# Preapplication Conference Request

**Comprehensive Plan Amendment – Site Specific**

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**To Be Filled Out By Applicant**

<table>
<thead>
<tr>
<th>Project Name:</th>
<th>Tax Assessor’s Number:</th>
</tr>
</thead>
<tbody>
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</table>

**Project Street Address or Access Street:**

**Environmental Checklist Submitted:**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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**For City Use Only**

<table>
<thead>
<tr>
<th>File Number:</th>
<th>Project Number:</th>
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<tr>
<th>Date Received:</th>
<th>Application Fee:</th>
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| Treasurer’s Receipt Number: | |
|----------------------------| |

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**Submittal Requirements**

<table>
<thead>
<tr>
<th>Application</th>
<th><strong>One original (which must contain an original signature) and three copies</strong> must be provided. Whenever possible, originals must be <strong>signed in blue</strong>. Please identify the original document.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supporting Documents</td>
<td><strong>One original (which must contain an original signature)</strong>, where applicable, and <strong>three copies</strong> (if an original is not applicable, <strong>four copies</strong> must be provided).</td>
</tr>
<tr>
<td>Full-size Drawings</td>
<td><strong>Three copies</strong> of the required drawings must be provided. <strong>Drawings must be folded and 18” x 24” in size. No construction drawings or other sized drawings will be accepted unless specifically requested.</strong></td>
</tr>
<tr>
<td>Submitting Applications</td>
<td>**Applications <strong>must be submitted in person</strong> by either the owner or the owner’s designated agent. Should an agent submit the application, a <strong>notarized Owner/Agent Agreement</strong> must accompany the application.</td>
</tr>
<tr>
<td>Fees</td>
<td>See Fee Schedule in the Planning Department or on the City’s website under <strong>documents, forms &amp; apps.</strong></td>
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**Department of Planning and Community Development**

280 Madison Avenue North • Bainbridge Island, WA • 98110-1812

Phone: (206) 842-2552 • Fax: (206) 780-0955 • Email: pcd@bainbridgewa.gov

www.ci.bainbridge-isl.wa.us

December 2011

Page 1 will be generated by the City at time of submittal
**GENERAL INFORMATION**

1. **Name of property owner**: 
   Address: 
   Phone: 
   Fax: 
   E-mail: 
   
2. **Authorized agent**: 
   Address: 
   Phone: 
   Fax: 
   E-mail: 

3. **Person responsible for payment**: 
   Address: 
   Phone: 
   Fax: 
   E-mail: 

4. **Project Contact**: 
   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.*
5. Description of proposed amendment, including proposed changes to the Land Use Map:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

6. Driving directions to site: ________________________________________________

________________________________________________________________________

7. Please give the following existing parcel information:

   Assessor’s Parcel Number: ________________________________________________
   Parcel Owner: __________________________________________________________

8. Short Legal description (or attach): ______________________________________

________________________________________________________________________

9. Current comprehensive plan, zoning and shoreline designations and use of subject parcel(s):

<table>
<thead>
<tr>
<th>Lot Number</th>
<th>Comp Plan Designation</th>
<th>Zoning Designation</th>
<th>Shoreline Designation</th>
<th>Current Use</th>
</tr>
</thead>
<tbody>
<tr>
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10. Does the site contain an environmentally sensitive area as defined in Critical Areas Ordinance (Bainbridge Island Municipal Code Chapter 16.20)?

   □ yes   □ no   □ unknown

   If yes, check as appropriate:
   □ wetland  □ geologically hazardous area
   □ wetland buffer  □ zone of influence
   □ stream  □ slope buffer
   □ stream buffer  □ fish and wildlife habitat area
11. Is there any other information which is pertinent to this proposal?  
   If yes, please explain:  
   
   ____________________________________________________________________________  
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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  

______________________________________________________________________________  
Please Print  

*If signatory is not the owner of record, the attached “Owner/Agent Agreement” must be signed and notarized.
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) ________________.

<table>
<thead>
<tr>
<th>Owner of record</th>
<th>Date</th>
<th>Owner of record</th>
<th>Date</th>
</tr>
</thead>
</table>

STATE OF WASHINGTON )  
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: ________________