



City of Edgewood
 2224 104th Avenue East
 Edgewood, WA 98372-1513
 Phone (253) 952-3299 FAX (253) 952-3537

Application Number: _____

SINGLE-FAMILY WETLAND CERTIFICATION

- This Certification is only to be used for septic, one-family dwellings, and associated activities.
- The Certification form shall not to be used for violations.
- This Certification shall only be used if all proposed regulated activities are outside of any wetland and/or wetland buffer.
- A scaled site plan must accompany all certification forms if the project proposal is within 165 feet of any wetlands, streams, and/or their buffers. Clearly show property lines, existing and proposed improvements, such as, drainfields, stormwater systems, clearing limits, and any wetlands, streams, and/or their buffers on site or within 300 feet of the project. *Site plan must be signed and dated by the Wetland Specialist.*
- Pursuant to EMC Title 14.30.020 Critical Areas Regulations – Wetlands, the *WASHINGTON STATE WETLANDS IDENTIFICATION AND DELINEATION MANUAL* shall be used.

1. APPLICANT: _____
 Address: _____ City _____ State _____ Zip _____
 Phone: _____

2. WETLAND SPECIALIST: _____
 Company: _____
 Address: _____ City _____ State _____ Zip _____
 Phone: _____

3. LOCATION OF PROJECT:
 Address: _____ City _____ State _____ Zip _____
 Quarter ____ Section ____ Township ____ Range ____ Tax Parcel Number: _____
 Size of Property: _____
 Directions to property: _____

4. PROJECT DESCRIPTION:
 List all proposed regulated activities pursuant to Edgewood Municipal Code, Section 14.20.020 - Critical Areas:

5. CERTIFICATION:

I, _____ of _____
(Name) (Title) (Company)

hereby certify that no wetlands are located within 165 feet of any proposed regulated activity associated with this single-family development, submitted as part of the building permit or Tacoma-Pierce County Health Department septic application for the above-referenced property.

OR

I, _____ of _____
(Name) (Title) (Company)

hereby certify that a wetland is present within 165 feet of a proposed regulated activity associated with this single-family development as indicated on the **attached site plan** and as submitted as part of the building permit or Tacoma-Pierce County Health Department application for the above-referenced property. The wetland is a Category _____ wetland as determined pursuant to EMC Chapter 14.30.070, Appendix A. I also certify that all proposed regulated activities will be outside of the wetland, the required _____ foot buffer, and an additional 15-foot building setback, as indicated on the enclosed site plan.

6. ACCEPTANCE:

I/We, _____ (Property Owner(s)) understand that the City of Edgewood reserves the right to enter the above-referenced property, further understand that the City reserves the right to deny acceptance of incorrect or inaccurate certifications from wetland specialists, and further understand that I/we, am/are responsible for limiting all regulated activity to areas outside of wetlands and buffer areas.

Signature: _____ Date _____
(Wetland Specialist)

Property Owner(s) Signature: _____ Date _____

Edgewood Planning Department – Accepted By: _____
PRINTED NAME / SIGNED
Date: _____

Cc: Tacoma/Pierce County Health Department