

# CITY OF CHELAN

## PRE-APPLICATION CONFERENCE

### ***WHAT IS IT?***

A pre-application conference is an informal meeting between a project applicant and members of the City of Chelan and other local, state, and federal government staff who will review the proposal with any additional advisors the applicant may wish to have present, such as his/her realtor, surveyor, or architect.

In certain instances, a pre-application conference is simply a good way to obtain important information before beginning your project.

***FEES:*** Single Family Residential - \$150 after 1<sup>st</sup> Mtg.  
Commercial proj. under 4,000 sq. ft. - \$150 after 1<sup>st</sup> Mtg.  
Commercial proj. over 4,000 sq. ft. - \$250  
Land Division: Short Plat meeting (example: 1st meeting \$150, 2nd meeting \$200, 3rd meeting \$250  
Subdivision - \$150 + \$50 for additional meetings (see Short Plat example)

### ***WHAT CAN I EXPECT FROM A PRE-APPLICATION***

One purpose of the conference is to identify any potential problems you might encounter with your proposal before you begin and let you know what steps may be required to resolve them. A second purpose is to familiarize you with the review process and the fees involved to start your project. The third reason for a preliminary conference is to answer any questions you may have and give you an idea of the recommendations you can expect from each reviewing department. Staff notes are gathered, and a written synopsis of the meeting is provided to the applicant.

### ***HOW SHOULD I SCHEDULE A PRE-APPLICATION CONFERENCE***

1. As soon as you have a fairly good idea of how your proposal will look, prepare a sketch of the site and a map of where your property lies in relation to nearby roads.
2. Submit a completed pre-application conference request form with an electronic copy of your **application, project Narrative, and maps** to the Planning and Community Development Department.
3. The Planning and Community Development Department will schedule a date and time for your meeting and notify you. The date will be approximately one week to ten days from the time the submitted application was accepted.

### ***WHEN ARE CONFERENCES***

Conferences are generally held Thursday afternoons anywhere from 1:00 p.m. to approximately 3:00 p.m. at Chelan City Hall. The average meeting lasts about one hour.

### ***ARE ENGINEERED PLANS REQUIRED?***

Generally, no. You do not need to have engineered or surveyed plans to schedule the meeting. However, we encourage you to have plans properly prepared. The more information you can provide for review the better city and other staff can advise you on the project.

### ***DOES THE PRE-APPLICATION CONFERENCE AUTOMATICALLY BEGIN THE FORMAL PERMIT PROCESS?***

No. The conference is intended as a tool for the applicant. The actual permit application must be submitted as a separate step in the permit process.

### ***WHAT INFORMATION DO YOU NEED?***

On your site plan (which should be to scale) you should include the following, at a minimum:

- ☐ North Arrow
- ☐ Property Lines and Lot Dimensions
- ☐ Lot Access
- ☐ Parking Layout
- ☐ Square Footage and Dimensions of Building(s)
- ☐ Exterior Lighting Layout
- ☐ Building Setbacks
- ☐ Abutting Roadways/Alleys
- ☐ Fire Hydrant Locations
- ☐ Storm Runoff and Drainage
- ☐ Garbage Bin Location
- ☐ Surface Characteristics of Finished Lot (Pervious or Impervious)

Other information needed includes **type of construction, building height, number of stories, exact type of use proposed, type of fire protection (alarm, sprinklers), and a vicinity map.**

## PREAPPLICATION CONFERENCE REQUEST FORM

The following types of permit applications require a pre-application conference:

Zoning Code Variances	Subdivision Preliminary Plat
Conditional Use Permits	Subdivision Variance
Shoreline Substantial Development Permits	Plat Vacation
Shoreline Conditional Use Permit	Plat Alteration
Shoreline Variance	Site Rezone
Building permit requiring SEPA review	New Commercial Construction

Within five days of the conference, the applicant may request of the Planning and Community Development Department the following information:

1. Requirements needed for a completed application
2. A general summary of the procedures and timelines to be used to process the application
3. Codes or development standards relevant to the proposal that were identified at the pre-application conference
4. The City's design guidelines, if any

Please provide the information requested below:

Applicant's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Property Address: \_\_\_\_\_

Proposed Project Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**CITY OF CHELAN  
TRAFFIC SCOPING INFORMATION WORKSHEET**

***Please submit the information requested below to the City of Chelan Public  
Works Department with a copy of the site plan.***

***Do not submit trip generation or distribution at this time.***

Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Parcel Number(s). \_\_\_\_\_

Parcel Size: \_\_\_\_\_ Square Feet \_\_\_\_\_, Acres

Existing Use: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

Land Use	# Of Units Or Sq. Ft.	Land Use Code	For Agency Use Only		
			Basic Rate PM Peak Trios/Unit	New Trios%	New Trip Rate

For Agency Use Only

**Project Trips to be Distributed as follows:**

**CITY OF CHELAN  
CRITICAL AREAS REVIEW CHECKLIST**

Completion of this environmental review checklist shall be required prior to any development or other alteration in or within 250' (two hundred and fifty feet) of any known or potential Critical Area in the City of Chelan or its UGA. An application submitted for any use or activity requiring a permit shall not be considered complete until this form has been completed, signed and placed in the project file. This checklist is not a substitute for an Environmental Checklist required under SEPA.

**GENERAL INFORMATION**—to be completed by the applicant when this checklist is submitted

<b>Applicant</b>		
Name: _____		
<input type="checkbox"/> Landowner <input type="checkbox"/> Owner's agent. If agent, landowner's name: _____		
Address: _____		
City: _____	State: _____	ZIP: _____
Phone: _____	FAX: _____	Email: _____
<b>Site</b>		
Address: _____		
Parcel Number(s): _____		
Zoning District: _____		

**Brief description of project:**

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Please attach any information that will assist the City in its preliminary evaluation of the proposed alteration.

I hereby certify that I will pay all fees, if any, as required by law. I also hereby certify under penalty of perjury under the laws of the State of Washington that the above answers are true and complete to the best of my knowledge. I understand that the lead agency is relying on them to make its decision.

Applicant Signature \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Print Name \_\_\_\_\_

Place Where Signed: \_\_\_\_\_, WA

**FOR OFFICIAL USE ONLY**

**FINDINGS AND STUDY REQUIREMENTS**—to be completed by the Administrator based on his or her preliminary evaluation

**Administrator's findings based on Preliminary Evaluation:**

- ☐ (A) The proposed alteration is not located in or in such proximity to a Critical Area defined by Chapter 14.10 that it poses a threat to proposed development or to the health or safety of humans or the environment of the subject property or adjacent properties. No further study is required at this time.
- ☐ (B) The proposed alteration is in or adjacent to a Critical Area and is exempt from the requirements of the Critical Area Ordinance (Chapter 14.10). Nature of Exemption and code section:

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- ☐ (C) The proposed alteration is located in or adjacent to, or includes project actions that may affect, one or more Critical Areas, as indicated below:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Wetland                     | <input type="checkbox"/> Critical Aquifer Recharge Area | <input type="checkbox"/> Fish and Wildlife Habitat Conservation Area |
| <input type="checkbox"/> Geologically Hazardous Area | <input type="checkbox"/> Frequently Flooded Area        |  |

**Information source(s) used by the Administrator in his or her preliminary evaluation:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> City of Chelan generalized Critical Areas map  | <input type="checkbox"/> Wetland map based on the NWI                            | <input type="checkbox"/> SWAP map                         |
| <input type="checkbox"/> PHS Maps or other maps based on current PHS data                                       | <input type="checkbox"/> <i>The Flood Insurance Study for the City of Chelan</i> | <input type="checkbox"/> <i>Chelan County Soil Survey</i> |
| <input type="checkbox"/> <i>Seismic Design Category Map for Residential Construction in Washington, Sheet 2</i> |  |   |
| <input type="checkbox"/> Other  |  |   |

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**The Administrator requires that the following information be provided:**

- ☐ Critical area study for Wetlands
- ☐ Wetland identification and delineation
- ☐ Critical area study for Critical Aquifer Recharge Areas
- ☐ Hydrogeologic evaluation (required as part of Critical Area Study if the applicant is requesting that the City declassify or reclassify a specific area designated as a Critical Aquifer Recharge Area)
- ☐ Critical area study for Fish and Wildlife Habitat Conservation Areas
- ☐ Critical area study for Geologically Hazardous Areas

**Note: no Critical Area Study is required for Frequently Flooded Areas; however, all development in such areas require compliance with the City's Flood Hazard Areas provisions (Chapter 15.10, CMC)**

*continued on next page*

**CHECKLIST DOCUMENTATION**—to be completed by the Administrator and signed by the Administrator and the applicant when all required information has been submitted and any permit conditions have been determined.

- ☐ Documentation of preliminary evaluation is attached
- ☐ Documentation of Administrator's findings supporting any exemption, exception, or waiver is attached
- ☐ Any required information (e.g., Critical Area Study) is attached
- ☐ Any permit conditions, including but not limited to requirements for mitigation, monitoring and reporting, or buffers, are attached

**For the City of Chelan:**

The attached information, including any required Critical Area Study, Administrative findings, and permit conditions, satisfies the intent of Chapter 14.10 related to the protection of Critical Areas, public and private property, and the public health, safety, and welfare.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

**Owner/Applicant:** The information provided is the best information available concerning the location of Critical Areas as defined by Chapter 14.10. The proposed alteration and the mitigation proposed will, to the greatest extent possible, protect Critical Areas, public and private property and the public health, safety, and welfare.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

## OWNERSHIP CERTIFICATION

I, \_\_\_\_\_, hereby certify that I am the major property owner(s) or officer of the corporation owning the property described in the attached application. I also hereby certify under penalty of perjury under the laws of the State of Washington that this application and that the statements, answers, and information are in all respects true and correct to the best of my knowledge and belief. I have also familiarized myself with the rules and regulations of the City of Chelan

Property Address: \_\_\_\_\_ Project Desc: \_\_\_\_\_

City and State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For: \_\_\_\_\_  
(Corporation or company name)

## ACKNOWLEDGMENT

State of Washington   )  
  )  
County of Chelan       )

On this day personally appeared before me \_\_\_\_\_ to be known to be the individual described in and who executed the within and foregoing instrument and acknowledge to me that (*he, she, they*) signed the same as (*his, her, their*) free and voluntary act and deed for the uses and purposes therein mentioned.

\_\_\_\_\_  
NOTARY PUBLIC in and for the State of Washington

Residing in: \_\_\_\_\_

Date: \_\_\_\_\_

Other property owners included in this application must be listed below: (attach additional sheet if necessary)

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_