

MINOR PRELIMINARY PLAT MODIFICATION

Property address or general location (cross-streets	Office Use Only Permit #
Existing Legal Description(s) (or Tax #): Addition: Block(s): Lot(s):	Associated Permits:
Parcel Number(s):	
Please describe (attach additional pages if necessa	ary):
Property Owner:	Contact/Representative (if different):
Name:	Name:
Address:	Address:
City/St/Zip:	City/St/Zip:
Phone:	Phone:
Email:	Email:
Have any known wetlands or their buffers been ide If yes, attach wetland report. Are there any steep slopes (greater than 15%) on the If yes, attach geotechnical report.	
2. The modification will not cause the PUD to v	greements and intent of the original PUD approval; iolate any applicable city policy or regulation; and ause the preliminary PUD to be inconsistent with the
I verify the property affected by this application is the exclusive ownership of the applicant(s), or that I have submitted the application with the written consent of all owners of the affected property. Print Name:	
Signature:	Date:

See attached for details on plan submittal requirements and cost.



Minor Preliminary Plat Modification Application Submittal Requirements CHECKLIST

Minor Preliminary Plat modification fees: \$514.90
Critical Areas special reports where required by the Critical Area Ordinance (PTMC 19.05)
A narrative statement indicating Preliminary Plat modifications being sought.
Any additional pertinent information required by the PCD Director and/or Public Works Director.

For more Planned Unit Development information, see Port Townsend Municipal Code Chapter 18.16 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