

ATTACHED

Title: ____

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	SP23-004		Date Sent		07.05.23 Please Return		1 11 / 26 23		
Project Title	Bazara SP		Related F Number(s	_	PREA23-022				
Project Description	Two (2) lot short subdivision creating a panhandle lot behind an existing residence with an accessory structure. The applicant is retaining the existing single-family residence and accessory shop. The existing carport and gazebo will be removed.								
BACKGROUND SUMMARY									
Applicant Walid Bazara (Applicant) c/o Elden McCall, P.E. – Mac Engineering (Contact)									
Location	12508 45 th DR NE	APNs	006	555700001000					
Acreage (SF)	0.51 (22,216 SF)	SF)		04	Township	30	30 Ra		05
Comprehensive Plan	Single Family Zoning Medium	R-4.5	Shoreline	Env	ironment	N/A			
REVIEWING AGENCIES									
Marysville	Local Agencies & Districts	State &	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	Everett (city) Lake Stevens (city) Lake Stevens SD 4 Lakewood SD 306 Marysville Fire District Marysville SD 25 PUD No. 1 (electric) Ziply	Engined BNSF DMHP DNR DOE (B DKe Stevens (city) Ake Stevens SD 4 Akewood SD 306 Arysville Fire Arysville SD 25 DD No. 1 (electric)			Health Distri	; -	Olympic Pipeline Puget Sound Energy Stillaguamish Tribe Tulalip Tribes		
PROJECT MANAGER Name Michael Beck Title Planning Technician Phone 360.363.8220 E-mail mbeck@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:									

Agency: