



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.islandcountywa.gov/planning/>

CERTIFICATE OF ZONING COMPLIANCE APPLICATION

Purpose of a Certificate of Zoning Compliance (CZC): As described in ICC 17.03.230 Existing Uses, a CZC provides a simple and expeditious process for establishing, upon request of a property Owner, that a Lot, Use or Structure lawfully existed prior to the effective date of this Chapter (December 1, 1998). In addition, this section established the terms and conditions for continuing Existing Uses, Structures and Lots which were lawfully established prior to the effective date of this Chapter and to allow Existing businesses and uses to continue to operate even though the Use is no longer permitted in the zone in which the Use is located. The burden of establishing that any Lot, Use or Structure lawfully existed as of the effective date of this Chapter shall, in all cases, rest with the Owner and not with the County.

PLEASE NOTE: If you have any question or comments please do not hesitate to phone, e-mail or make an appointment with the Planning Department. All of the requested items listed below must be provided and complete at the time of application or the application will not be accepted. The purpose of this cover sheet and checklist is to ensure that minimum requirements have been met before an application can be accepted at the counter.

APPLICANT	APPLICATION REQUIREMENT	COUNTY
_____	Completed Application Form (Parts A and B);	_____
_____	Signatures of all owners and/or an Affidavit of Owner's Consent;	_____
_____	Answers to the questions in Part A are completed;	_____
_____	Answers to the questions in Part B are completed;	_____
_____	A legible plot plan showing required elements (See Part B).	_____

I hereby certify that I am the authorized applicant named above and that I have familiarized myself with the rules, regulations, and procedures with respect to preparing and filing this application and that all statements, answers and information provided as part of this submittal are in all respects complete, true and accurate to the best of my knowledge and belief.

Name (Please Print)	Signature (Owner or Authorized Agent)	Date

• **SUBMITTAL OF AN APPLICATION BY APPOINTMENT ONLY:**

Whidbey: To schedule a submittal appointment, call 360-678-7800.
Camano: To schedule a submittal appointment, call 360-387-3443 ext. 251.

- Must pay with check or cash; credit cards are not accepted
- Anticipate that the submittal process can take 30 to 60 minutes



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CERTIFICATE OF ZONING COMPLIANCE PART A

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.

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 Freeland NMUGA

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 or contractor to apply for permit(s) on your behalf, you must complete this form providing authorization for a designated agent to apply for permit(s) on your behalf. This form is required for the protection of the landowner. A permit/application authorizing an agent to act on the landowner's behalf that is not accompanied by a signed and notarized Applicant Authorization Form will not be accepted. All original signatures must 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/permits on my/our behalf. I also understand that once a permit/application has been submitted that all future correspondence may be directed to said agent.

ALL PROPERTY OWNERS OF RECORD MUST SIGN THIS FORM

<p>1) _____ Property Owner Name(s) (print)</p> <p>_____</p> <p>Signature(s)</p> <p>2) _____ Property Owner Name(s) (print)</p> <p>_____</p> <p>Signature(s)</p> <p>3) _____ Property Owner Name(s) (print)</p> <p>_____</p> <p>Signature(s)</p> <p>_____</p> <p>Date</p> <p>Certificate of Zoning Compliance Form</p>	<p>State of Washington) County of _____)</p> <p>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>Dated _____</p> <p>Signature of _____</p> <p>Notary Public _____</p> <p>Printed Name _____</p> <p>Residing at _____</p> <p>My appointment expires _____</p> <p style="text-align: center;">3</p> <p style="text-align: right;">Revised 7/23/19</p>
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1. **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.	_____

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:

