



SWINOMISH INDIAN TRIBAL COMMUNITY
OFFICE OF PLANNING & COMMUNITY DEVELOPMENT
11430 Moorage Way • La Conner, WA 98257
Phone 360-466-7280 FAX 360-466-1615

COMPREHENSIVE PLAN AMENDMENT & REZONE REQUEST APPLICATION FORM

APPLICATION NO. _____

A **\$500.00** application fee is due at the time of application. The Office of Planning & Community Development **MAY** authorize a refund of not more than 80 percent of the application fee prior to beginning the application review if the application is withdrawn or cancelled. The Office of Planning & Community Development will only authorize such refund upon written request from the applicant no later than 30 days after the date of payment.

SECTION 1 – APPLICANT/PROPERTY INFORMATION

Applicant/Proponent Name:			
Applicant/Proponent Address:			
Telephone:		Cell:	
Owner Name(s):			
Owner Address:			
Telephone:		Cell:	
Property Address/Location:			
Property Size/Acres:			
Type of Ownership:			
Legal Description:			

SECTION 2 – PROJECT DESCRIPTION

(include any anticipated plat submittal, lots to be created, future development type and density)

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SECTION 3 – COMPREHENSIVE PLAN/ZONING INFORMATION

(enter information for all tracts within affected property)

Tract	Acres	Current Zoning	Current Land Use	Proposed Zoning	Proposed Land Use	Adjacent Land Uses

SECTION 4 – INFRASTRUCTURE INFORMATION

Water/Sewer Service Providers (if not available, indicate existing/proposed service):

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Roadway(s) providing primary access to property:

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Roadway width:

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Classification:

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The following attachments and/or additional information is **required** for this application:

- Documentation of property ownership (deed, title, or similar documentation)
- Current map of affected property (survey, plat, or similar documentation)
- List of owner names and addresses for all property owners within 300 feet of affected property (information can be obtained from Swinomish Realty Office or Skagit County Planning & Permit Center)

NOTE: If a Traffic Impact Analysis (TIA) is required, it must be submitted and reviewed prior to consideration of the rezone application by the Planning Commission.

Application is hereby made for a permit for the activities described herein. I certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief, such information is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activities. I hereby grant to the officials of the Swinomish Indian Tribal Community the right to enter the above-described location to inspect the property.

Signature: _____

Date: _____

STAFF USE ONLY

Application Reviewed By:	Required Attachments Received?	YES / NO
Traffic impact analysis is required. The applicant’s consultant must meet with SITC planning staff to discuss scope and requirement of the traffic study.		YES / NO
Traffic impact analysis is not required. Traffic generated by the proposed action is not anticipated to negatively impact existing LOS.		YES / NO
Traffic impact analysis has been waived for the following reason(s):		