



CITY OF CHELAN

SBSP # _____
RECEIPT # _____

APPLICATION FOR SPECIFIC BINDING SITE PLAN

Please use blue or black ink

Fee: \$ 300 + \$20 per lot

Applicant: _____ Owner: _____

Mailing Address: _____

Telephone: _____

If the applicant is not the present owner, what is his/her interest: _____

Location of Property (include section/township/range): _____

Assessor's Parcel Number(s): _____

The specific binding site plan shall consist of one or more sheets 18 by 24 inches clearly and legibly drawn in permanent black ink on tracing cloth, stable base mylar polyester film or equivalent approved material acceptable to the engineer. The specific binding site plan shall include an accurate map of the subdivided land based on a complete survey. The maps shall include the following information:

- _____ Each sheet must have a two-inch blank margin on the left side, and one inch on the remaining sides.
- _____ The map scale
- _____ The plans shall show all details clearly and in no case smaller than one inch (1") equals 100 feet nor greater than one inch (1") equals 50 feet.
- _____ The perimeter of the binding site plan shall be depicted with heavier lines than appear elsewhere on the plan.
- _____ Each sheet of the specific plan shall contain the binding site plan name, the graphic scale, and the north point.
- _____ All signatures shall be written in permanent black ink
- _____ Section, township, range, municipal and county lines lying within or adjacent to the binding site plan
- _____ The location of all monuments or other evidence used as ties to establish the subdivision boundaries
- _____ Location of all permanent control monuments found and established within the binding site plan
- _____ The length and bearings of all straight lines; the radii, arch, areas, and semi-tangents of all curves
- _____ Boundaries of the binding site plan with complete bearings and lineal dimensions.
- _____ The length of each lot line together with bearings and other data necessary for the location of any lot lines in the field.
- _____ The location, width, centerline, and name or number of all streets within and adjoining the binding site plan.
- _____ The location and width, shown with broken lines, and description of all easements.
- _____ Numbers assigned to all lots and blocks within the binding site plan
- _____ Names of owners of land adjacent to the binding site plan and the names of any adjacent subdivision
- _____ Delineation of the flood plain when present

ONE ELECTRONIC copy of the specific binding site plan shall be submitted at the time of application. In addition to the map(s), the specific binding site plan shall contain the following written data:

The name of the binding site plan

The legal description of land contained within the general binding site plan

The certificate of the registered land surveyor who made or under whose supervision was made the survey of the subdivision, in substantially the following language:

“I, _____, registered as a land surveyor by the State of Washington, certify that this specific binding site plan is based on an actual survey of the land described herein, conducted by me or under my supervision, during the period ____ (Date begun) ____, through ____ (Date finished) ____; that the distances, courses, and angles are shown thereon correctly; and that the monuments other than those monuments approved for setting at a later date, have been set and lot corners staked on the ground as depicted on the specific binding site plan.”

A statement of approval signed by the engineer as to survey data; layout of streets, alleys, and easements; street names and numbers; and the design and/or construction of protective improvements, bridges, water, sewage and drainage systems;

Provide copy of plans and specifications with copy of approval letter approving water system by Department of Social and Health Services and approving the sewer system by the Department of Ecology. Upon completion of water improvement, provide copy of certification of inspection and installation (DSHS Form 9-346). Also provide as-built drawings. Upon completion of sewage facilities submit copy of licensed engineer certification to DOE indicating installation in accordance with plans and specification. Submit copy of as-built sewer drawings. Compliance with the above requirements will be required before any connections to any segment of the water and sewer improvement;

A statement of approval signed by the county health office as to the design and/or construction of sanitary sewage disposal systems and public water supply systems installed in the binding site plan; provided, however, that no such statement shall be deemed a guarantee of acceptability of securing a permit for individual septic tank systems on individual lots within the subdivision;

A certificate bearing the typed or printed names of all persons having an interest in the land within the binding site plan, signed by the persons and acknowledged by them before a notary public consenting to the binding site plan and reciting a dedication by them of all lands shown on the plan to be dedicated for public uses, and a waiver by them of all claims for damages against any governmental authority which may be occasioned to the adjacent land by the established construction drainage, and maintenance of public streets;

A certificate signed by the county treasurer that all taxes one year in advance on all unimproved property in each proposed binding site plan, and delinquent assessment for which the land within the binding site plan may be liable, have been duly paid and satisfied or discharged.

Space for approval by the city council.

Auditor's file number of the applicable general binding site plan.

A statement indicating that all development on the subject parcel is bound to the site plan

Reference by recording number to the covenants, conditions and restrictions and property owners' association incorporation documents applicable to the property.

I hereby certify that I will pay all fees as required by law. I also hereby certify under penalty of perjury under the laws of the State of Washington that the above answers are true and complete to the best of my knowledge. I understand that the lead agency is relying on them to make its decision.

Date Submitted: _____

Applicant Signature

Print Name _____

Place Where Signed: _____, WA

Date Submitted: _____

Authorized Agent Signature

Print Name _____

Place Where Signed: _____, WA

ACKNOWLEDGMENT

State of Washington)

)

County of Chelan)

On this day personally appeared before me _____ to be known to be the individual described in and who executed the within and foregoing instrument and acknowledge to me that he/she/they signed the same as his/her/their free and voluntary act and deed for the uses and purposes therein mentioned.

NOTARY PUBLIC in and for the State of Washington

Residing in: _____

Date: _____

Commission Expires: _____

**CITY OF CHELAN
CRITICAL AREAS REVIEW CHECKLIST**

Completion of this environmental review checklist shall be required prior to any development or other alteration in or within 250' (two hundred and fifty feet) of any known or potential Critical Area in the City of Chelan or its UGA. An application submitted for any use or activity requiring a permit shall not be considered complete until this form has been completed, signed and placed in the project file. This checklist is not a substitute for an Environmental Checklist required under SEPA.

GENERAL INFORMATION—to be completed by the applicant when this checklist is submitted

Applicant		
Name:		
<input type="checkbox"/> Landowner <input type="checkbox"/> Owner's agent. If agent, landowner's name:		
Address:		
City:	State:	ZIP:
Phone:	FAX:	Email:
Site		
Address:		
Parcel Number(s):		
Zoning District:		

Brief description of project:

Please attach any information that will assist the City in its preliminary evaluation of the proposed alteration.

I hereby certify that I will pay all fees, if any, as required by law. I also hereby certify under penalty of perjury under the laws of the State of Washington that the above answers are true and complete to the best of my knowledge. I understand that the lead agency is relying on them to make its decision.

Applicant Signature _____ Date Submitted: _____

Print Name _____

Place Where Signed: _____, WA

FOR OFFICIAL USE ONLY

FINDINGS AND STUDY REQUIREMENTS—to be completed by the Administrator based on his or her preliminary evaluation

Administrator's findings based on Preliminary Evaluation:

- ☐ (A) The proposed alteration is not located in or in such proximity to a Critical Area defined by Chapter 14.10 that it poses a threat to proposed development or to the health or safety of humans or the environment of the subject property or adjacent properties. No further study is required at this time.
- ☐ (B) The proposed alteration is in or adjacent to a Critical Area and is exempt from the requirements of the Critical Area Ordinance (Chapter 14.10). Nature of Exemption and code section:

- ☐ (C) The proposed alteration is located in or adjacent to, or includes project actions that may affect, one or more Critical Areas, as indicated below:

- | | | |
|--|---|--|
| <input type="checkbox"/> Wetland | <input type="checkbox"/> Critical Aquifer Recharge Area | <input type="checkbox"/> Fish and Wildlife Habitat Conservation Area |
| <input type="checkbox"/> Geologically Hazardous Area | <input type="checkbox"/> Frequently Flooded Area | |

Information source(s) used by the Administrator in his or her preliminary evaluation:

- | | | |
|---|--|---|
| <input type="checkbox"/> City of Chelan generalized Critical Areas map | <input type="checkbox"/> Wetland map based on the NWI | <input type="checkbox"/> SWAP map |
| <input type="checkbox"/> PHS Maps or other maps based on current PHS data | <input type="checkbox"/> <i>The Flood Insurance Study for the City of Chelan</i> | <input type="checkbox"/> <i>Chelan County Soil Survey</i> |
| <input type="checkbox"/> <i>Seismic Design Category Map for Residential Construction in Washington, Sheet 2</i> | | |
| <input type="checkbox"/> Other | | |

The Administrator requires that the following information be provided:

- ☐ Critical area study for Wetlands
- ☐ Wetland identification and delineation
- ☐ Critical area study for Critical Aquifer Recharge Areas
- ☐ Hydrogeologic evaluation (required as part of Critical Area Study if the applicant is requesting that the City declassify or reclassify a specific area designated as a Critical Aquifer Recharge Area)
- ☐ Critical area study for Fish and Wildlife Habitat Conservation Areas
- ☐ Critical area study for Geologically Hazardous Areas

Note: no Critical Area Study is required for Frequently Flooded Areas; however, all development in such areas requires compliance with the City's Flood Hazard Areas provisions (Chapter 15.10, CMC)

continued on next page

CHECKLIST DOCUMENTATION—to be completed by the Administrator and signed by the Administrator and the applicant when all required information has been submitted and any permit conditions have been determined.

- ☐ Documentation of preliminary evaluation is attached
- ☐ Documentation of Administrator's findings supporting any exemption, exception, or waiver is attached
- ☐ Any required information (e.g., Critical Area Study) is attached
- ☐ Any permit conditions, including but not limited to requirements for mitigation, monitoring and reporting, or buffers, are attached

For the City of Chelan:

The attached information, including any required Critical Area Study, Administrative findings, and permit conditions, satisfies the intent of Chapter 14.10 related to the protection of Critical Areas, public and private property, and the public health, safety, and welfare.

Name: _____ Date: _____

Title: _____

Owner/Applicant: The information provided is the best information available concerning the location of Critical Areas as defined by Chapter 14.10. The proposed alteration and the mitigation proposed will, to the greatest extent possible, protect Critical Areas, public and private property and the public health, safety, and welfare.

Name: _____ Date: _____

Title: _____

OWNERSHIP CERTIFICATION

I, _____, hereby certify that I am the major property owner(s) or officer of the corporation owning the property described in the attached application. I also hereby certify under penalty of perjury under the laws of the State of Washington that this application and that the statements, answers, and information are in all respects true and correct to the best of my knowledge and belief. I have also familiarized myself with the rules and regulations of the City of Chelan

Property Address: _____ Project Desc.: _____

Mailing Address: _____

City and State: _____ Zip Code: _____

Phone: _____

Signature: _____

Date: _____

For: _____

Parcel No.: _____

(Corporation or company name)

ACKNOWLEDGMENT

State of Washington)

)

County of Chelan)

On this day personally appeared before me _____ to be known to be the individual described in and who executed the within and foregoing instrument and acknowledge to me that (*he, she, they*) signed the same as (*his, her, their*) free and voluntary act and deed for the uses and purposes therein mentioned.

NOTARY PUBLIC in and for the State of Washington

Printed Name: _____

Commission Expires: _____

Residing in: _____

Date: _____

Other property owners included in this application must be listed below: (attach additional sheet if necessary)

Name: _____ Signature: _____

Address: _____ City/State: _____ Zip: _____