



King County
Department of Permitting
and Environmental Review
 35030 SE Douglas Street, Suite 210
 Snoqualmie, WA 98065-9266
206-296-6600 TTY Relay: 711
 www.kingcounty.gov

Land Use Permit Application Form

For alternate formats, call 206-296-6600.

Staff Use Only - Do not write in this box

Application

Date Received (stamp)

DO NOT WRITE ABOVE THIS DIVIDER

I (We) request the following permit(s) or approval(s):

- | | | |
|---|--|--|
| <input type="checkbox"/> Binding site plan
<input type="checkbox"/> Boundary line adjustment
<input type="checkbox"/> Building permit
<input type="checkbox"/> Conditional use permit
<input type="checkbox"/> Critical areas alteration exception
<input type="checkbox"/> Linear <input type="checkbox"/> Non-linear
<input type="checkbox"/> Drainage variance or adjustment
<input type="checkbox"/> Period review for mining sites
<input type="checkbox"/> Plat alteration
<input type="checkbox"/> Plat vacation
<input type="checkbox"/> P-suffix amendment | <input type="checkbox"/> Public agency & utility exception
<input type="checkbox"/> Reasonable use exception
<input type="checkbox"/> Reuse of public schools
<input type="checkbox"/> Right-of-Way use permit
<input type="checkbox"/> Road variance
<input type="checkbox"/> Shoreline conditional use permit
<input type="checkbox"/> Shoreline exemption
<input type="checkbox"/> Shoreline redesignation
<input type="checkbox"/> Shoreline substantial development permit
<input type="checkbox"/> Shoreline variance | <input type="checkbox"/> Site development permit
<input type="checkbox"/> Site-specific comprehensive plan amendment
<input type="checkbox"/> Special district overlay removal
<input type="checkbox"/> Special use permit
<input checked="" type="checkbox"/> Subdivision – Formal
<input type="checkbox"/> Subdivision – Short
<input type="checkbox"/> Temporary use permit
<input type="checkbox"/> Urban planned development
<input type="checkbox"/> Zone reclassification
<input type="checkbox"/> Zoning variance |
|---|--|--|

I, Cory Brandt, being duly sworn, state that I am the owner or officer of the corporation owning property described in the legal description filed with this application and that I have reviewed the rules and regulations of the Department of Permitting and Environmental Review (Permitting) regarding the preparation and filing of this application and that all statements, answers and information submitted with this application are in all respects true, accurate and complete to the best of my knowledge and belief.

During the review of this application, it may be necessary for Permitting staff to make one or more site visits. By signing this application form, you are giving permission for these visits. If it is rental property, the owner hereby agrees to notify tenants of possible site visits.

Printed Name Cory Brandt Signature

Company ~~Cory Brandt Group~~ Slalom Construction LLC

Phone 206 - 419 - 2679 E-mail cory@Corybrandtgroup.com

Mailing Address 3038 -198th Ave SE Sammamish WA 98075
STREET CITY ST ZIP

If applicable, state below the name, address and telephone number of the authorized applicant for this application as shown on the Certification and Transfer of Application Status form filed with this application.

Name _____

Phone - - E-mail _____

Mailing Address _____
STREET CITY ST ZIP

Send the posting package for the notice board for this application to:

- the owner/applicant the consultant/agent (engineer, architect, etc.)

Send letters, including those requesting additional information for this application, to:

- the owner/applicant the consultant/agent

Note: Application forms and submittal requirements are subject to revision without notice.

For Formal Subdivisions only:

Fall City II

 NAME OF SUBDIVISION

D.R. STRONG Consulting Engineers

 REGISTERED LAND SURVEYOR (COMPANY)

620 7th Avenue

 STREET ADDRESS

Kirkland WA 98033-

 CITY STATE ZIP

James G. Reichhoff, P.L.S.

 NAME (INDIVIDUAL)

425 - 827 - 3063

 TELEPHONE

james.reichhoff@drstrong.com

 E-MAIL

D.R. STRONG Consulting Engineers

 ENGINEER (COMPANY)

620 7th Avenue

 STREET ADDRESS

Kirkland WA 98033-

 CITY STATE ZIP

Maher A. Joudi, P.E.

 NAME (INDIVIDUAL)

425 - 827 - 3063

 TELEPHONE

maher.joudi@drstrong.com

 E-MAIL

 DEVELOPER (COMPANY)

 STREET ADDRESS

 CITY STATE ZIP

 NAME (INDIVIDUAL)

 TELEPHONE

 E-MAIL

Land Surveyor's Certification

I hereby certify that the accompanying plat has been inspected by me and conforms to all rules and regulations of the platting resolution and standards for King County, Washington.

Land Surveyor Seal

 SIGNED

 DATE

Check out the Permitting Web site at www.kingcounty.gov/permits