



MARYSVILLE
COMMUNITY DEVELOPMENT

MASTER LAND USE PERMIT APPLICATION

Community Development Department ♦ 501 Delta Avenue ♦ Marysville, WA 98270
Office Hours: Mon - Fri 8:00 AM - 4:30 PM ♦ Phone: (360) 363-8000

SITE INFORMATION			
SITE ADDRESS:		APN(S):	
PROPOSED PROJECT NAME:		SECTION, TOWNSHIP, & RANGE:	
LAND USE (ZONING) DESIGNATION:		SHORELINE ENVIRONMENT:	
WATER SUPPLY	Current: Proposed:	SEWER SUPPLY	Current: Proposed:
PRESENT USE OF PROPERTY:			
PRE-APPLICATION CONFERENCE HELD? <input type="checkbox"/> Yes, the City file # is _____ <input type="checkbox"/> No			
	PROPERTY OWNER	APPLICANT	PROJECT CONTACT
NAME			
ADDRESS			
CITY, STATE, ZIP			
PHONE			
E-MAIL			
PROJECT INFORMATION			
TYPE OF APPLICATION (Check all that apply): <i>**Permit type has supplemental checklist that must be submitted with Master Land Use Permit Application</i>			
<input type="checkbox"/> Annexation Request	<input type="checkbox"/> Grading Permit	<input type="checkbox"/> SEPA Environmental Review**	
<input type="checkbox"/> Binding Site Plan (Preliminary)**	<input type="checkbox"/> Major Subdivision (Preliminary)**	<input type="checkbox"/> Rezone	
<input type="checkbox"/> Boundary Line Adjustment**	<input type="checkbox"/> Modification**	<input type="checkbox"/> Shoreline**	
<input type="checkbox"/> Comprehensive Plan Amendment**	<input type="checkbox"/> Minor	<input type="checkbox"/> SDP Exemption	
<input type="checkbox"/> Conditional Use Permit**	<input type="checkbox"/> Major	<input type="checkbox"/> Substantial Dev. Permit	
<input type="checkbox"/> Critical Area Review	<input type="checkbox"/> Planned Residential Dev. (PRD)**	<input type="checkbox"/> Conditional Use Permit	
<input type="checkbox"/> Final Plat Review**	<input type="checkbox"/> Site Plan Review**	<input type="checkbox"/> Variance	
<input type="checkbox"/> BSP	<input type="checkbox"/> Commercial	<input type="checkbox"/> Variance**	
<input type="checkbox"/> Short Plat	<input type="checkbox"/> Multifamily	<input type="checkbox"/> Wireless Communication Facility**	
<input type="checkbox"/> Major Subdivision	<input type="checkbox"/> Short Plat (Preliminary)	<input type="checkbox"/> Other	
LIST ANY OTHER PERMITS NEEDED (State/Federal):			
DETAILED PROJECT DESCRIPTION:			

I certify that I am the owner or owners authorized agent. If acting as an authorized agent, I further certify that I am authorized to act as the Owners agent regarding the property at the above-referenced address for the purpose of filing applications for decision, permits, or review under the Unified Development Code and other applicable Marysville Municipal Codes and I have full power and authority to perform on behalf of the Owner all acts required to enable the City to process and review such applications.

I certify that the information on this application is true and correct and that the applicable requirements of the City of Marysville will be met. I grant permission for City employees, agents of the City and/or other agency officials to enter the subject property, if necessary, for the purpose of site inspection.

Brian Kalab

Owner/Owner's Authorized Agent

Date