LAND USE MASTER APPLICATION



This Section for Staff Use Only	
Permit Number:	Date Received:
Staff Contact:	
	with a permit specific checklist form (i.e. short plat, conditional use neral information on the project as well as contact information for
PROJECT INFORMATION	
Name of Project:	
Project Address:	
Parcel number(s):	
Pre-App # or Related Permits:	
OWNER INFORMATION	
Name:	Company Name (<i>if applicable</i>):
Address:	
Phone:	Email:
APPLICANT INFORMATION	☐ Same as owner
Name:	Company Name (if applicable):
Address:	
	Email:
AGENT INFORMATION (point of contact)	
Name:	Company Name (<i>if applicable</i>):
Address:	
Phone:	Fmail:

Updated April 2021 Page **1** of **2**

A PORTION OF SECTION 04, TOWNSHIP 21 N., RANGE 06 E., W.M. ZONING: CITY OF BLACK DIAMOND, KING COUNTY, WASHINGTON		Comp Plan Designation:	
Size (acres/ sq. ft.):		Existing Land Use: :	
Does the site contain and	y of the following environmentall	y sensitive areas? Check all that ap	oply:
☐ Flood Hazard	☐ Landslide Hazard Area	☐ Seismic Hazard Area	☐ Shoreline
☐ Steep Slope Hazard	☐ Coal Mine Hazard Area	☐ Wetlands	☐ Streams
Description of proposed	work:		
CERTIFICATION	S AND SIGNATURES		
listed agent to act as my	our agent on my/our behalf for	re and involved in this application. this application for the subject pro s of the State of Washington that	operty within the City of Black
Owner Signature:	Mark S Gray	Date:	
Printed Name:			
	at I have the authority to carry o	information provided in this applic ut the proposed activities, and I ag	
Authorized Agent Signat	ture: <u>Kevin Willia</u>	<i>ms</i> Date:1_	.19.22
Printed Name: K	evin Williams		

Updated April 2021 Page **2** of **2**