



Fee Paid_____
Date Received_____
File No._____

Garfield County

“Conditional Use Permit Application”

P.O. Box 278, Garfield County Court House Pomeroy, WA 99347 509-843-1301
www.co.garfield.wa.us

1. General Information:

Note: State Environmental Policy Act (SEPA) Chapter 43.21C and WAC 197-11 compliance is required. A Completed SEPA checklist may be required for this proposal.

Property Owner_____

Mailing Address_____

City_____

Phone(s)_____ E-mail_____

Physical Address of Proposal_____

Applicant/Representative_____ Phone(s)_____

2. Legal Description:

Parcel No.(s)_____

Section(s)_____ Township_____ Range_____

Legal Description_____

3. Current Property Use:

_____ Residential _____ Commercial _____ Agricultural _____ Timber

Other (Please Specify)_____

What is the property’s current zoning designation? _____

4. Description of the Proposed Use:

5. Water Supply:

_____ Community Water System

_____ Drill Well

Water Right Secured? _____ Yes _____ No

6. Sewer System:

_____ City sewer _____ Community system _____ Private system

7. Road Access:

County Road _____ Does and approach exist? _____

If so, when was it installed? _____

State Highway _____ Milepost _____ Does an approach exist? _____

If so, when was it installed and what is the allowed use? _____

Private drive, lane, etc. _____

8. Critical Areas and Floodplain:

Are there any critical areas on the site (shorelines, creeks, lakes, wetlands and/or slopes over 40%)? _____

Is the site in the floodplain? _____

The above information is correct to the best of my knowledge.

Signature of Owner(s) _____ Date _____
or Authorized Agent _____

_____ Date _____

Signature of Applicant _____ Date _____

General Information:

- A. Fee: \$400 – Residential, Non-Commercial - - -\$450 - Commercial & Industrial where the Total Valuation is less than \$1,000,000 - - - For Commercial & Industrial where the Total Valuation is \$1,000,000 or greater - Fees shall be actual costs as set forth in separate resolution.
- B. Ccontact the Public Health Department (509) 843-3412 for their fees and requirements.
- C. State Environmental Policy Act (SEPA) Chapter 43.21C and WAC 197-11 compliance is required. Please submit a completed SEPA checklist.
- D. Please furnish documentation from the Garfield County Assessor’s Office listing all property owners of record (name and address) within 300 feet of exterior property boundaries of the proposal.
- E. The applicant shall also be responsible for the costs of legal notices.

Staff Use Only

Application received by: _____ Date: _____

Cash / Check #: _____ Amount received: _____

Docket / CUP #: _____

Date of TRC review: _____

Notice of Completeness due date: _____

If incomplete, date notified and information requested: _____

Date returned, if resubmitted: _____

Date Notice of Completeness issued: _____

Date of Notice of Application/public hearing issued: _____

NOA comment period ends: _____

SEPA determination (and comment period, if app): _____

Hearing date: _____

Notice of Decision issued: _____

Appeal period ends: _____

Appeal information: _____