

# Conditional Use Permit Modification Application

<b>Property address or general location (cross-streets):</b>  	<u>Office Use Only</u> Permit # _____ Associated Permits: _____ _____ _____
<b>Legal Description (or Tax #): Parcel Number:</b> _____ Addition: _____, Block(s): _____, Lot(s): _____	_____ _____ _____
<b>Project Description (attach additional pages if necessary):</b>     	
<b>Property Owner:</b> Name: _____ Address: _____ City/St/Zip: _____ Phone: _____ Email: _____	<b>Contact/Representative (if different):</b> Name: _____ Address: _____ City/St/Zip: _____ Phone: _____ Email: _____
Will the use take place <u>entirely</u> within an existing building? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain. <i>(For example, a daycare may include an outside play area.)</i> What is the permit number of the original Conditional Use Permit? _____	
<b>Have any known wetlands or their buffers been identified on the property?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, attach wetland report. <b>Are there any steep slopes (greater than 15%) on the property?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, attach geotechnical report.	

I verify the property affected by this application is the exclusive ownership of the applicant, or the applicant has submitted the application with the written consent of all the owners of the affected property.

**Print Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*See reverse side for details on plan submittal requirements and cost.*

## Submittal Requirements

### CHECKLIST

- Completed Conditional Use application form (Page 1)
- Fees for Modification of a Conditional Use Permit:  
(Includes \$50.00 signboard deposit refunded after boards are returned.)  
\$437.94.  
Should staff time exceed three hours, \$99.00 per hour of extra staff time will be charged.
- A site plan, to scale, showing:
  - All lots with lot lines, block number and lot numbers
  - Existing (and any proposed) structures
  - Widths of adjacent right-of-ways and pavement
  - Adjoining street names
  - All easements, deeds, restrictions or other encumbrances restricting the use of the property, if applicable
  - North Arrow
- Photocopy of the property deed
- For Transient Accommodations:
  - A floor plan showing what rooms would to be used for the Transient Accommodation, and indicating the use of all the rooms in the structure (i.e. bathroom, bedroom, etc.). Indicate those rooms used by the on-site owner, or in the case of a bed and breakfast the owner or on-site operator.
  - A minimum of one on-site parking space in addition to the two on-site spaces required for a single-family residence. See PTMC 17.72.080 for parking requirements.
- Photocopy of the plat map\*
- Photocopy of any surveys of record\*
- Critical Areas special reports where required by the Critical Area Ordinance (PTMC 19.05)
- The latest list of tax parcels and their owners within 300 feet of the property, prepared by a Title Company, with said owner's names and addresses typed on mailing labels. (City will supply envelopes.)
- SEPA permit application, required for any fill or excavation over 100 cubic yards, the construction of 9 or more dwelling units, a building 4,000 sq. ft. or more in size with 20 or more parking spaces, and/or if the lots are located in a critical area. Critical Area maps are available at the DSD office or on the website.

For more Conditional Use information, see Port Townsend Municipal Code Chapter 17.84 or the website: <http://www.cityofpt.us/>

\* See Jefferson County Assessor's office, or website  
<http://www.co.jefferson.wa.us/assessors/parcel/ParcelSearch.asp>

