



City of Toledo
 PO Box 236
 Toledo, WA 98591
 Phone: 360.864.4564
 Fax: 360-864.4566
www.toledowa.us

Land Use Application

MUST BE FILLED OUT COMPLETELY – INCOMPLETE APPLICATIONS WILL BE RETURNED

Select all permits you are applying for. Submit this application form, corresponding permit application packet(s) and application fee

<input type="checkbox"/> Annexation Petition: \$600.00+ <input type="checkbox"/> Application for map change: \$500 <input type="checkbox"/> Boundary Line Adjustment: \$250+ <input type="checkbox"/> Boundary Review Board Fee: \$150 <input type="checkbox"/> Clearing Permit: 750-\$150 hr.+ <input type="checkbox"/> Cluster Residential Develop: \$600+ \$50+ <input type="checkbox"/> Comp Plan Amendment: \$1,000 <input type="checkbox"/> Conditional Use: \$300.00+ <input type="checkbox"/> Critical Area Permit <input type="checkbox"/> Design Review <input type="checkbox"/> Fill and Grade Permit <input type="checkbox"/> Hillside Dev. Perf. Stand: \$600+ \$50+ <input type="checkbox"/> Home Occupation <input type="checkbox"/> Landmark – Historic Cert. of Alter <input type="checkbox"/> Legal Lot Determination <input type="checkbox"/> Nonconforming Use Certificate <input type="checkbox"/> Parking Adjustment <input type="checkbox"/> Planned Unit Develop: \$600.00+ \$50+	<input type="checkbox"/> Prelim Rev Mod to existing developments: \$600+ \$50+ <input type="checkbox"/> Preliminary Subdivision: \$600+ \$50+ <input type="checkbox"/> Rezone: \$300.00 <input type="checkbox"/> Right of Way Use: \$125-\$250 <input type="checkbox"/> Right of Way Inspection: \$50hr <input type="checkbox"/> SEPA Review: \$400.00+ <input type="checkbox"/> Shoreline Permit <input type="checkbox"/> Shoreline Exemption <input type="checkbox"/> Short Plat: \$600.00+ \$50+ <input type="checkbox"/> Sm. Lot Single Family Float Zone: \$150+ <input type="checkbox"/> Structure Relocation: \$30.00 <input type="checkbox"/> Subdivision-Short Plat/Lot Line Adj. <input type="checkbox"/> Subdivision-Preliminary Plat <input type="checkbox"/> Subdivision-Final Plat <input type="checkbox"/> Variance: \$300.00+ <input type="checkbox"/> Wireless Communication <input type="checkbox"/> Zoning Compliance Letter <input type="checkbox"/> Other: _____	<p style="text-align: center;">Official Use Only</p> Date Received: _____ Rec. By: _____ Fee Collected: _____ Application Conference: _____ Determination of Completeness: _____ Transmittal to Mayor: _____ Notice Application: _____ Newspaper Publication: _____ Mailing to Property Owners: _____ Open Recording Hearing: _____ Decision Date: _____ Decision/Comments: _____ Date Sent to Applicant: _____
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Project Address: _____

Tax Assessor Parcel Number(s): _____

Project description: _____

Applicant/Contractor/Agent Primary Contact for Application

Name _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Fax _____ Email _____
 L&I License # _____ L&I Expiration Date _____

Owner(s) Applicant Primary Contact for Application

Name _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email _____

Property Owner(s)

I am the owner of the property described above or am authorized by the owner to sign and submit this application. I grant permission for the City staff and agents to enter onto the subject property at any reasonable time to consider the merits of the application and post public notice. I certify under penalty of perjury of the laws of the State of Washington that the information on this application and all information submitted herewith is true, complete and correct.

I also acknowledge that by signing this application I am the responsible party to receive all correspondence from the City regarding this project including, but not limited to, expiration notifications. If I, at any point during the review or inspection process, am no longer the applicant for this project, it is my responsibility to update this information with the City in writing in a timely manner.

 Signature of Owner/Applicant/Agent

 Date

 Signature City Clerk/Deputy Clerk

 Public Works Superintendent Signature