



# City of Moxee

255 W Seattle ave, PO Box 249 Moxee, Wa 98936  
Phone 509-575-8851 Fax 509-575-8852

## GENERAL APPLICATION FORM

### For Land Use Actions

**CHECK ALL THAT APPLY AND ATTACH THE APPROPRIATE SUPPLEMENTAL FORM(S)**

<u>Zoning</u>		<u>Subdivision</u>	<u>Other</u>
<input type="checkbox"/> Level 1 Use	<input type="checkbox"/> Admin. Adjustment	<input type="checkbox"/> Exemption (SSE)	<input type="checkbox"/> Environmental Checklist
<input type="checkbox"/> Level 2 Use	<input type="checkbox"/> Variance	<input type="checkbox"/> Short Subdivision	<input type="checkbox"/> Appeal __HE __City Council
<input type="checkbox"/> Level 3 Use	<input type="checkbox"/> Non-Conforming Use	<input type="checkbox"/> Binding Site Plan	<input type="checkbox"/> Critical Areas
<input type="checkbox"/> Rezone	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Alteration/Vacation	<input type="checkbox"/> Plan/Dev Reg Map Ad
		<input type="checkbox"/> Subdivision Variance	<input type="checkbox"/> Plan/Dev Reg Text Ad
		<input checked="" type="checkbox"/> Subdivision (Long Plat)	<input type="checkbox"/> Develop. Agreement
			<input type="checkbox"/> Other _____

### SUBJECT PROPERTY INFORMATION

Parcel Number(s): \_\_\_\_\_ Property Address: \_\_\_\_\_  
 A. \_\_\_\_\_  
 B. \_\_\_\_\_ Zoning District: \_\_\_\_\_  
 C. \_\_\_\_\_  
 D. \_\_\_\_\_

### Applicant Information: (Please Check Contact Person)

By signing this form, I hereby state as true that all ownership interests of the property have reviewed the proposal as presented in the application materials and support the proposed change(s) in land use.

**Property Owner:** \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ Company (if any): \_\_\_\_\_  
 Owner of Parcel(s): \_\_\_\_\_  
 Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_  
**Signature:** \_\_\_\_\_

**Agent/Contact Person (If different):** \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ Company (if any): \_\_\_\_\_  
 Owner of Parcel(s): \_\_\_\_\_  
 Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*If there are additional property owners, provide an attachment in the same format and with the same declaration*

(Staff Use Only)

Date: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Reviewed By: \_\_\_\_\_ Project # \_\_\_\_\_



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## PRELIMINARY LONG PLAT APPLICATION

### **INSTRUCTIONS TO APPLICANT:**

Application and preliminary plat must be accompanied by:

- a. Filing fee of \$350.00 plus \$10.00 per lot
- b. 5 copies of Preliminary Plat
- c. Environmental Checklist \$200.00 Fee
- d. Title Report (Must be current and reflect the undersigned signatures)
- e. 11 x 17 inch reduced copy of plat (For adjacent neighborhood mail-out)

1. **Name of Applicant:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

2. **Name of Subdivision:** \_\_\_\_\_

3. **Number of lots:** \_\_\_\_\_

4. **Type of building to be constructed:** \_\_\_\_\_

5. **Property owners authorization:**

I hereby authorize the submittal of the Preliminary Plat of \_\_\_\_\_  
to the City of Moxee for approval. *Name of Plat*

I understand that conditions of approval such as dedication of right-of-way and easements, restrictions on the type of buildings that may be constructed, and access restrictions from public roads may be imposed as a part of preliminary plat approval and that failure to meet these conditions may result in denial of the final plat.

<b>6. Signature of Owner(s):</b>	<b>Date</b>
_____	_____
_____	_____
_____	_____

<b>7. Signature of Contract Purchaser(s):</b>	<b>Date</b>
_____	_____
_____	_____
_____	_____

8. **Parcel Number:** \_\_\_\_\_

9. **Legal Description of proposed plat:** \_\_\_\_\_