Print Checklist and Sections 1-5 and A-B | Print All Pages

PLANNING & DEVELOPMENT SERVICES

1800 Continental Place ● Mount Vernon, WA 98273
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Special Use Submittal Checklist

Date application was accepted:

Accepted by

Permit Number

Zoning / Setbacks

Flood Plain/Floodway

Shoreline

Notes:

Approved prior to Special Use Application:

☐ ☐ **Lot Certification** (Recorded copy required, no exemptions.)
- ☐ Approved Lot Certification, previously recorded; ***OR,***
- ☐ Approved Lot Certification, PDS will submit it for recording.

☐ ☐ **Critical Area Review**
- ☐ Report due at submittal (If required)
- ☐ Provide staff letter of approval at submittal.

☐ ☐ **Pre-Application Meeting or Waiver**

Submitted with Special Use Application

☐ ☐ **Fees** **$_____Special Use $_____Publication $_____SEPA $_____ Public Works $ _____ Water**

☐ ☐ **Fact Sheet** (Fully completed.)

☐ ☐ **Ownership Certificate** (Notarized signature of Property Owner)

☐ ☐ **Assessor's Map Identify the subject parcel.**

☐ ☐ **Critical Area Report** (If required.) Provide **2 copies.**

☐ ☐ **Site Plan** No larger than 11 x 17
See attached page for all 13 site plan requirements.

☐ ☐ **Completed Sections A & B**

☐ ☐ **Project Description/Evaluation Criteria/Specific Criteria**
Answer all questions completely on following pages.

☐ ☐ **Detailed Description of Business Functions**
(If applying for forms C, D, E, F or J)

☐ ☐ **Form** (14.16.900(3))
- ☐ **A** Temp Manufactured Home – Elderly or Disabled Family Member
- ☐ **B** Temp Manufactured Home – Accessory to Farm Dwelling Unit
- ☐ **C** Bed & Breakfast
- ☐ **D** Outdoor Outfitters Enterprises
- ☐ **E** Home Based Business II
- ☐ **F** Agricultural Processing Facility
- ☐ **G** Mineral Resource Overlay
- ☐ **H** Personal Wireless Facility
- ☐ **I** Rural Business Expansion and/or Rural Business Change of Use
- ☐ **J** Master Planned Resort
- ☐ **K** Other _____

☐ ☐ **SEPA Checklist** (If not previously completed.)

☐ ☐ **Pre-Addressed/Stamped Envelopes** for both owners of record and the physical addresses within 300 feet of property boundary.
- ☐ **Include a list of property owners and physical addresses**.
- ☐ **ONE** set for Administrative. ☐ **TWO** sets for Hearing Examiner.

☐ ☐ **Landscaping Plan** (If required)

☐ ☐ **Parking Plan** (If required)

Special Uses

Special uses are uses of property that require additional review, but are compatible.

The applicant must demonstrate this compatibility. Skagit County Code (SCC 14.16.900(1)(v)) contains criteria that County staff uses to evaluate Type I Administrative Special Use applications and Type II Hearing Examiner Special Use applications. A Special Use must demonstrate that the proposed activity will not adversely affect or prevent those uses normally allowed within the respective district.

All special uses, including master planned resorts, shall require a development project be commenced for the entire parcel within 2 years of the permit approval, unless development is phased. A phasing plan shall be submitted and reviewed as part of the special use application.

The following chart representation of Type I or Type II applications is ***reference only***. Please check with staff to verify your zoning and type of special use process your proposal may require.

Special Use	Type I	Type II	Sections		SEPA	Forms										
			1-5	A-B		A	B	C	D	E	F	G	H	I	J	K
Temp mfg housing (elderly)	X		X	X		X										
Temp mfg housing (farm)	X		X	X			X									
Bed & Breakfast	X		X	X	X			X								
Outdoor Outfitter Enterprise		X	X	X	X				X							
Home Based Business II		X	X	X	X					X						
Ag Processing Facility		X	X	X	X						X					
Mineral Resource Lands		X	X	X	X							X				
Personal Wireless Facility	X	X	X	X	X								X			
RB expansion/change of use		X	X	X	X									X		
Master Planned Resort		X	X	X	X										X	
Other	Requirements will be outlined at a Pre-Application meeting.															X

A County planner will evaluate your application based on County codes in connection with the Health, Public Works and Environmental teams and any public agency or SEPA comments. The planner creates a staff report based on this evaluation that either concludes your proposal meets special use requirements and grants special use approval subject to any conditions (Type I), or the staff report offers recommendations to the County Hearing Examiner during a public hearing process.

This application is divided into sections and forms based on the type of special use you are proposing so you can demonstrate this compatibility. The table above indicates the sections and forms of this application that you need to complete. All applicants must complete Sections 1 through 5 as well as Sections A and B. Additionally, all applicants except those seeking temporary manufactured home approval for elder or disability care or for farm use must submit a SEPA checklist beforehand or with this application.

Section 1

Planning & Development Services Fact Sheet

PL#:_____

Community Development Division

- ❑ Administrative Decision
- ❑ Agricultural Variance
- ❑ Binding Site Plan
- ❑ Boundary Line Adjustment
- ❑ Final Plat
- ❑ Long CaRD
- ❑ Lot Certification
- ❑ Modification
- ❑ Open Space
- ❑ Pre-application Review
- ❑ Preliminary Plat
- ❑ Shoreline Exemption
- ❑ Shoreline Substantial Use Permit
- ❑ Short CaRD
- ❑ Short Plat
- ❑ **Special Use Permit Level I**
- ❑ **Special Use Permit Level II**
- ❑ Variance Level I
- ❑ Variance Level II
- ❑ Other _____

Brief Project Description:_____

Other Related Permits or Approvals:_____

Applicant Name:_____

Parcel ID#: _____ Assessor Tax #:_____ - _____ -_____ -_____

Parcel ID#: _____ Assessor Tax #:_____ - _____ -_____ -_____

Section____ Township____ Range____ Comprehensive Plan/Zoning Designation:_____

Site Address:_____

Recorded Lot of Record: ☐ Yes ☐ No PL#_____

Urban Growth Area: ☐ Yes ☐ No If yes, City: _____

Comp Plan/Zoning within 200 feet:_____ Mineral Resource Overlay within ¼ mile: ☐ Yes ☐ No

Critical Area/Shoreline within 200 feet: ☐ Yes ☐ No

Pre-application meeting required? ☐ Yes ☐ No Meeting verification form enclosed? ☐ Yes ☐ No

Acreage or Lot Dimensions:_____

Flood Zone: _____ FIRM Map Panel #:_____ Map Date:_____

Road access: ☐ Private ☐ County – Permit #:_____ ☐ State – Permit #:_____

Water Source: ☐ Drilled well - Permit #:_____ ☐ Community Well ☐ Public: ___PUD #1 ___Anacortes

Sewage Disposal: ☐ Septic - Permit #:_____ ☐ Public Sewer:_____

Legal Description:_____

_____ *(Attach additional sheet if necessary.)*

Section 2

Applicant

_____
Name

_____
Address

_____ _____ _____
Phone Fax e-mail address

Signature_____

Owner

_____
Name

_____
Address

_____ _____ _____
Phone Fax e-mail address

Contact

_____
Name

_____
Address

_____ _____ _____
Phone Fax e-mail address

Contractor ***(When applicable. If owner, write owner-builder)***

_____
Name

_____
Address

_____ _____ _____
Phone Fax e-mail address

_____ _____
Contractors License # Expiration Date

Section 3

OWNERSHIP CERTIFICATION

I, _____, hereby certify that I am the major property owner or officer of the corporation owning property described in the attached application, and I have familiarized myself with the rules and regulations of Skagit County with respect to filing this application for a

_____ and that the statements, answers and information submitted present the argument on behalf of this application and are in all respects true and correct to the best of my knowledge and belief.

Street Address: _____

City, State, Zip: _____

Phone: (_____)_____

Signature(s):

_____

_____

for: _____

(corporation or company name, if applicable)

ACKNOWLEDGMENT

STATE OF WASHINGTON)
ss.)
COUNTY OF SKAGIT)

On this day personally appeared before me _____, known to be the individual(s) described in and who executed the within and foregoing instrument, and acknowledged that they signed the same as their free and voluntary act and deed, for the uses and purpose therein mentioned.

GIVEN under my hand and official seal the _____ day of _____, _____.

_____

NOTARY PUBLIC in and for the State of Washington residing at

My Commission Expires: _____

Section 4

Planning & Development Services

Critical Areas Checklist

Pursuant to Skagit County 14.24.080

Section ___ Township ___ Range ____ Parcel Number _____Related Permits: _____

Site Address: _____

Proposed uses: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS CONCERNING CRITICAL AREA INDICATORS LOCATED ON OR WITHIN 200 FEET OF THE PROJECT AREA.

a. Are you aware of any environmental documentation that has been prepared related to critical areas that includes the subject area? (If yes, *please attach a list of document titles).
___ Yes* ___ No ___ Unknown

b. Are there any surface waters (including year-round and seasonal streams, saltwater, lakes, ponds, bogs, fens, swamps, marshes)?
___ Yes ___ No ___ Unknown

c. Is there vegetation that is associated with wetlands?
___ Yes ___ No ___ Unknown

d. Have any wetlands been identified?
___ Yes ___ No ___ Unknown

e. Are there areas where the ground is consistently inundated or saturated with water?
___ Yes ___ No ___ Unknown

f. Are there any State or Federally listed sensitive, endangered or threatened species and habitats?
___ Yes ___ No ___ Unknown

g. Are there slopes of 15% or greater?
___ Yes ___ No ___ Unknown

h. Is the project located within a Flood Hazard Zone?
___ Yes ___ No ___ Unknown

i. Do you know of any landslide hazard areas?
___ Yes ___ No ___ Unknown

I grant permission to the field inspector to enter the building site to determine the presence or absence of critical areas.

I understand that if the information on this form is later determined to be incorrect, the project or activity may be subject to conditions or denial as necessary to meet the requirements of SCC 14.24, the Skagit County Critical Areas Ordinance.

_____ _____

Applicant's Signature Date

Section 5 Site Plan Requirement Checklist

Site plan must be prepared on 8 ½" x 11" ***or*** 11" x 17" paper.

***The first 7 requirements of the Drainage Plan may be met by utilizing a third copy of this site plan.**

☐ **1. Title Block**
Indicate applicant's name, site address, Assessor's Tax Account # and Property ID # *(P#)* for the subject property.

☐ **2. Scale**
Indicate map scale. Use any appropriate scale and note it on your site plan. Example - Scale: 1" = 40'

☐ **3. North Arrow**
Show an arrow indicating the ⇧ NORTH direction.

☐ **4. Property Boundaries/Easements**
Show property lines and all easements *(utility, drainage, dike, access, railroad, etc.)*. Indicate site dimensions and names of adjacent roads.

☐ **5. Driveway**
Show entire length and width of driveway in feet. Indicate grade of driveway in percent (%) of slope. Turnouts are required every 300 feet. To create a turnout the road shall be widened to 20 feet in width for a distance of 30 feet in length to allow for vehicles to pull over and allow emergency vehicles to proceed.

☐ **6. Building Footprint**
Show location, dimensions and setbacks of all existing and proposed buildings or structures. If this project includes an addition, please clearly show the addition different from the existing building. Identify each building by its use *(residence, garage, etc.)*. Indicate roof overhang lines and any decks, porches or retaining walls.

☐ **7. Impervious Surface**
Indicate the amount of **new** impervious area. Impervious areas include the square footage of new building roof area, parking area, patios and any new driveway.

☐ **8. Setbacks**
Indicate the building setbacks from all property lines with a dashed line. Include shoreline setbacks when applicable.

☐ **9. Well Location or Water Lines**
Indicate the drinking water supply *(existing and/or proposed, public or individual)*. Show all private well(s), public water mains and water supply pipes to all buildings.

☐ **10. On-Site Septic System Location or Sewer Lines**
Indicate method of sewage disposal: Private septic - show existing and proposed on-site sewage system(s). Include drainfield replacement area(s). (Tanks are required to be 50' and drainfields 100' from a well.) Public sewer - indicate location of sewer main and private pipes to building.

☐ **11. Propane**
Show the location of the propane tank (if any).

☐ **12. Slope**
Indicate slope (elevation change) of building site. Use contour lines or arrows to show direction and percent (%) of slope(s). Identify any erosion or landslide areas as well as any potential unstable slopes greater than 15%.
Percentage % of slope = Rise *(drop in height)* divided by Run *(distance)* multiplied by 100.

OTHER FEATURES TO INCLUDE ON YOUR SITE PLAN:

☐ •**Shorelines**
For shoreline properties, show the ordinary high water mark (OHWM) and setbacks from OHWM to all structures, including neighbor's, within 300 feet from both side property lines.

☐ •**Dike District**
Show both measurements from the water ward side and the landward side of the dike and distance to project.

Section A

Please answer the following questions describing your proposal in detail. Attach a separate page if necessary.

1. Describe your proposal/business? _____

_____

_____

2. What days and hours will your operation be open? _____

_____

_____

3. How many employees will you have? _____

_____

4. State their working hours: _____

_____

5. Will the employees be working on-site? _____

If not, how many will be working off-site? _____

6. Will there be signs indicating the operation?_____

If so, where will they be placed and how big will they be? _____

_____

7. Businesses need to be concealed from public view. How do you intend to do this? Will you use plants, shrubs or fences as a buffer?_____

_____

_____

_____

8. Describe the parking area. (You will need to ensure that you don't encroach on neighbors or into the road right-of-way.) _____

_____

_____

Please state your schedule for the development of this business/operation. _____

_____

_____

_____

If development is phased please describe timelines. _____

_____

_____

9. Describe the traffic impact of your operation on the County or State road system (such as the use of large trucks or constant vehicle traffic)? _____

_____

_____

_____

10. Will your operation have an internal road system? _____

_____

***If so, please provide a layout plan of that system.**

11. How is your property accessed? By private, county or state road? _____

_____

_____

_____

12. Will the operation generate heat from machinery or equipment?_____

_____

_____

14. Will the operation generate noise or odors? _____

_____

_____

15. Will steam, smoke or dust be generated by the operation? _____

_____

_____

16. Is heavy equipment or machinery being used? Will there be vibrations that may be felt by adjoining properties? _____

_____

_____

17. Will chemicals, waste oils, solvents, fuel, etc. be stored at the operation? _____

_____

_____

_____

If so, please state what kinds, how much and how they will be stored. _____

_____

_____

_____

How will they be disposed of? _____

_____

_____

_____

18. Will visitors, customers or employees have access to adjoining property?_____

_____

_____

_____

Please describe your plans for preventing trespassing. _____

_____

_____

_____

19. If your operation will be using a building please describe the size, height and construction type. This building must be shown on the site plan.

_____

_____

_____

20. Describe the sewage disposal plan for employees and the public. _____

_____

_____

21. Describe the water supply for employees and the public. _____

_____

_____

22. Is water served by PUD, community water or drilled well?_____

_____

23. Address any fire flow issues. _____

_____

_____

Section B

Please address the General Special Use Permit Application Evaluation Criteria. Attach a separate page if necessary.

The burden of proof shall be on the Applicant to provide evidence in support of the application.

1. Describe how the proposed use is compatible with the neighboring properties. _____

_____

_____

_____

_____

2. How does the proposed use comply with the Skagit County Code? Please cite code section. ___

_____

_____

_____

3. How will the proposed use create noise, odor, heat, vibration, and air or water pollution?

_____

_____

_____

4. How will the operation impact dwellings and property in the immediate area? _____

_____

_____

_____

5. How will the proposed use intrude on the privacy of the surrounding areas? _____

_____

_____

_____

6. What potential effects could your proposal have to the general public health, safety and general welfare?

_____

_____

***For special uses in Industrial Forest – Natural Resource Lands, Secondary Forest – Natural Resource Lands, Agricultural – Natural Resource Lands, and Rural Resource – Natural Resource Lands,**

1. How will the impacts on long-term natural resource management and production be minimized?

_____

_____

_____

2. Describe how the proposed use complies with the health and safety of the community? _____

_____

_____

3. Will the proposed use be supported by adequate public facilities and services? _____

_____

_____

4. Describe the plan to minimize the impacts on these facilities? _____

_____

_____

_____

5. Describe any impact to those facilities. _____

_____

_____

Please address <u>Special Uses with Specific Criteria.</u>

Failure to address the required criteria will cause delays in processing your application.

Provide the corresponding form for your application type.

See Forms A - K

Form C. <u>Bed and Breakfast: Attach a separate page if necessary.</u>

Bed and Breakfast Special Use Permits are subject to the following requirements:

a) They are owner occupied and managed. Who is living in the house?

_____

_____

b) Parking is on-site and a minimum of 10 feet away from neighboring residences. Describe how are you are meeting this requirement?

_____

_____

_____

_____

c) All lighting is directed away from neighboring residences. Describe how is this being done?

_____

_____

_____

d) The impacts will be no more obtrusive than a residence. Please describe how this is being demonstrated.

_____

_____

_____

e) 5 Bedrooms or less are available for guest use. How many do you have?

_____

_____

_____

_____