

# CRITICAL AREAS PERMIT APPLICATION



Mail: PO Box 371, Stevenson, Washington 98648 Email: [planning@ci.stevenson.wa.us](mailto:planning@ci.stevenson.wa.us) Phone: (509)427-5970

**Applicant/Contact:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

**Property Owner:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

If There are Additional Property Owners, Please Attach Additional Pages and Signatures as Necessary

## **Critical Areas on or Near Subject Property (Check All That Apply):**

- Geologically Hazardous Area     Fish & Wildlife Habitat Conservation Area     Wetland Area

## **Submittal Requirements**

*Applicants must provide the following information for all Critical Areas Permit Applications. The City will not accept applications without the required information.*

- Application Fee** (\$ \_\_\_\_\_)
- Agreement to Pay Outside Consulting Fees** (When applicable)
- Completed Application Signed by the Applicant and Property Owner**
- Critical Area Reports** (Where applicable)
  - Geotechnical Assessment     Preliminary Habitat Assessment     Wetland Delineation
- Critical Area Mitigation Plans** (Where applicable)
  - Geotechnical Stabilization     Habitat Mitigation Plan     Wetland Mitigation Plan Report
  - Erosion Control Management Plan
  - Drainage Plan

- The following information is required to evaluate requests for Expedited Review Permits. All requirements of the specific activity listed in SMC 18.13.025(C) must be met in order for the City to issue an Expedited Review Permit. It is the responsibility of the applicant to ensure all information is provided.*

- Specific Expedited Review Requested:**
  - Vegetation Removal (*View Maintenance, Hazard Tree Removal, Weed Control, Fire Safety*)
  - Emergency
  - Utilities
  - Trail/Pathway
  - Site Investigation
  - Activity subsequent to previous review

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SUBMIT TO:  
City Hall  
7121 E Loop Road

# Critical Areas Permit Application

- Site Plan** (Submitted on 8½"x11" or 11"x17" paper and showing general location the proposed activity, all existing development, and critical areas on and/or near the subject property)
- Technical Assessments** (Where applicable)
- Certification:** By checking this box, I/we hereby certify that I/we have read SMC 18.13.025, will use all reasonable methods to avoid impacts to critical areas, and will not perform any activities not authorized through expedited review.

The following information is required when an applicant asserts that SMC 18.13 would deny all reasonable economic use of a legal lot. All analyses and reports are to be prepared by a Qualified Professional. Only those reports that apply to a proposal are required, and it is the responsibility of the applicant to determine which reports will be required.

- All information required for the applicable critical area permit sought.**
- Reasonable Use Technical Assessment**
- Other Information** (Where applicable)

Applications without the required information will not be accepted. Critical Area Reports, Mitigation Plans, and all other technical assessments must be prepared by qualified professionals. The City may request 3<sup>rd</sup> party review of any submittals. The cost of such review is generally the responsibility of the applicant.

## Property Information

Applicants must provide the following information for all Critical Areas Permits.  
The City will not accept applications without the required information.

**Property Address** (Or Nearest Intersection): \_\_\_\_\_

**Tax Parcel Number:** \_\_\_\_\_ **Zoning:** \_\_\_\_\_

**Water Supply Source:**  City  Well **Sewage Disposal Method:**  City  Septic

**Brief Project Summary** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

As proponents and/or the property owners of the real property described in this proposal, our signatures indicate our approval of this proposal, with the understanding that the proposal is subject to review, approval, and/or denial under SMC Title 18.13.

I/we hereby provide written authorization for the City to reasonably access to the subject property to examine the proposal and carry out the administrative duties of the Stevenson Municipal Code.

Incomplete applications will not be accepted. • Ensure all required submittals are included.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Property Owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

For Official Use Only:

Date Application Received: \_\_\_\_\_

Date Application Complete: \_\_\_\_\_