For Official Use Only:	
Date Checklist Received:	_Tracking Number:

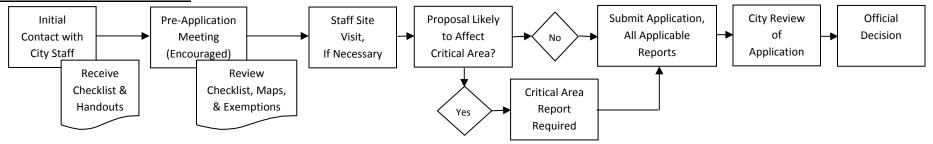


CRITICAL AREAS PRELIMINARY PACKET

PO Box 371 Stevenson, Washington 98648

Phone: (509)427-5970 Fax: (509)427-8202

Critical Areas Review Process:



Contact Name:	Contact Phone Number:

Criti

Other:

ica	l Areas Prel	iminary Checklist:					
1.	Subject Property Address/Location:						
2.	Tax Parcel Number:						
3.	Approximate Lot Size:						
4.	Is the Site Currently Developed? YES No (Circle One) If yes, how is i						
	developed?						
5.	Describe the	general Site topography. Check All that Apply.					
	Flat:	Less than 5-feet elevation change over entire site.					
Rolling: Slopes on site generally less than 15% (a vertical rise feet over a horizontal distance of 66 feet).							
	Hilly:	Slopes on site more than 15% and less than 30% (a vertical rise of 10 feet over a horizontal distance of 33 to 66 feet).					
	Steep:	Slopes on site greater than 30% (a vertical rise of 10 over a horizontal distance of less than 33 feet).					

Please Describe: _______

6.	Site Contains areas of year-round standing water:	YES	No	(Circle	
	One) If yes, what is the approximate depth?				

- 7. Site contains areas of seasonal standing water: **YES No** (Circle One) If yes, what is the approximate depth?_____
- 8. Site is in the floodway floodplain of a watercourse.
- 9. Site contains a creek or an area where water flows across the ground's surface? Flows are year-round Flows are seasonal
- 10. Site is primarily: Forested_____ Meadow_____ Shrubs____ Mixed____ Urban Landscaped (Lawn/Shrubs/Etc)
- 11. Obvious Wetland is Present on Site: YES No (Circle One)
- 12. Mapped Soil Type: Mapped Critical Area: