

# LAND USE APPLICATION



*Planning and Land Use*  
 2224 104th Ave E  
 Edgewood, WA 98372  
 253.952.3299  
[comdev@cityofedgewood.org](mailto:comdev@cityofedgewood.org)

**FILE NUMBER:** \_\_\_\_\_

A complete Land Use Application shall include the following items:

- Signed and completed application form
- Signed and completed owner authorization affidavit
- Signed and completed Financially Responsible Party Form
- Completed submittal checklist
- All required checklist items
- Applicable fee(s)

**COMPREHENSIVE PLAN AMENDMENT**       **ZONING**       **SPECIFIC USE:** \_\_\_\_\_

<b>PROJECT NAME</b>		
<b>APPLICANT</b>	<b>PHONE</b>	<b>EMAIL</b>
ADDRESS (Street, City, State, Zip)		
<b>PROPERTY OWNER</b>	<b>PHONE</b>	<b>EMAIL</b>
ADDRESS (Street, City, State, Zip)		

<b>LEGAL OWNER(s)</b> - Submit notarized documentation that all property owners agree to the proposed land action	
<b>PRIMARY PARCEL NUMBER</b>	<b>PARCEL ADDRESS</b>
ADDITIONAL PARCEL NUMBER(S)	

By my signature, I certify that I have reviewed all submittals for completeness and accuracy and that I have also reviewed and am familiar with the applicable elements of Edgewood's Comprehensive Plan and provisions of the Edgewood Municipal Code (EMC).

I also acknowledge my proposal shall not be approved unless the proposal conforms to those applicable elements and provisions, especially the specific criteria set forth for the particular type of decision under consideration.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# OWNER AUTHORIZATION AFFIDAVIT



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FILE NUMBER: \_\_\_\_\_

<b>Parcel No.</b>
<b>Name</b>
<b>Mailing Address</b>
<b>Email</b>
<b>Phone</b>

I/We, \_\_\_\_\_, am the legal owner(s) of the above parcel. I/We consent to the proposed project permit application as it has been made with the free consent and in accordance with the desires of the owner or owners.

I/We grant \_\_\_\_\_ permission to file and coordinate the project permit with the City of Edgewood on my behalf as an authorized agent for this proposed project.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC in and for the State of Washington

residing at \_\_\_\_\_

# FINANCIALLY RESPONSIBLE PARTY AFFIDAVIT



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FILE NUMBER: \_\_\_\_\_

PROJECT NAME		
RESPONSIBLE PARTY NAME		
BILLING ADDRESS (Street, City, State, Zip)		
CONTACT PERSON	PHONE	EMAIL

I, \_\_\_\_\_ understand that by signing below, I am agreeing to be the financially responsible party for the above listed project. Any and all fees for this project will be my responsibility to coordinate payment to ensure fees are paid within the required remittance timeframe. These fees include, but not limited to:

**Permit Fees**

Fees as outlines within the City of Edgewood Fee Schedule

**Reimbursement of Costs (EMC 3.35.03)**

*"Costs incurred by the city for planning, engineering, legal or other professional services, which services are performed by an independent contractor or consultant for the city for the processing and/or review of permit applications, shall be reimbursed by the applicant in addition to the basic permit fee, if any. In addition, all costs directly attributable to the processing and/or review of a permit application charged by third party service providers and incurred by the city shall also be reimbursed by the applicant."*

Also referred to 3rd party review fees. The City will request an estimate for services, which will be invoiced and collected to be held as a Deposit on Account. When the service provider completes the all or portions of the review, the City will use your Deposit on Account to cover the invoiced fees. Projects may require multiple 3rd party reviews resulting in multiple invoices to the responsible party. The City will attempt to maintain a positive despot on account balance for the project through timely communication and invoicing. Project progress will depend on the responsible party maintaining a positively funded Deposit on Account balance.

I understand that any positive fund balance after the completion of the project will be returned to the above party via City Check. If at any point during the project, a new financially responsible party needs to be designated, The City of Edgewood will be notified and a new affidavit will be submitted.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_