



**CITY OF CHELAN PLANNED DEVELOPMENT APPLICATION**

**PLEASE TYPE OR USE "BLACK INK"**

Applicant: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

Application Fee: \$2,500 + \$75/acre

Hearing Examiner: \$625

SEPA Fee: \$250

Location of Property: \_\_\_\_\_

THE UNDERSIGNED HEREBY PETITIONS THE CITY OF CHELAN CITY COUNCIL TO CHANGE THE ZONING CLASSIFICATION OF THE FOLLOWING DESCRIBED PROPERTY FROM \_\_\_\_\_ DISTRICT TO \_\_\_\_\_ DISTRICT.

Legal Description (Attached if necessary): \_\_\_\_\_

1) Describe why the proposed zoning classification is more suitable for the subject property than the present classification.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) Describe the circumstances relating to the property which have changed to make the proposed zoning classification necessary:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) Describe how the proposal is commensurate with the comprehensive plan and why the proposal and permitted uses would not adversely affect other properties in the area:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

