

REQUEST FOR REVIEW

MARYSVILLE

Community Development Department • 501 Delta Avenue • Marysville, WA 98270

Office Hours: Mon - Fri 8:00 AM - 4:30 PM • Phone: (360) 363-8000

PROJECT INFORMATION										
File Number	PA23-008		Date Sent		6/	2/2023	2023 Please Return		6/16/2023	
Project Title	Krykun Duplex CUP	Related F Number(s	_	Pr	eA21-060					
Project Description	2-story duplex in the R4.5 zone. Subject property contains steep slopes, a wetland and wetland and stream buffers.									
BACKGROUND SUMMARY										
Applicant	Pavel Krykun									
Location	10408 Shoultes Rd	APNs	300	051600100800						
Acreage	1.00 acres		Section	10	6 Township 30		30N	Ra	nge	05E
Comprehensive Plan	Single Family Zoning Medium	R-4.5	Shoreline	e Env	vironment N/A					
REVIEWING AGENCIES										
Marysville	Local Agencies & Districts	State 8	k Federal		County Other					
Building Parks Police PW - Development Services PW - Engineering PW - Operations PW - Solid Waste PW - Streets PW - Traffic Eng. PW - Water Res. PW - WWTP	Arlington Airport Arlington (city) Comcast Community Transit Everett (city) Lake Stevens (city) Lake Stevens SD 4 Lakewood SD 306 Marysville Fire District Marysville SD 25 PUD No. 1 (electric) Ziply	Engine BNSF DAHP DNR DOE (B DOE (F	Bellevue) Floodplain) Register) Shorelands)	Health District Planning Public Works - Land Developn			-	t Olympic Pipeline Puget Sound Energy Stillaguamish Tribe Tulalip Tribes		
PROJECT MANAGER										
Name Kathryn Bird Title Associate Planner Phone 360.969.1106 E-mail kbird@marysvillewa.gov										
The City of Marysville Community Development Department is reviewing this application and encourages other affected agencies, departments, community groups and municipalities to respond. Your comments will assist the City's evaluation of this application. Furthermore, you will become a Party of Record to this case if you submit a response with your name and address. We highly recommend that you send your comments on letterhead. Without a full name and address, you will not be considered a Party of Record. You may e-mail, fax or send via regular mail your comments to this project manager listed above.										
If you have no comments, please check the box below, sign and return this form to the project manager.										
■ NO COMMENTS	Signature: Date:									
ATTACHED	Title:					Agency:				