### Nonconforming Buoy Application

Form must be completed in ink, preferably blue. Pencil will not be accepted.

**To Be Filled Out by Applicant**

<table>
<thead>
<tr>
<th>Project Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tax Assessor’s Number:</td>
</tr>
<tr>
<td>(If Upland Property Owner)</td>
</tr>
<tr>
<td>Project Street Address or Access Street:</td>
</tr>
<tr>
<td>Latitude/Longitude: N ° ’ ”</td>
</tr>
<tr>
<td>Coordinates: W ° ’ ”</td>
</tr>
</tbody>
</table>

**For City Use Only**

| File Number: |
| Project Number: |
| Date Received: |

### Submittal Requirements

<table>
<thead>
<tr>
<th>Application and Submittal Docs</th>
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</thead>
<tbody>
<tr>
<td>One original (which must contain an original signature) of the application and all supporting documents must be provided. Whenever possible, originals must be signed in blue. Please identify the original document.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Submitting Applications</th>
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<tbody>
<tr>
<td>Applications must be submitted in person by either the owner or the owner’s designated agent. Should an agent submit the application, a notarized Owner/Agent Agreement must accompany the application.</td>
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</table>

<table>
<thead>
<tr>
<th>Attached Submittal Checklist</th>
</tr>
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<tbody>
<tr>
<td>Please refer to attached Submittal Checklist for further information.</td>
</tr>
</tbody>
</table>
A. GENERAL INFORMATION

1. Name of buoy owner: _____________________________________________
   Address: _______________________________________________________
   Phone: ___________________________ Fax: ___________________________
   E-mail: _________________________________________________________

   If the owner(s) of record as shown by the county assessor's office is (are) not the agent, the owner's (owners') signed and notarized authorization(s) must accompany this application.

2. Authorized agent: _______________________________________________
   Address: _______________________________________________________
   Phone: ___________________________ Fax: ___________________________
   E-mail: _________________________________________________________

3. Driving directions to site and /or description of site location:
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

   Madison Bay (includes Hidden Cove) -- Manzanita Bay -- Murden
   Cove -- Port Madison -- Port Orchard or Puget Sound -- Rich
   Passage -- Rolling Bay
   ________________________________________________________________

5. Legal description (or attach) if applicable: ___________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
6. Description of buoy (anchor type, line, float):  ________________________________________________

7. Are you the upland property owner?  □ yes  □ no

8. If you are the upland property owner, do you have more than one buoy?  □ yes  □ no  □ N/A

9. Have you applied for or obtained a license from the Washington State Department of Natural Resources?  □ yes  □ no  □ N/A

   If so, please provide the license #__________________________.

10. Does the buoy swing circle encroach on neighboring tidelands?  □ yes  □ no

I hereby certify that I have read this application and know the same to be true and correct.

________________________________________  __________________________
*Signature of owner or authorized agent  Date

________________________________________
Printed

*If signatory is not the owner of record, the attached “Owner/Agent Agreement” must be signed and notarized
DOCUMENTATION FOR NONCONFORMING BUOY

General Information:
The following information is examples of documentation to be provided to establish the buoy existing prior to 1996. As many forms of documentation as possible should be provided to depict the information necessary. Documents other than those listed will be accepted as well. It is expected that individual cases will all be different, as people keep different records and have different histories with their properties and buoys. The City will also review internal information, such as a survey of buoy locations performed in 2003, aerial photography, and permit applications in the vicinity.

The City will assume that documentation provided by buoy owners has been submitted in good faith. The City is reviewing the documentation of these buoys from a perspective of trying to recognize them as nonconforming, with the goal of not having to repeat this process and providing an official statement of nonconformity. The City’s goal is to have enough information, through what the owner provides and what the City has on file, to have a well informed position in determining the buoy to have been placed prior to 1996 and therefore existing nonconforming to the current Shoreline Master Program.

1. **Photographs**
   Photographs should include:
   - a. the buoy;
   - b. dates;
   - c. identifying features; and/or
   - d. historic references (such as a house under construction).

2. **Receipts**
   Receipts from the following sources can be used to assist in verification of installation date:
   - a. the buoy company;
   - b. the installation company; and/or
   - c. other.

3. **Identifying Markings**
   Please detail any identifying markings (shape, color, stickers, writings, etc) on the buoy:

   ______________________________________________________

4. **Affidavits**
   Affidavits may assist the City in review of the buoy’s status. The following sources may be helpful (Please use the attached affidavit form):
   - a. property owner;
   - b. prior property owner(s);
   - c. prior buoy owner(s);
   - d. buoy installer; and/or
   - e. neighboring property owners.
Owner/Agent Agreement

The undersigned is (are) the owner(s) of record of the property identified by the Kitsap County Assessor’s account number ________________________________, located at ________________________________, Bainbridge Island, Washington. The undersigned hereby gives (give) consent and approval to

to act on his/her (their) behalf as his/her (their) agent to proceed with an application for (please check all items that apply): □ preapplication conference □ planning permits □ construction permits (i.e. building, water/sewer availability, right-of-way, etc)
on the property referenced herein. This agreement authorizes the agent to act on the owner’s behalf for the above checked applications through (date or specific phase) ____________________.

Owner of record       Date       Owner of record       Date

STATE OF WASHINGTON   )
) ss.
COUNTY OF KITSAP     )

On this _______ day of ____________, 20____, before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared:

to me known as the individual(s) described in and who executed the foregoing instrument, and acknowledged to me that he/she/they signed and sealed the said instrument, as his/her/their free and voluntary act and deed for the uses and purposes therein mentioned, and on oath stated that he/she/they was (were) authorized to execute said instrument.

WITNESS MY HAND AND OFFICIAL SEAL, hereto affixed the day and year in this certificate above written.

__________________________
Notary Public in and for the State of Washington

Residing at ________________________________

My appointment expires: ________________________
AFFIDAVIT OF EXISTING BUOY

Buoy Owner: ____________________________________________________________

Latitude/Longitude Coordinates: N____°____’____”
W____°____’____”

I, ___________________________________, do hereby certify that the buoy located at the above Latitude/Longitude coordinates now owned by _________________________ existed and has been maintained since before 1996. Further recollection as basis of this statement is provided below.

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Signature ____________________________________________________________ Date ________________________________

STATE OF WASHINGTON ) ) SS.
COUNTY OF KITSAP ) )

On this ________ day of ____________, 20____, before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared:

to me known as the individual(s) described in and who executed the foregoing instrument, and acknowledged to me that he/she/they signed and sealed the said instrument, as his/her/their free and voluntary act and deed for the uses and purposes therein mentioned, and on oath stated that he/she/they was (were) authorized to execute said instrument.

WITNESS MY HAND AND OFFICIAL SEAL, hereto affixed the day and year in this certificate above written.

_____________________________________________________________________

Notary Public in and for the State of Washington
Residing at ________________________________

My appointment expires: ____________________________