



BSP # \_\_\_\_\_

City of Leavenworth  
DEPARTMENT OF DEVELOPMENT SERVICES

**PRELIMINARY BINDING SITE PLAN APPLICATION<sup>1</sup>**

This application must be filled out legibly, in black ink, either hand printed or typewritten

**APPLICANT:**

Any individual or corporation holding any ownership or security interests in the land must be listed. Use additional sheet if necessary.

**Applicant #1**

This party shall receive determinations and notices associated with this application, and shall be the City's point of contact for processing this application.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

**Applicant #2**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

**Property/Project Information:**

Physical Address or General Location of Property: \_\_\_\_\_

Existing Legal Description of Property: \_\_\_\_\_

Subdivision Name(s): \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Proposed Legal Description of Property: \_\_\_\_\_

Assessor's Tax Parcel ID Number: \_\_\_\_\_

Zoning Designation: \_\_\_\_\_

Site Acreage: \_\_\_\_\_

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

**Surveyor:**

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

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

License #: \_\_\_\_\_

<sup>1</sup> This application shall be subject to all additions to and changes in the laws, regulations and ordinances applicable to the proposed development until a determination of completeness has been made pursuant to LMC Chapter 21.07.

## REQUIREMENTS

All required information and fees must be submitted at time of application. Applications which do not include all of the required information and fees may be returned to the applicant.

### FEES<sup>2</sup>:

- Permit Fee (due at application submittal).....**\$1,100.00 plus \$50.00 per lot**
  - When within a new building intended for condominiums.....**\$800.00 plus \$50.00 per lot**
- Staff Time (to be paid prior to recordation) .....**\$50/hr<sup>3</sup>**

### GENERAL INFORMATION:

- A Pre-Application Meeting with the City may be required prior to filing application for Binding Site Plan approval. Please consult Development Services Department Staff at 509-548-5275.
- Staff will review the application to determine if it is complete. Once the application is determined to be complete, the application will be reviewed to determine if it contains sufficient information to furnish a basis for a decision, in conformance with LMC Section 17.10. The City may refer the request to other agencies for review. Referral agencies, if any, shall have fourteen (14) days to comment on the application. The City shall approve, conditionally approve, or disapprove the proposed preliminary binding site plan in writing subject to the criteria outlined in LMC Section 17.10.050. Preliminary binding site plan approvals are valid for a period of five years, or as delineated by Washington State law. During that period, the conditions of approval must be fulfilled or bonded for as provided in LMC Chapter 17.20 and filed for record with the Chelan County Auditor. If the conditions attached to the preliminary binding site plan approval are not satisfied or appropriately bonded for, and the binding site plan is not filed for record within the required period, preliminary approval of the binding site plan shall become null and void.
- Binding Site Plans (BSP) are subject to the requirements of Leavenworth Municipal Code (LMC) Chapter 17.10. The Code can be viewed online at [www.cityofleavenworth.com](http://www.cityofleavenworth.com). Applications are reviewed for conformance with the LMC, including but not limited to, Titles 14, 15, 16, 17, 18 and 21 All drawing(s) must be on paper capable of being folded for storage in an 8 ½" x 14" file, and become the property of the City of Leavenworth.
- **Include all of the following information and applicable drawings with your application.** Attach additional pages to provide complete information if needed. Electronic submittal of materials may be available at the discretion of the City. Please contact Development Services Department Staff for information:
  1. A brief narrative description of the proposed Binding Site Plan.
  2. Ten (10) copies of a scaled drawing of at least one inch to one hundred feet which shows the following:
    - A legal description of the area being divided.
    - The boundaries of the section (or plat or lots) within which the binding site plan lies.
    - The boundary lines, dimensions and area of the binding site plan and the lots within it, including common areas.
    - Proposed binding site plan name and lot numbers.
    - The location and width of all roads, access easements, and driveways.
    - The location and width of all existing and proposed utility easements.
    - The boundaries, dimensions and area of all tracts or parcels to be dedicated or reserved for public or community uses.
    - The location of all existing and proposed water distribution systems, sewage disposal systems, storm water systems, and irrigation systems.
    - Fire hydrant locations within or adjacent to the project.

<sup>2</sup> Please note that fees are subject to change without notice. Check with the City of Leavenworth for current fees prior to submittal of your application.

<sup>3</sup> In addition to the base fee, a charge of \$50 per hour will be assessed for each hour of staff time for reviewing the project, however, 50% of the base fee will be credited toward the total dollar amount of the staff hours billed to the applicant.

- The location of the one hundred year flood-plain and floodway, if applicable.
  - The location of all water courses and the ordinary high water mark and approximate boundaries of all areas subject to inundation, if applicable.
  - Contours at two foot intervals for zero to five percent cross slope; five foot intervals for five to thirty percent cross slope; ten foot intervals for over thirty percent cross slope; and spot elevations to determine the general locations of high and low points thereof.
  - Location of all existing structures, wells, overhead and underground utilities, municipal boundaries, and other important physical features.
  - Zoning designations.
  - Arrow indicating north.
3. Three (3) sets of road plans and profiles for all proposed roads and improvement specifications.
  4. The delineation, location, classification, and required analysis or mitigation plans as required for critical areas, including fish and wildlife habitat conservation areas, aquifer recharge areas, geologically hazardous areas, wetlands, and frequently flooded areas as presently contained in this code, or as amended.
  5. Assessor's parcel map of property and surrounding properties within five hundred feet.
  6. SEPA checklist, if required.
  7. Proposed lot restrictions, CC&Rs, maintenance agreements, or other documents pertaining to the proposed Binding Site Plan.
  8. Any other information deemed necessary by the City, specifically: \_\_\_\_\_  
\_\_\_\_\_

**Note: Additional information may be requested by the City as needed for review of this application.**

*I acknowledge that upon issuance of any permit by the City of Leavenworth that it is my obligation to comply with any and all laws, ordinances and regulations governing the type of project permitted whether or not specified in the permit. I acknowledge that the granting of a permit or an approval by the City of Leavenworth does not give any authority to violate or modify the provisions of any other federal, State or local law, ordinance or regulation with respect to regulation of construction, performance of construction and/or operation of the project. I have read and understand the application and have provided information truthfully to the best of my knowledge. I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit or approval may be revoked.*

Applicant #1 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant #2 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## CERTIFICATION OF OWNERSHIP

I, (print full name) \_\_\_\_\_ hereby certify that I am the property owner or authorized officer of the corporation owning property described in the attached application and I have familiarized myself with the rules and regulations of the City of Leavenworth with respect to making this application and that the statements, answers, and information contained therein are in all respects true and correct to the best of my knowledge and belief. Further, I possess full legal authority and rights necessary to exercise control over the subject property and have attached documentation showing proof that I have authority to sign my consent to any and all matters associated with the property if I am not the sole owner. I certify or declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

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

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

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

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

(Owner/Authorized Agent)

(Corporation or Company Name)

### ACKNOWLEDGEMENT

State of Washington    }  
  }ss.  
Chelan County         }

On this day personally appeared before me \_\_\_\_\_ to be known to be the individual described in and who executed within and foregoing instrument and acknowledge to me that \_\_\_\_\_ signed the same as \_\_\_\_\_ free and voluntary act and deed for the uses and purposes therein mentioned.

Dated this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

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

Printed Name: \_\_\_\_\_

My Appointment Expires: \_\_\_\_\_

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**STAFF USE ONLY**

Application received by: \_\_\_\_\_ Date: \_\_\_\_\_

Cash / Check #: \_\_\_\_\_ Amount received: \_\_\_\_\_

Docket/BSP #: \_\_\_\_\_

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: \_\_\_\_\_

120 Days from Notice of Completeness issued: \_\_\_\_\_

Date of Notice of Application/public hearing issued: \_\_\_\_\_

Date Notice of Decision issued: \_\_\_\_\_

Approved: \_\_\_\_\_ Conditions: \_\_\_\_\_

Date appeal period ends: \_\_\_\_\_

Appeal information: \_\_\_\_\_

Notes: \_\_\_\_\_  
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