | | | | | | |
| 5. Legal Description of Property. (if lengthy, please attach it on a separate document) | | | | | | |
| 6. Property Address: | | | | | | |
| 7. Property's Existing Zoning: | | | | | | |
| 8. Type Of Application: (Check All That Apply) | | | | | | |
| <input type="checkbox"/> Critical Resource | | <input type="checkbox"/> Shoreline Conditional Use or Variance Permit | | | | |
| <input type="checkbox"/> Shoreline Development Permit | | <input type="checkbox"/> Other _____ | | | | |

PART II – SUPPLEMENTAL APPLICATION, PART III – REQUIRED ATTACHMENTS, & PART IV – NARRATIVE

SEE ATTACHED SHEETS

PART V – CERTIFICATION

I certify that the information on this application and the required attachments are true and correct to the best of my knowledge.

Property Owner's Signature _____
Date

Applicant's Signature _____
Date

FILE/APPLICATION(S)#

| | | | |
|-----------------------|---------------------|---------------------|--------------------|
| DATE FEE PAID: | RECEIVED BY: | AMOUNT PAID: | RECEIPT NO: |
| | | | |



Supplemental Application For:
SHORELINES
 SHORELINES ORDINANCE, TITLE 18

PART II - APPLICATION INFORMATION

1. PROPERTY OWNERS (attach if long): List all parties and financial institutions having an interest in the property.

2. SURVEYOR AND/OR ENVIRONMENTAL SPECIALIST AND THEIR CONTACT INFORMATION:

3. ASSOCIATED CRITICAL AREAS:

- Flood Hazard Areas Geologically Hazardous Areas Critical Aquifer Recharge Areas
 Fish And Wildlife Habitat And The Stream Corridor System Wetlands

4. SITE FEATURES:

- A. General Description: Flat Gentle Slopes Steepened Slopes
 B. Describe any indication of hazards associated with unstable soils in the area, i.e. slides or slipping?

 C. Is the property in a 100-Year Floodplain or other critical area as mapped by any local, state, or national maps or as defined by the Washington State Growth Management Act or the Yakima Municipal Code?

5. UTILITY AND SERVICES ASSOCIATED WITH THIS PROJECT: (Check all that are available)

- Electricity Telephone Natural Gas Sewer Cable TV Water _____ Irrigation _____

6. TYPE OF POTENTIAL USES: (check all that apply)

- Single-Family Dwellings Two-Family Dwellings Multi-Family Dwellings
 Commercial Industrial Other _____

PART III - NARRATIVE

1. Give a brief, complete description of the proposed work.

PART IV - REQUIRED ATTACHMENTS

TRAFFIC CONCURRENCY: (if required, see YMC Ch. 12.08, Traffic Capacity Test)

SITE PLAN/PLAT REQUIRED: (Please use the attached City of Yakima Site Plan/Preliminary Plat Checklist)

I hereby authorize the submittal of the Shorelines/Critical Areas application to the City of Yakima for review.

Property Owner Signature (required)

Date