

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

MASTER APPLICATION FORM, PROJECT PERMITS TYPE II, III, IV, IV-A, V

Permit Review and Approval in the City of Carnation is governed by Title 15 of Carnation Municipal Code. A copy of the Carnation Municipal Code can be found on the City of Carnation website, www.carnationwa.gov. Please use the "Submittal Requirements" for the type of permit you are applying for. The submittal requirements list all of the necessary materials that must accompany this application.

Type II	Type III	Type IV	Type IV A	Type V	Misc/Other
Special Use Permit (CMC 15.18.010 et. Seq.)	➤ Conditional Use Permit (CMC 15.17.190 et seq.)	☐ Preliminary Long Plat	Site Specific Rezone – not consolidated with a Comprehensive Plan amendment	Final Plat Approval (CMC 15.16.350) (1)	Development Agreement *
Clear and Grade if Type II (CMC 15.09.050)	Shoreline Conditional Use Permit (CMC 15.92)	Preliminary Long Plat Amendment (CMC 15.16.370)		Site Specific Rezone – Consolidated with a Comprehensive Plan Amendment	
Short Plat (CMC 15.16.010 et. Seq.)	Shoreline Variance (CMC 15.92.120)	Preliminary Unit Lot Subdivision (CMC 15.16.461)			
Short Plat Amendment (CMC 15.16.460)	☐ Variance (CMC 15.20.030)				
Binding Site Plan (CMC 15.18.410 et seq.)	Sign Variance (CMC 15.68.120)				
Residential Condominium Binding Site Plan (CMC15.18.520 et seq.)	Critical Areas Reasonable Use Exception (CMC 15.88.050)				
Shoreline Substantial Development (CMC 15.92)					
Site Development Review (CMC 15.16.150 et. Seq.)					
Design Review, Major (CMC					

^{*} Pursuant to CMC 15.17.050, an application for Development Agreement shall be accompanied by a signed Cost Reimbursement Agreement and Concurrent Permit Processing Waiver and Release Form



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APPLICANT: Please complete the following with as much detail as possible. **General Information** Property Owner Name*: CITY OF CARNATION Property Owner Mailing Address: 4621 Tolt Ave., Carnation, WA 98014 Property Owner Fax: Property Owner Phone: 425-333-4192 Applicant Phone: 360-250-2222 Applicant Name*: Allen Koreis on behalf of Vertical Bridge, LLC Applicant Mailing Address: 2606 67th Way NW, Olympia, WA 98502 Applicant Email: Allen.Koreis@PowderRiverDev.com Applicant Fax: * A notarized statement of ownership signed by all owners of record must accompany this application. If the owner(s) of record is/are not the applicant, a notarized statement signed by all of the property owners authorizing the applicant to act as a representative for the property owners must accompany this application. All owners of the subject property must sign the notarized statement. **Project Information:** Project Name: US-WA-7023 TOLT HIGHTLANDS VERTICAL BRIDGE TOWER Site Address: 33284 Tolt River Rd, NE, Carnation, WA 98014 Total Parcel Area (sf): 116,046 Zone: Public Use Assessor's PIN: 152507-9067 Existing Use of Property: City Water Tank Proposed Use of Property: Adding Wireless Facility Compound Total square feet of new construction or expansion, if applicable: Number of new lots proposed, if applicable: Square Footage of Existing Buildings: ____ Industrial ____ Office TOTAL Residential Storage Retail



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Please describe the scope of the proposed project:						
Proposed is a fenced 50' x 50' gravel compound with a 155' monopole cell tower, 12' x 20' concrete pad for equipment cabinets, and 48kW Generac diesel generator. New access with locked gate to existing access road. Installation of new underground power and fiber routes required for operation.						



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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:	tary Public)	Date: 3/18/2023				
Certificate for An Acknowledgment in an Individual Capacity						
STATE OF WASHINGTON)					
COUNTY OF Thurston) ss)					
I certify that I know or have satist appeared before me, and said person it to be (his/her) free and voluntary at Dated OBUSIODA AND ATHAK NOTARY PUBLIC #176214 STATE OF WASHINGTON MY COMMISSION EXPIRES 11-15-26	sfactory evidence that Allen acknowledged that (he/she) signed act for the uses and purposes mention X Nota Residing at:	is the person who I this instrument and acknowledged oned in the instrument. Alaka Alaka Pathak Printed Name olympia intment expires: 11-15-26				
For City use only:						
Date Received:	Received By:					
Date of Determination of Complete Application:	Date of Notice of Application:	Date of Notice of Decision				
Comments:						