



Department of Community Development  
 801 228th Avenue SE  
 Sammamish, WA 98075-9509  
 Phone: 425-295-0500  
 Fax: 425-295-0600  
 City Hall Hours: 8:30am-5:00pm  
 Permit Center: 8:30am-4:00pm  
 Web: [www.sammamish.us](http://www.sammamish.us)  
[www.mybuildingpermit.com](http://www.mybuildingpermit.com)

LAND USE APPLICATION

SMC CHAPTER 24.15.050, 21A.110.060

## Future Land Use Map Amendment & Zone Reclassification

**This application may only be submitted after a Site-Specific Land Use Map Amendment proposal has been submitted and approved to be on the docket by the City Council.**

While a Comprehensive Plan Site-Specific Land Use Map Amendment changes the future land use designation of a property, a zone reclassification is needed to change a property’s current land use zoning.

Comprehensive Plan Site-Specific Land Use Map Amendment	Zone Reclassification
Changes the <u>future land use designation</u> of a property.	Changes the zoning of a property on the <u>current zoning map</u> .

A Zone Reclassification is a Type 3 land use decision. Prior to submitting a Zone Reclassification application, applicants must complete a [Pre-Application Conference](#).

Please refer to the Future Land Use Map Amendment & Zone Reclassification Guide for an overview of the full Zone Reclassification process.

### Submittal Instructions

- Applications must be submitted online via MyBuildingPermit.com.
- All files must be uploaded in a pdf format under Document Type.
- File names must contain the document type as listed on this form, the name of the applicant, and the submittal date. For example: ***Project\_Narrative\_Smith\_01-18-2018***.
- Post submittal, you will be contacted by the Project Manager to email the Excel label template for noticing.

## Applicant Information

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Parcel Number(s): \_\_\_\_\_ Phone: \_\_\_\_\_  
Current Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_  
Resolution Number Approving Docket Item: \_\_\_\_\_

## Required Submittal Documents

- Mailing List, Map, Labels - [Template](#) and [Map](#).
  - a. Mailing list and map to include all property owners within 1,000 feet of the subject site
- Title Report (less than 30 days old) covering all property included in this application
- [Acceptance of Financial Responsibility/Affidavit of Applicant Status](#)
- Two Criterion Compliance Narratives that demonstrate the following:
  - a. How the application, as a Future Land Use Map Amendment proposal, meets the criteria listed in Sammamish Municipal Code sections 24.15.040(2) and 24.25.050(2)
  - b. How the application, as a Zone Reclassification proposal, meets the criteria listed in SMC 24.15.050(2)
- Concurrence Test Deferral Affidavit
- [Critical Area Affidavit](#)
- Legal Description (must be a title verified description by a Washington State licensed surveyor)
- Pre-Application Conference Letter
- Project Narrative
  - a. The geographic setting of the property, including sensitivity of site features (wetlands, etc.)
  - b. Include an analysis of existing surrounding area zoning and a summary of supportive infrastructure
- [SEPA Checklist](#) (applicant can re-submit the SEPA Environmental Checklist included as part of their Site-Specific Land Use Map Amendment application or provide an updated checklist)
- Signed copy of this Future Land Use Map Amendment & Zone Reclassification Application form.

## Fees

Preliminary review deposit	\$1,980
Type 3 Land Use Application Counter Service Intake Fee	\$396
Legal Notice – Publication and Mailing	\$569
Legal Notice Posting	Actual Cost
SEPA Determination	\$660

The listed fees are initial deposit amounts based on hourly rate. If the initial deposits have been exhausted before the project is completed an additional deposit will be required in the amount estimate by the Community Development Department round to the nearest 10-hour increment.

## Signatures

I certify that all the information submitted in this application including any supplemental information is true and complete to the best of my knowledge. I acknowledge that willful misrepresentation of information will terminate this permit application. I have read this application in its entirety and understand that my submittal will be reviewed for completeness and, if found to be complete, will be processed in accordance with SMC Title 20.

Applicant, Representative, and/or Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Applicant, Representative, and/or Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_