



TYPE IV, V AND VI - COUNCIL DECISIONS LAND USE DEVELOPMENT HANDOUT

Effective January 1, 2026, this document is no longer a requirement for the application; instead, it serves as a guide to the information needed to complete the Master Land Use Application in Citizen Connect.

CHECK ONE		
TYPE IV – Quasi-judicial	TYPE V – Quasi-judicial	TYPE VI – Legislative
<input type="checkbox"/> Essential Public Facility	<input type="checkbox"/> Plat Alterations	<input type="checkbox"/> Comprehensive Plan Amendment, Map and Text
<input type="checkbox"/> Planned Neighborhood Development	<input type="checkbox"/> Plat Vacations	<input type="checkbox"/> Development Agreements
<input type="checkbox"/> Rezone – Site Specific Zoning Map Amendment	<input type="checkbox"/> Right-of-Way Vacations	<input type="checkbox"/> Land Use Code Amendments
<input type="checkbox"/> Secure Community Transition Facility	<input type="checkbox"/> Type V Other: _____	<input type="checkbox"/> Rezones – Area Wide Zoning Map Amendments
<input type="checkbox"/> Type IV Other: _____		<input type="checkbox"/> Type VI Other: _____

ARE ANY LOWER LEVEL PERMITS REQUIRED? Yes No Describe: _____

Property Information	Site Address: _____			
	Assessor Parcel No: _____	Area of property: _____	Square Feet: _____	Acres: _____
	Land Use Designation: _____		Zoning: _____	
	Number of Buildings on Site: _____		Number to be Retained: _____	
	Existing Impervious Surface Area: _____		Proposed Impervious Surface Area: _____	
Applicant	Name/Company: _____			
	Address: _____	City/State/Zip: _____		
	Phone: _____	Applicants relationship to owner: _____		
	Fax: _____	Email: _____		
Primary Contact	Name/Company: _____			
	Address: _____	City/State/Zip: _____		
	Phone: _____	Email: _____		
	Fax: _____			
Property	Name/Company: _____			
	Address: _____	City/State/Zip: _____		
	Phone: _____	Email: _____		
	Fax: _____			

Property	Name/Company: _____			
	Address: _____	City/State/Zip: _____		
	Phone: _____	Email: _____		
	Fax: _____			

	Fax:				
Project Description	Grading Quantities		Cut:	Fill:	
	Proposed project/land use (attach additional sheets if necessary):				
Building Information	Gross Floor Area of Existing and Proposed Buildings:				
	Bldg 1:	Bldg: 2	Bldg 3:	Bldg 4:	Bldg 5:
	Gross Floor Area by Use of Buildings (please describe use as well as floor area):				
	Use 1:				
	Use 2:				
	Use3:				
	Use4:				

You may not begin any activity based on this application until a decision, including the resolution of any appeal, has been made. Conditions or restrictions may be placed on your permit if it is approved. After the City has acted on your application, you will receive notice of the outcome. If an appeal is filed, you may not begin any work until the appeal is settled. You may also need approvals from other agencies; please check this before beginning any activity.

This application expires 180 days after the last date that additional information is requested (LSMC 14316A.245)

If you suspect that your site contains a stream or wetland or is adjacent to a lake, you may need a permit from the state or federal government.

I DECLARE UNDER PENALTY OF THE PERJURY LAWS THAT THE INFORMATION I HAVE PROVIDED ON THIS APPLICATION IS TRUE, CORRECT AND COMPLETE.

Signature of Property Owner/Agent

Date of Application

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.

To be completed by staff

Date of Application: _____

Staff Initials: _____

Permit Number: _____

STATEMENT OF OWNERSHIP/APPLICANT AUTHORITY

I certify or declare under penalty of perjury under the laws of the state of Washington that:

1. This application is authorized by all the land owners with authority to bind the land/property;
2. That the developer is operating under the landowner's authority;
3. That the developer and/or landowner is either an individual or a duly formed and qualified corporation, partnership, or other legal entity; and
4. That the person signing all applications or other legal documents is authorized by the legal entity and/or landowner to do so; and
5. That the application and submittals are true and correct to the best of my information.

Applicant

Signature: _____

Name: _____

Address: _____

Phone: _____

Email address: _____

Property Owner(s)

Signature: _____

Signature: _____

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Email address: _____

Email address: _____

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.

LEGAL DESCRIPTION