

WHATCOM COUNTY

Planning & Development Services
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Bellingham, WA 98226-9097
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PDS@whatcomcounty.us



Mark Personius

Director

Application for Comprehensive Plan and Related Zoning Amendments

Please check one of the following:

Comp Plan Map

Comp Plan Text

Zoning Map

Zoning Text

Do not write in this section of the application-for official use only.

Date Received: _____ File : _____

Date Complete: _____ Initials of reviewer: _____

Topic of Proposed Amendment: _____

A. General Information – All applicants must complete this section.

Applicant's Name: _____

Signature: _____

Mailing Address: _____

Email Address: _____

Home Phone #: _____ Cell Phone #: _____ Business Phone # _____

Agent's Name: _____

Mailing Address: _____

Email Address: _____

Business Phone #: _____ Cell Phone #: _____ Home Phone #: _____

Please complete the questions below. Attach additional pages as needed.

B. For Map Amendments

1. Tax Parcel Number(s) _____

Acreage: _____

Site Address: _____

Township: _____ Range: _____ Section: _____ ¼ Section: _____

Owner(s): _____

Address: _____

City/State/Zip: _____

Phone: _____

2. Existing Comprehensive Plan Designation:

3. Existing Zoning Designation:

4. Proposed Comprehensive Plan Designation:

5. Proposed Zoning Designation:

6. The Present Use of the Property is:

7. The Intended Future Use of the Property is:

8. Surrounding Land Use:

9. Services:

Please provide the following information regarding the availability of services:

The site is currently served by: Sewer Septic

If sewer the purveyor is:

The site is currently served by: Public Water System Well

If public water the purveyor is:

The site is located on a: Public Road Private Road

Name of Road:

Fire District #: Name:

School District #: Name:

10. Transfer of Development Rights (TDRs):

Are TDRs required under sections 2.160.080, 20.89.050, and/or 20.90.064 of the Whatcom County Code? If so, please explain how your proposal complies with the TDR requirements and/or how you qualify for modifications/exceptions from the TDR requirements.

8. Does the amendment include or facilitate illegal spot zoning? Please explain.

E. Supporting Information – Attach the Following:

A. A vicinity map showing property lines, roads, existing and proposed Comprehensive Plan and Zoning designations. (This information is required for map amendments only).

B. Mailing labels with names and mailing addresses of the owners of all property included within the area proposed for re-designation and:

- For a map amendment within an existing urban growth area, mailing labels with the typed address of each property owner within 300 feet of the external boundaries of the subject property as shown by the records of the county assessor.
- For a map amendment outside existing urban growth areas, mailing labels with the typed address of each property owner within 1,000 feet of the external boundaries of the subject property as shown by the records of the county assessor.
- For map amendments that involve rezoning property to an Airport Operations District, mailing labels with the typed address of each property owner within 1,500 feet of the external boundaries of the subject property as shown by the records of the county assessor.

C. State Environmental Policy Act (SEPA) Checklist

F. Fees

The Whatcom County Code 2.160.110 states that: *Once an amendment is initiated by resolution of the county council, the applicant shall pay the initiation fee within 15 days. The county council may take official action to waive the initiation fee at the time it approves the initiating resolution if it finds the proposed amendment will clearly benefit the community as a whole and will not be for private financial gain.*

A. Are you requesting that the County Council waive the fees for this application?
Yes No

If so, please describe how the proposed amendment clearly benefits the community as a whole and will not be for private financial gain.

E. Authorization:

Signature of Applicant(s) or Agent:

_____ Date: _____

_____ Date: _____

_____ Date: _____