



Project Name: _____ Project Type: _____ Project Description: _____ _____ _____ _____	Permit #: <div style="text-align: center; border: 1px solid black; padding: 5px; margin: 10px 0;">STAFF USE AREA</div> <div style="text-align: right; font-size: small;">Date stamp</div>
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Submittal Requirements: Applicant, please check each box under the applicant heading on this checklist to confirm items included in your submittal. Submittal of requested information for a pre-application meeting does not vest the application. Pre-application reviews are based on the information available at the time of review. If additional information becomes available during review of an application, additional conditions or studies may be required.

1	Appl.	Staff		# of Copies
	<input type="checkbox"/>	<input type="checkbox"/>	Permit Application	1
	<input type="checkbox"/>	<input type="checkbox"/>	Site Plan	8
	<input type="checkbox"/>	<input type="checkbox"/>	SEPA Checklist (if applicable)	2
	<input type="checkbox"/>	<input type="checkbox"/>	Reports and any other related project documents	8
	<input type="checkbox"/>	<input type="checkbox"/>	On a separate sheet of paper, provide the following information:	8
			a. Project description b. Existing zone c. Size of project site d. Assessor's tax parcel number e. Availability of water and sewer f. Development existing on subject property g. Development on adjoining properties h. Neighborhood land use characteristics i. Description and name of road(s) providing legal access to site, as well as internal circulation, sidewalks, etc. j. Description and type of environmentally critical areas on or near the site (if any) k. If a subdivision, indicate density, lot size and access and how they meet the City of Kenmore development regulations l. Landscaping requirements (if any) m. If commercial or multi-family development describe proposed use(s) and square footage by floor level, and parking requirements n. A preliminary site plan, preliminary plat or other documents drawn to scale of the proposed development o. Conceptual surface water drainage plans p. Any other information as required by the Director.	

2	Applicant, please check each corresponding box next to the issue(s) you wish to discuss and, if possible, please include your concerns/questions. This will help staff to research and prepare for the meeting.	
	<input type="checkbox"/> Building <input type="checkbox"/> Fire Sprinkler/Alarm <input type="checkbox"/> Zoning <input type="checkbox"/> Surface Water/Drainage <input type="checkbox"/> Traffic/Access <input type="checkbox"/> Other	<input type="checkbox"/> Sensitive Areas <input type="checkbox"/> SEPA <input type="checkbox"/> Sewer/Water/Septic <input type="checkbox"/> Soils <input type="checkbox"/> Landscaping