



ISLAND COUNTY PLANNING & COMMUNITY DEVELOPMENT

PHONE: (360) 679-7339 ■ from Camano (360) 629-4522 ■ from S. Whidbey (360) 321-5111
FAX: (360) 679-7306 ■ P. O. Box 5000, Coupeville, WA 98239-5000
Internet Home Page: <http://www.islandcounty.net/planning/>

CERTIFICATE OF ZONING COMPLIANCE

| FOR COUNTY USE ONLY | | | |
|---------------------|---------------|----------|---------|
| Application Number | Date Received | Fee Paid | Receipt |
| _____ | _____ | _____ | _____ |

Application information must be TYPED or NEATLY PRINTED AND SIGNED IN BLUE INK. In order to speed our review of your application please provide all information requested. If any portion is not applicable, enter N/A in the blank. Submit the **original and 1 copy** of this application and all necessary documentation and plans as outlined on the Application Checklist to the Island County Planning Department. Illegible and/or incomplete applications will not be accepted. An application will not be considered technically complete until a Notice of Application is provided.

PART A

APPLICANT _____ **Signature** _____

Address _____ **Phone** _____

CONTACT PERSON* _____ **Signature** _____

Address _____ **Phone** _____

OWNER _____ **Signature** _____

Address _____ **Phone** _____

PROJECT ADDRESS (or closest intersection) _____

Assessor Parcel Number _____ **Plat Name** _____

Section _____ **Township** _____ **Range** _____ **1/4 Section** _____

Location: North Whidbey Central Whidbey South Whidbey Camano Island

Comprehensive Plan Land Use Designation _____ **Zoning** _____

Size of Parcel (Square Feet or Acres) _____ **Existing Use** _____

BRIEF DESCRIPTION OF REQUEST AND PROPOSAL

Other County, State or Federal Applications or Permits Obtained or Pending:

- The authorized Contact Person will be the only party that will receive correspondence, reports, notices and inquiries.

APPLICANT AUTHORIZATION FORM

If you are authorizing an agent to apply for permits on your behalf, you must either sign each of the applications that you submit or complete this form, which will provide authorization for a designated agent to apply for permit(s) on your behalf. This form is required for the protection of the property owner. Planning and Community Development will not accept an application that is not either signed by all property owners or accompanied by this form. **All original signatures shall be in blue ink.**

I/we, _____, the owner(s) of the subject property, understand that by completing this form I/we hereby authorize _____ to act as my/our agent. I/We understand that said agent will be authorized to submit applications on my/our behalf. I/We also understand that once an application has been submitted that all future correspondence will be directed to said agent.

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>1) _____ Property Owner Name(s) (print)</p> <p>_____</p> <p style="text-align: center;">Signature(s)</p> <p>2) _____ Property Owner Name(s) (print)</p> <p>_____</p> <p style="text-align: center;">Signature(s)</p> <p>_____</p> <p style="text-align: center;">Date</p> | <p>State of Washington) County of _____)</p> <p style="text-align: center;">I certify that I know or have satisfactory evidence that</p> <p>_____</p> <p>signed this instrument and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in this instrument.</p> <p style="text-align: right;">Dated _____</p> <p style="text-align: right;">Signature of _____</p> <p style="text-align: right;">Notary Public _____</p> <p style="text-align: right;">Printed Name _____</p> <p style="text-align: right;">Residing at _____</p> <p style="text-align: right;">My appointment expires _____</p> |
| <p>1) _____ Property Owner Name(s) (print)</p> <p>_____</p> <p style="text-align: center;">Signature(s)</p> <p>2) _____ Property Owner Name(s) (print)</p> <p>_____</p> <p style="text-align: center;">Signature(s)</p> <p>_____</p> <p style="text-align: center;">Date</p> | <p>State of Washington) County of _____)</p> <p style="text-align: center;">I certify that I know or have satisfactory evidence that</p> <p>_____</p> <p>signed this instrument and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in this instrument.</p> <p style="text-align: right;">Dated _____</p> <p style="text-align: right;">Signature of _____</p> <p style="text-align: right;">Notary Public _____</p> <p style="text-align: right;">Printed Name _____</p> <p style="text-align: right;">Residing at _____</p> <p style="text-align: right;">My appointment expires _____</p> |

PART B

CERTIFICATE OF ZONING COMPLIANCE

Modification of Standards: Pursuant to ICC 17.03.230 Existing Uses, the Planning Director may administratively determine, based on evidence of prior existence, that the Lot, Use or Structure will comply with the conditions of the current code and allow a reasonable use of the property. The decision may be appealed to the Hearing Examiner in writing within 14 days of the mailing of the Director's decision. A CZC Application shall be processed as a Type II administrative decision pursuant to ICC Chapter 16.19.

Supplemental Application Requirements: In addition to the information required in Part A the following must also be submitted with the CZC application. In order to aid processing please make all written and mapped materials legible and include or show the items listed below.

1. Questions.

- a) Legal description of the Parcel or property (note if attached): _____

- b) Names, addresses and telephone numbers of associated professional consultants such as architects or engineers not identified on cover sheet: _____

- c) Why are you applying for a Certificate of Zoning Compliance? Check one or more statements as appropriate:
 - Establish the legality of parcel. *Enclose any known information relating to the creation of the parcel.*

 - Establish the legality of a Structure. *Locate and mark the structure on the submitted plot plan and enclose copies of any building permits or information that would indicate the date the structure was built if before building codes.*

 - Establish the legality of a Use of the property. *Specify the precise uses you currently employ and the earliest date you or previous owners have conducted those uses on this property. Please include any documentation and/or affidavits supporting your position. Use additional paper if necessary.*

 - _____

 - Other (Please specify): _____

- d) Provide documents, photos, statements and other evidence of how long the use has lawfully been in existence:

- e) Describe the specific ways in which the lot, use or structure does not conform to this Chapter:

2. **Checklist.** The following is a checklist to assure that all the items identified in the Island County Code (ICC) have been provided. In the Applicant’s Checklist, check items included with the application or write N/A in those which are not applicable. Note: If the plot plan submitted with this application is drawn on the Universal Plot Plan sheet it may be used to meet plan requirements for a single family building permit.

| Applicant | Application Requirement | County |
|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| _____ | BASIC PLOT PLAN. Legible map(s) on sheets no larger than 11” by 17” that includes the following: | _____ |
| _____ | Drawn to a standard engineering scale not to exceed 1” = 60’. Indicate the engineering scale and provide a bar scale. | _____ |
| _____ | North Arrow. | _____ |
| _____ | Boundaries, dimensions, and area of lot (square feet or acreage). | _____ |
| _____ | Land features (e.g. top and toe of all slopes, direction of slope, percentage of slope, soggy areas, ditches, ravines, lakes, ordinary high water mark of shoreline, etc. | _____ |
| _____ | Critical Areas. Show protected species habitats, geologically hazardous areas, floodplains, aquifer recharge areas, streams, wetlands as well as all of their associated buffers onsite or off-site when they may affect the proposal. If the proposal is in an archaeological area, a report must be submitted that identifies resources and how they will be protected. (note: if a feature is shown on the County’s Critical Areas map it must be shown on the plot plan; if you do not believe that feature is present please describe) | _____ |
| _____ | Location, size, and purpose of all existing buildings (temporary or permanent) and proposed buildings. If you are establishing a Structure, label the structure. If you are establishing a Use label all buildings associated with the Use. | _____ |
| _____ | Location, dimensions and volume of all existing and proposed propane tanks, fuel tanks, etc., labeled as existing or proposed. | _____ |
| _____ | Location and dimensions of all decks, roof overhangs, porches, cantilevers, bay windows, retaining walls, patios and chimneys | _____ |
| _____ | Distances between property lines and existing and proposed buildings and between buildings. | _____ |
| _____ | Location and width of existing and proposed driveways/accesses serving each structure and any parking areas. Access permit numbers, if assigned. | _____ |
| _____ | Width and name of road(s) bordering the property. | _____ |
| _____ | Any and all easements (access, utility, drainage, etc.) on the property including their width. Label them with intended use and the Auditor File No. | _____ |
| _____ | Location of septic tank, drainfield, reserve area and tightline between house and septic tank. Show distance between drainfield and reserve area to property lines. Indicate if hooked up to sewer. | _____ |
| _____ | Road distances to nearest fire hydrant, if applicant has right to use fire hydrant. | _____ |