

CITY OF CARNATION

4621 Tolt Avenue • P. O. Box 1238 • Carnation, WA 98014-1238 (425) 333-4192 phone • (425) 333-4336 fax • www.carnationwa.gov

APPLICATION FOR SITE SPECIFIC REZONE

Site specific rezone review and approval in the City of Carnation is governed by Carnation Municipal Code (CMC), Section(s) 15.100.070. Rezone application fees are set by Resolution of the City Council. Copies of the above referenced CMC Sections are available upon request. Please see the document "Rezone Submittal Requirements" for information regarding necessary materials that must accompany this application.

APPLICANT: Please complete the following with as much detail as possible.

General Information		
Property Owner Name:	Assessor's PIN:	
Property Owner Mailing Address:		
Property Owner Phone:	Property Owner Fax:	
Applicant Name *:	Applicant Phone:	
Applicant Fax:	Applicant Email:	
Applicant Mailing Address:		
* Applications for site specific rezone will be accepted only from persons having the legal authority to take action in accordance with the permit. By way of illustration, in general this means that applications should be made by the owners or lessees of property, or their agents, or persons who have contracted to purchase property contingent upon their ability to acquire the necessary permits under this title, or the agents of such persons (who may make application in the name of such owners, lessees, or contract vendees).		
Site Information:		
Site Address:	Parcel Number:	
Zone (per City of Carnation Zoning map):	Total Parcel Area (sf):	
Proposed Zone:	Existing Use of Property:	
Square Footage of Existing Buildings: Retail Storage	Industrial Office TOTAL	
Building Construction Type (e.g. metal, masonry, wood, etc.):		
Please describe why you believe the Rezone is justified	ed:	



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Please describe how the following criteria described in CMC 15.100.070 are met:

- 1. The proposed rezone advances the public health, safety or welfare;
- 2. The proposed rezone is consistent with and implements the Comprehensive Plan;
- 3. There has been a change in circumstances that supports the proposed rezone;
- 4. The proposed rezone will not have a significant adverse impact upon surrounding properties.



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Affidavit:		
I, the undersigned, hereby declare that the above information is true and complete to the best of my knowledge. It is understood that the City of Carnation may nullify any decision made in reliance upon information given on this application form should there be any willful omission of significant information or any misrepresentation or lack of full disclosure on my part.		
Applicant's Signature: (to be signed in the presence of a Notary Public)	Date:	
Certificate for An Acknowledgment in an Individual Capacity		
STATE OF WASHINGTON)		
COUNTY OF) ss		
I certify that I know or have satisfactory evidence that is the person who appeared before me, and said person acknowledged that (he/she) signed this instrument and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in the instrument.		
Dated		
X_No	tary Public in and for the State of Washington	
_	Printed Name	
Residing at:		
My appointment expires:		