Planning and Community Development
1812 Main Street, P O Box 257
Lake Stevens WA 98258
Phone Number (425) 377-3235

To Be Completed By Staff
Date of Application: _____
Staff Initials: _____
Permit Number: _____

CHANGE OF USE SUPPLEMENTAL – TYPE I

Applicant	Name/Company:		
	Address:	City/State/Zip:	
	Phone:	Applicants relationship to owner:	
	Fax:	Email:	
Property Info	Site Address:		
	Assessor Parcel No:	Property Square Feet:	Acres:
	Land Use Designation:	Zoning:	
Property Owner	Name/Company:		
	Address:	City/State/Zip:	
	Phone:	Email:	
	Fax:		
Business Info	Business Name:	Parking stalls dedicated to business:	
	Size of tenant space (square feet):		
	Previous use of building or tenant space:		
	Proposed business type (detailed description):		
	Describe materials processed or sold?		
	Hours of operation?		

You may not begin any activity until a decision has been made, including the resolution of any appeal (LSMC 14.16A). Conditions or restrictions may be placed on your permit if it is approved. This application expires 180 days after the last date that additional information is requested (LSMC 14.16A.245)

I DECLARE UNDER PENALTY OF THE PERJURY LAWS THAT THE INFORMATION I HAVE PROVIDED ON THIS APPLICATION IS TRUE, CORRECT AND COMPLETE. By affixing my signature I certify that I am the legal owner of the property for which this application is issued or an authorized agent of the owner.

Applicant

Signature: _____

Date: _____

Property Owner

Signature: _____

Date: _____

APPLICANT REQUIRED SUBMITTAL MATERIALS:

- ✓ Floor Plan to scale with dimensions
- ✓ Site plan to scale:
  -Parking layout including ADA
  -Building location with setbacks from property line

- Permits from other agencies may be required, such as the Sewer District, PUD Water, Health District, etc.
- Separate permits for Tenant Improvements and/or Signs may be required.

FOR CITY USE ONLY **INSPECTIONS/APPROVALS**			
PLANNING:		☐ Approved	☐ Not Approved ☐ N/A
Signature:_____		Date:_____	
Criteria 14.16C.030(f):	(1) Hours of operation - ☐ Meets (2) Materials processed or sold - ☐ Meets (3) Required parking - ☐ Meets # Required_____ (4) Traffic generation - ☐ Meets (5) Impact on public utilities - ☐ Meets (6) Clientele - ☐ Meets (7) General appearance and location - ☐ Meets		
Comments:_____			
BUILDING:		☐ Approved	☐ Not Approved ☐ N/A
Signature:_____		Date:_____	
Comments:_____			
FIRE:		☐ Approved	☐ Not Approved ☐ N/A
Signature:_____		Date:_____	
Comments:_____			
ENGINEERING/PUBLIC OWRKS:		☐ Approved	☐ Not Approved ☐ N/A
Signature:_____		Date:_____	
Comments:_____			
Change of Use Issue Date:		**C of O Issue Date:**	

NOTE ON ENTERING PROPERTY

The City of Lake Stevens may enter onto the property, which is the subject of this application during the hours of 7:00 a.m. to 5:00 p.m., Monday – Friday, for the sole purpose of inspecting the limited area of the property, which is necessary to process this application. In the event the City determines that such an inspection is necessary during a different time or day, the City employees or agents will contact applicant verbally or in writing at least 24 hours before entering.