



**CITY OF BAINBRIDGE ISLAND
MASTER LAND USE APPLICATION
P100**

FOR OFFICIAL USE ONLY	
PROJECT #	_____
PLANNER	_____

Project Name:
Parcel Number(s):
Property Address:

Type of Application (check all that apply)

- | | |
|--|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Adjustments to an Approved Land Use: <ul style="list-style-type: none"> <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> Administrative Code Interpretation <input type="checkbox"/> Agricultural Conditional Use <input type="checkbox"/> Agricultural Retail Plan <input type="checkbox"/> Boundary Line Adjustment <input type="checkbox"/> Buffer Enhancement Plan <input type="checkbox"/> Buoy Application <input type="checkbox"/> Clearing Permit <input type="checkbox"/> Conditional Use Permit: <ul style="list-style-type: none"> <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> Critical Area Permit: <ul style="list-style-type: none"> <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> Housing Design Demonstration Project <input type="checkbox"/> Pre-Application Conference <input type="checkbox"/> Reasonable Use Exception <input type="checkbox"/> Revision: Type _____ <input type="checkbox"/> Rezone: <ul style="list-style-type: none"> <input type="checkbox"/> Site Specific <input type="checkbox"/> Area-Wide | <ul style="list-style-type: none"> <input type="checkbox"/> Shoreline Conditional Use <input type="checkbox"/> Shoreline Exemption <input type="checkbox"/> Shoreline Substantial Development Permit <input type="checkbox"/> Shoreline Variance <input type="checkbox"/> Sign Permit <input type="checkbox"/> Site Plan and Design Review: <ul style="list-style-type: none"> <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> State Environmental Policy Act (SEPA) Review <input type="checkbox"/> Subdivision – Large <input type="checkbox"/> Preliminary <input type="checkbox"/> Subdivision – Long <input type="checkbox"/> Final <input type="checkbox"/> Subdivision – Short <input type="checkbox"/> ALT/ADJ/AMEND <input type="checkbox"/> Variance: <ul style="list-style-type: none"> <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> Wireless: <ul style="list-style-type: none"> <input type="checkbox"/> EFM <input type="checkbox"/> WCF <input type="checkbox"/> Other _____ |
|--|--|

Project Description:

Parcel #	Address	Property Owner

Project Contacts (owner, surveyor, engineer, etc)		
Property Owner:		
Address:		
City:	State:	Zip:
Email:		Phone:
Name:	Agency:	
Address:	Function:	
City:	State:	Zip:
Email:		Phone:
Name:	Agency:	
Address:	Function:	
City:	State:	Zip:
Email:		Phone:
Name:	Agency:	
Address:	Function:	
City:	State:	Zip:
Email:		Phone:

Authorized Agent (Please attach notarized Owner/Applicant Agreement Form)		
Name:	Agency:	
Address:		
City:	State:	Zip:
Email:		Phone:

If additional parcels or contacts are required, please attach additional sheets

Submittal requirements for each application are described in the Administrative Manual for Planning Permits: <http://www.bainbridgewa.gov/DocumentCenter/View/100>.

Supporting information and/or documents may be required to review your application. If you have questions about specific requirements for your project, please consult with planning staff prior to submitting your application.

ELECTRONIC FILES AND FOUR (4) PAPER COPIES ARE REQUIRED FOR ALL SUBMITTED DOCUMENTS

Applications **must be submitted in person, and by appointment only** by either the owner or the owner’s designated agent. Should an agent submit an application, a **notarized Owner/Applicant Agreement** must accompany the application. To schedule an appointment, please contact pcd@bainbridgewa.gov or call (206) 780-3750.

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED OR WILL DELAY PROCESSING.

I affirm, under penalty of perjury, that all answers, statements, and information submitted with this application are correct and accurate to the best of my knowledge. I also affirm that I am the owner or designated agent of the subject site. Further, I grant permission to any and all employees and representatives of the City of Bainbridge Island and other governmental agencies to enter upon and inspect said property as reasonably necessary to process this application.

Print Name (Owner)	Signature (Owner)	Date
--------------------	-------------------	------

Print Name (Owner)	Signature (Owner)	Date
--------------------	-------------------	------

Print Name (Owner)	Signature (Owner)	Date
--------------------	-------------------	------

Print Name (Owner)	Signature (Owner)	Date
--------------------	-------------------	------

Print Name (Agent)	Signature (Agent)	Date
--------------------	-------------------	------