



City of Othello

Community Development Department

500 E. Main Street Othello, WA 99344

(509) 331-2710 Phone (509) 488-0102 Fax

LAND USE APPLICATION FORM

Project Name:	
Application Type:	
Description of Proposal:	
Applicant Name:	Address:
E-Mail Address:	Phone:
Property Owner:	Address:
E-Mail Address:	Phone:

Project Site Information:

Site address:	Zoning:	Parcel numbers:
Legal Description:		Parcel acreage:

Owner Authorization – The undersigned hereby certifies that this application has been made with the consent of the lawful property owner(s) and that all information submitted with this application is complete and correct. False statements, errors, and/or omissions may be sufficient cause for denial of the request. The application gives consent to the City to enter the properties listed above.

_____ Applicant's Signature	_____ Date	_____ Property Owner or authorized representative's signature	_____ Date
--------------------------------	---------------	---	---------------

APPLICATION TYPE: (check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Short Plat (Final) |
| <input type="checkbox"/> Appeal (Land Use) | <input type="checkbox"/> Short Plat (Preliminary) |
| <input type="checkbox"/> Binding Site Plan | <input type="checkbox"/> Subdivision (Final) |
| <input type="checkbox"/> Boundary Line Adjustment | <input type="checkbox"/> Subdivision (Preliminary) |
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Text Amendment |
| <input type="checkbox"/> Planned Unit Developments | <input type="checkbox"/> Vacation (right-of-way) |
| <input type="checkbox"/> Pre-Application Conference | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Rezone | |

APPLICATION FEE: (Staff Use Only)

\$_____ Estimated amount

\$_____ Amount paid

Date Paid: _____

Check or Receipt Number: # _____

Fully Complete Submittal Review: (Staff Use Only)

Received: _____

Fully Complete: _____

Public Notice required by: _____

Public Notice completed: _____

APPLICATION / CASE NOTES: _____
