



CHELAN COUNTY

DEPARTMENT OF COMMUNITY DEVELOPEMENT

316 WASHINGTON ST. SUITE 301
WENATCHEE, WASHINGTON 98807-3305
TELEPHONE 509/667-6225 & 509/667-6221
[HTTP://WWW.CO.CHELAN.WA.US](http://www.co.chelan.wa.us)
FAX 509/667-6475

Please provide the following information at the time of submittal. If any of this information is not provided the department will be unable to process your application until the information is provided. Pre-Application Meetings are **required** for major subdivisions and short plats.

- A completed application form;
- SEPA environmental checklist;
- Applicable non-refundable fees (Including Planning and Public Work's processing fees);
- A vicinity map;
- A legal description for the proposed development;
- When on a public water system or sewer system include a signed "public water availability letter" for from the purveyor;
- Any analysis required through the application of Chelan County's Critical Areas Regulations;
- If larger than 8 ½ x 11 sheet of paper provide twelve (12) copies of a scaled drawing of the proposed short plat;
- Road plans must show vicinity map, road layout, lot layout, contours, and road geometrics (proposed and existing). Road plans must show cross sections & profiles for each road. Road plans must be marked "*Preliminary – Not for Construction*";
- When on-site sewage systems are proposed, site evaluations are required for each proposed lot prepared by a professional engineer or Washington State licensed OSS Wastewater Designer;
- Items addressed and requested through Pre-Application meetings.

NOTE: APPLICATION FEES ARE NON-REFUNDABLE. THERE ARE NO GUARANTEES THAT YOUR SUBDIVISION WILL BE APPROVED.

Any questions regarding this process should be directed to the Chelan County Community Development Department, (509) 667-6225. Our office hours are 8 a.m. to 5 p.m. Monday through Friday except holidays.

SUBDIVISION DRAWING REQUIREMENTS

- Must be drawn to a scale & indicate the scale used. Must include North arrow;
- Assessor's Parcel Number;
- Vicinity Map;
- Contours at best available;
- The boundary lines of the plat and the lots within it and the smallest, largest, and average lot area in the proposed subdivision expressed in square feet and all lot dimensions;
- If the development is going to proceed by dividing the original proposed subdivision into more than one subdivision or phase, the probable boundaries of each subdivision or phase shall be shown;
- The boundaries of all parcels dedicated or reserved for public or community uses;
- The delineation, location, and extent of all riparian areas, wetlands, and hundred year floodplains (and floodways within the proposed short plat, as deemed necessary);
- The location of all existing and proposed water distribution systems including their type, ownership and well radii if appropriate, sewage disposal systems, storm sewer systems, irrigation systems, and natural drainage systems;
- Identify approximate distance between all property lines, critical areas, proposed & existing buildings;
- Zoning designations and appropriate zoning setback if adjacent to Commercial Forest (FC) or Commercial Agriculture (AC);
- The location of all existing structures, wells, overhead and underground utilities, railroad right-of-ways, municipal boundaries, and other important features existing on the land proposed to be subdivided.
- Location, name, width of all right-of-ways and easements within and bordering the plat identifying whether they are public or private, centerlines, and location of complete pavement within the right-of-way. Road profiles for all adjacent roads bordering proposed plat and internal roads. Each road profile (or typical section) must identify each applicable road;
- Identify location of County road connections (dimensions & details) and indicate road name;
- Location of all existing and proposed easements, important natural features (i.e. streams, rivers, wetlands), and improvements within the plat;
- All lots and blocks within the proposed subdivision together with the numbers and letters proposed to be assigned to each lot and block;

CHELAN COUNTY AQUIFER RECHARGE AREA DISCLOSURE FORM

PROCEDURE

An applicant seeking to develop property which requires a development permit, shall submit with the permit application this certified statement, which lists each of the evaluation criteria and shall indicate whether the criteria “applies” or “does not apply” to the site or development. **Any application that fails to contain this statement or fails to indicate whether any one of the criteria applies or does not apply, shall be rejected and only accepted upon resubmission of the completed statement.** “Unknown” or similar responses will not be accepted.

If the development meets criteria A, B, C, or D or if the site or development meets any two of the remaining criteria, the Department will direct the applicant to determine the vulnerability rating for the development pursuant to Section 11.82.050 Aquifer Recharge Areas. If the development has a high or medium vulnerability rating, the development shall be subject to the performance standards of Section 11.82.060.

If an applicant’s statement asserts that the criteria do not apply to the development, the Department will accept the statement and proceed with the permitting process. Except, if the Department has or obtains information prior to the permit being finalized, which clearly establishes the applicant’s statement is incorrect. In which case, the applicant will be advised in writing of the inconsistent information and advised to either; (a) provide an amended statement adding the evaluation criteria as being applicable and determine the vulnerability rating of the development pursuant to Section 11.82.050, or (b) present sufficient countering information clearly establishing that the basis for the Department’s concern is incorrect. If the applicant selects to proceed under (b), upon receipt of the applicant’s information, the Department shall review the information and obtain whatever additional assistance may be required to resolve the issue. The final determination as to whether a determination of vulnerability is required shall be made by the Administrator.

Depending upon soil depths from the surface, the following soil series within Chelan County are considered to be highly permeable soils:

Ardenvoir: ArF, 27-43 inches (depth from surface), very gravelly sandy loam
Anatone: AkD, 5-14 inches (depth from surface), very gravelly silt loam
Beverly: Be, 17-24 inches (depth from surface), very gravelly sandy loam
 Bf, 17-24 inches (depth from surface), very gravelly sandy loam
 Bg, 0-10 inches (depth from surface), very gravelly loamy fine sand
 Bg, 17-24 inches (depth from surface), very gravelly sandy loam
Brief: BrA, BrB, BrC, Brd, 26-60 inches (depth from surface), very gravelly sandy loam
BsD, 26-60 inches (depth from surface), very gravelly sandy loam
Chelan: CgB, CgC, CgD, CgE, 35-60 inches (depth from surface), very gravelly sandy loam
 ChC, ChE, 35-60 inches (depth from surface), very gravelly sandy loam
 CkD, CkE, 35-60 inches (depth from surface), very gravelly sandy loam
CIA, CIB, CIC, CID, CIE, 35-60 inches (depth from surface), very gravelly sandy loam
Jumpe: JmD, 10-60 inches (depth from surface), very stony silt loam
 JnF, 0-60 inches (depth from surface), very stony silt loam
Loneridge: LoD, LoF, 0-10 inches (depth from surface), very stony loam; 10-16 inches (depth from surface), very gravelly clay loam
Malaga: MaA, MaC, 15-19 inches (depth from surface), very gravelly sandy loam
Peshastin: PhB, PhC, 18-60 inches (depth from surface), very cobbly silty clay loam
PID, PIE, 18-60 inches (depth from surface), very cobbly loam
Pogue: PsE, 0-17 inches (depth from surface), very stony fine sandy loam
Stemilt: StD, StE, 17-60 inches (depth from surface), very cobbly silty clay loam
Supplee: SuA, SuB, SuC, SuD, SuE, 0-6 inches (depth from surface), very fine sandy loam; 18-31 inches (depth from surface), very gravelly sandy loam
Thow: TgD, 10-60 inches (depth from surface), very gravelly sandy loam
 ThE, 10-60 inches (depth from surface), very gravelly sandy loam
Tronsen: TrD, TrE, 8-60 inches (depth from surface), very gravelly clay loam

CHELAN COUNTY AQUIFER RECHARGE AREA DISCLOSURE FORM

APPLICANT AND ADDRESS

OWNER AND ADDRESS

Phone _____

Phone _____

Assessor's Parcel Number(s): _____

Section _____ Township _____ Range _____

Permit#: _____ Permit Type: _____

EVALUATION CRITERIA

The applicant is required to determine the vulnerability rating for **any development permit** not otherwise exempted, if the site or development meets criteria A, B, C, or D or meets two or more of the remaining criteria below:

On the lines provided, write the word "Applies" if the particular item applies to your project's location or if the item applies to your present or future development plan(s). If the item does not apply to your project's location or your present or future development plan(s), then write the words "Does not apply."

Do not leave any line blank or write in any other word(s). The County cannot accept a development application unless this Disclosure Form is complete. The County will return incomplete applications to the applicant.

Please write the word(s) "**Applies**" or "**Does Not Apply**" on the lines before each of the following statements:

_____ **A.** *Within a wellhead protection area designated under WAC 246-290;

_____ **B.** Within an aquifer recharge area mapped and identified by a qualified ground water scientist;

_____ **C.** The site will be utilized for hazardous substance, (as now or hereafter defined in RCW 70.105D.020 (7)), processing storage or handling in applications or quantities larger than is typical of household use;

_____ **D.** The site will be utilized for hazardous waste treatment and storage as set forth in RCW 70.105 Hazardous Waste Management, as now or hereafter amended;

_____ **E.** **The site contains highly permeable soils, which include soil types 1a, 1b, and 2a under WAC 246-272-11001, Table II;

_____ **F.** Within a sole source aquifer recharge area designated pursuant to the Federal Safe Drinking Water Act (**None currently designated in Chelan County**);

_____ **G.** Within an area established for special protection pursuant to a groundwater management program, RCW Chapters 90.44, 90.48, and 90.54 and WAC Chapters 173-100 and 173-200. (**None currently designated in Chelan County**);

_____ **H.** The development involves a proposed major or short subdivision and includes present or future plans to construct three or more dwelling units where the dwelling units will not be connected to a public sewer system and any of the lots are less than one (1) net acre in size;

_____ **I.** The proposed commercial and industrial site is not on a public water system and the main structure exceeds 4,000 square feet;

_____ **J.** The proposed use is as a commercial feedlot;

_____ **K.** The development is within 200 feet of the ordinary high water mark of a perennial river, stream, lake, or pond.

***Wellhead Protection Area:** The surface and subsurface area surrounding a well or well field for a distance of 100 feet, supplying a public water system, though which contaminants are reasonably likely to move toward and reach such water well or well field.

****Highly Permeable Soils:** Include soil types 1A, 1B, and 2A from Table II, Soil Textural Classification, WAC 246-272-11001. 1A: Very gravely coarse sands or coarser, all extremely gravely soils. 1B: Very gravely medium sand, very gravely fine sand, very gravely very fine sand, very gravely loamy sands. 2A: Coarse sands (also includes ASTM C-33 sand).

I certify or declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Name: _____ Signature: _____

Date: _____ At: _____

ACKNOWLEDGEMENT

State of Washington)
) ss
County of Chelan)

On this day personally appeared before me

_____ to be known to be the individual(s) described in and who executed the within and foregoing instrument and acknowledged to me that _____ signed the same as _____ free and voluntary act and deed for the uses and purposes therein mentioned.

NOTARY PUBLIC in and for the State of Washington

Residing in:	_____
My Commission Expires:	_____
Date:	_____

FOR DEPARTMENTAL USE ONLY

Date Stamp:

Received By: _____
Fees Paid: _____
Receipt No: _____
PW Receipt No: _____

APPLICABLE SHORT PLAT SUBMITTAL FEES: (subject to change please call prior to submittal)

Pre-Application: \$208
Planning Review: \$572 + \$75/LOT
Environmental Review (SEPA): \$180
Fire Review: \$20
Public Works: \$30

* Fees will be assessed for Mylar review following preliminary approval.

Chelan-Douglas Health District will bill for their processing fees once referral materials are received. In order to determine the amount due please contact Chelan-Douglas Health District at 509-886-6450.

APPLICABLE PLAT SUBMITTAL FEES: (subject to change please call prior to submittal)

Pre-Application: \$208
Planning Review: \$1,352 + \$50/LOT
Environmental Review (SEPA): \$180
Fire Review: \$20
Public Works: \$30

* Fees will be assessed for Mylar review following preliminary approval.

**CHELAN COUNTY
SUBDIVISION APPLICATION**

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 CCC 14.08.030.

SECTION I: APPLICANT INFORMATION

1. If an amendment, relate to Application/File #: _____
2. Was there a pre-application meeting? NO YES Name: _____
3. Identify Use or Activity for which the permit is requested: _____
4. Project Name: _____
5. **Applicant:** _____ Phone: _____
 E-Mail Address: _____
 Address: _____ Bus. Phone: _____
 City & State: Zip Code: _____
6. **Owner:** _____ Phone: _____
 E-Mail Address: _____
 Address: _____ Bus. Phone: _____
 City & State: _____ Zip Code: _____
7. **Agent:** _____ Phone: _____
 E-Mail Address: _____
 Address: _____ Bus. Phone: _____
 City & State: _____ Zip Code: _____
8. **Surveyor/Engineer:** _____ License #: _____
 E-Mail Address: _____
 Address: _____ Phone: _____
 City & State: _____ Zip Code: _____
9. Please indicate contact person: Applicant Owner Agent Surveyor
10. Detailed Description of Request: _____

SECTION II: PARCEL/SITE INFORMATION

1. Site address: (Street, City, Zip) _____
2. Assessor's parcel number(s): _____
3. Location: Section: _____ Township: _____ Range: _____
4. Please give detailed driving directions to the site: _____

5. Legal description(s) (Attach legal description(s) unless lot and block):

6. Zoning designation: _____
7. Comprehensive plan designation: _____
8. What is the current use of the site? _____
9. Identify existing structures and improvements on site: _____

10. Is the site near an airport? NO YES Airport: _____
11. Is the site within a 100-year flood plain? NO YES
12. Are there wetlands, water bodies, rivers, or streams on the site or within 200 feet of the site?
 NO YES
If yes, identify: _____
What is the Shoreline Environment Designation? _____
13. Are there steep slopes on the site? NO YES
14. Is the site in a fish and wildlife habitat conservation area? NO YES
15. Are there any known cultural or archeological resources on the site? NO YES
16. Will landfill be required? NO YES If yes, approximate cubic yards: _____
17. Will excavation be required? NO YES If yes, approximate cubic yards: _____
18. Are there any geologically hazardous areas on the site or within the specified distance of the site including:
 Snow avalanche areas (500') Landslide hazard areas (500')
 Erosion hazard areas (on-sight) Slopes > 45% (250')
 Areas of historic (250') Alluvial fan (250')
19. What is the average grade of the site? _____
20. Identify the school district in which the property is located: _____
21. Located within an urban growth area? NO YES _____
22. Identify the fire district in which the property is located: _____

23. Please describe adjacent land uses in all directions around the subject property:

North: (Use;Zoning) _____
 South: (Use;Zoning) _____
 East: (Use;Zoning) _____
 West: (Use;Zoning) _____

24. Roads: Name of the road(s) the property fronts on _____
 (Contact the Public Works department with any questions pertaining to roads)

Identify type of Road:

County Road Primitive County Road Private Road
 Driveway Forest Service Road State/US Highway
 Access Easement

Width of existing road surface:

Type of existing road surface: Paved/Two shot Asphalt
 Gravel Dirt

25. Is this subdivision to be performed as a cluster subdivision as per Chapter 12.28, CCC?
 NO YES

26. If all or part of the property has been involved in a previous short subdivision, provide name and number. _____

27. Total area involved (acres): _____

28. Number of proposed lots and sizes in square feet and acres:
 (If a Major Subdivision lot calculation are to be represented on the face of the site plan)

1/A	(acres)	(square feet)
2/B	(acres)	(square feet)
3/C	(acres)	(square feet)
4/D	(acres)	(square feet)
Open Space Tract	(acres)	(square feet)

29. **Water:**

- Existing Public Water System** - Name of water system: _____
 - Attach copy of **Letter of Water Availability**, signed by utility confirming service available to each proposed lot of plat.
- Proposed Public Water System** - Name of water system: _____
 - Requires approval of water system by Health District and/ or State Department of Health. Contact Health District for information.
- Private Water Supplies** - Individual wells each lot, or wells shared by no more than two lots:
 - A **Private Water System Review** application must be reviewed and approved by Health District.

30. **Sanitation:**

- Public Sewer System** - Name of sewer system: _____
 - Attach copy of **Letter of Sewer Availability**, signed by utility, confirming sewer service available to each proposed lot of plat.
- On-site Sewage Systems**
 - Attach Site Evaluation report required to determine suitability of soils and minimum lot sizes. A test hole on each proposed lot is required.

31. **Power:**

Is electrical power available to the site? No Yes

If yes, identify provider: PUD REA OTHER: _____

32. Phone: NO YES Name of utility: _____

33. Natural Gas: NO YES Name of utility: _____

34. Cable: NO YES Name of utility: _____

35. Irrigation: NO YES Name of Provider: _____

Number of water shares : _____ Are water shares to be divided? Yes NO

36. Garbage Service: NO YES Name of Utility: _____

37. Nearest town or city: _____

SECTION III: GENERAL INFORMATION

- 38. Has site preparation been started on the site? If so, explain to what extent. _____

- 39. If the proposal is commercial or industrial, what are the hours of operation? _____

- 40. What type of landscaping, fencing, and buffering will be used to shield the proposed use from adjoining properties? _____

- 41. Do you have any plans for future additions, expansions, or further activity related to or connected with the proposal? Explain: _____

- 42. Are there any other applications pending for governmental approvals for this or other proposals affecting the property covered by this proposal? No Yes If yes, please list: _____

- 43. Please provide a development schedule with the approximated dates that you propose to commence and complete construction. _____

In order to be accepted for a Determination of Completeness, all land use permit applications must include a complete application, including a vicinity map that identifies the boundaries of the subject property, a complete site plan, environmental checklist (SEPA), all applicable fees, and applicable review criteria questions specific to each category of permit application.

SECTION IV: OWNERSHIP CERTIFICATION

IF A PERSON OTHER THAN THE PROPERTY OWNER IS SIGNING THIS APPLICATION, AN AGENT AUTHORIZATION FORM MUST ALSO BE SUBMITTED.

I, _____ here by certify that I am the major property owner, authorized agent, or officer of the corporation owning property described in the attached application and I have familiarized myself with the rules and regulations of Chelan County 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.

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 _____ Signature _____

Date _____ for _____

(Give corporation or company name)

At _____

(Here signator must state place of signing
which may be different than address.)

ACKNOWLEDGEMENT

State of Washington }
 }
Chelan County }

On this day personally appeared before me _____ to be known 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 purposed therein mentioned.

NOTARY PUBLIC in and for the
State of Washington
Residing in _____
Date: _____

SECTION V: AGENT AUTHORIZATION

IF A PERSON OTHER THAN THE PROPERTY OWNER IS SIGNING THIS APPLICATION, AN OWNERSHIP CERTIFICATION MUST ALSO BE SUBMITTED.

I, _____, hereby certify that I am the property owner of record and possess the full legal authority and rights necessary to exercise control over the property, described as Chelan County Tax Parcel No(s)._____.

I am authorizing _____, to act as my agent, on my behalf, for the purpose of _____.

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 _____ Signature _____

Date _____ for _____

(Give corporation or company name)

At _____

(Here signator must state place of signing which may be different than address.)

ACKNOWLEDGEMENT

State of Washington }
 }
Chelan County }

On this day personally appeared before me _____ to be known 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 purposed therein mentioned.

NOTARY PUBLIC in and for the
State of Washington
Residing in _____
Date: _____