



**CHELAN COUNTY
INFORMATION MATERIALS FOR A COMPREHENSIVE
PLAN TEXT AMENDMENT APPLICATION**

This packet is designed to assist you in preparing your application for a Comprehensive Plan text amendment. Applications may be submitted to the Chelan County Building/Fire Safety and Planning Department, 411 Washington St., Wenatchee, WA 98801 between 8 a.m. and 5 p.m. Monday through Friday, except holidays.

Please provide the following information at the time of submittal. If any of this information is not provided we will be unable to process your application.

- A completed application form**
- Applicable non-refundable fees**
- A complete Environmental Checklist signed and dated by the applicant or designated agent and application fee.**
- Agent authorization form (If an agent is representing the applicant)**

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

After the application is accepted there is a twenty-eight (28) day period where a determination of completeness will be issued. Once the determination is made the application will be docketed for a July-August sixty-day review to the required state agencies.

Following the sixty-day review a public hearing will be held with the Planning Commission between September and October for consideration of amendments to the Comprehensive Plan. The Planning Commission will provide a recommendation to the Board of County Commissioners.

The Board of Commissioners will hold a public meeting in November or December to consider adoption of the Planning Commission's recommendations for amendments to the Comprehensive Plan. The final adoption of an amendment should be completed by the end of December.

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

FOR DEPARTMENTAL USE ONLY

	Date Stamp:
Date Received: _____	
Received By: _____	
Received via US Mail: _____	
Accepted: _____	
Fees Paid: _____	
Receipt No: _____	

CHELAN COUNTY COMPREHENSIVE PLAN TEXT AMENDMENT APPLICATION
(Rev. 4-27-04)

SECTION I: APPLICANT INFORMATION

APPLICATION REQUIREMENTS FOR COMPREHENSIVE PLAN TEXT AMENDMENT

Applications for text amendments to the Chelan County Comprehensive Plan must be submitted in writing to the Director of the Chelan County Department of Building/Fire Safety and Planning by the **first business calendar day of March by 5:00 PM**. Amendment requests submitted after said date shall be processed during the next calendar year’s amendment process. RCW 36.70A, the Growth Management Act requires that the County process Comprehensive Plan amendments no more than once a year. Applications must contain the information noted below. It may be necessary for the applicant to attach an additional page(s) to adequately address a question(s):

1. **Applicant:** _____ Phone: _____
 Address: _____ Bus. Phone: _____
 City & State: _____ Zip Code: _____
2. **Agent:** _____ Phone: _____
 Address: _____ Bus. Phone: _____
 City & State: _____ Zip Code: _____
3. **Contact Person:** _____ Phone: _____
 Address: _____ Bus. Phone: _____
 City & State: _____ Zip Code: _____

SECTION II. COMPREHENSIVE PLAN TEXT AMENDMENT QUESTIONS

THE FOLLOWING QUESTIONS MUST BE ANSWERED FOR COMPREHENSIVE PLAN TEXT AMENDMENT APPLICATIONS.

1. A detailed statement of what is proposed to be changed.

2. Explain why the Comprehensive Plan text amendment is needed. What public land use issue or problem is resolved by the proposed amendment?

3. Explain how the proposed text amendment is consistent with the goals of the Washington State Growth Management Act (RCW 36.70A as amended) and any applicable County-Wide Planning Policies.

4. A statement of how the proposed text amendment complies with or supports the Comprehensive Plan's goals and policies, or how amendment of the Plan's goals or policies is supported by changing conditions or State or Federal mandates.

5. Will the proposed text amendment affect lands designated as resource lands of long term commercial significance and/or critical areas? If so, how will the proposed amendment impact these areas?

6. Explain how the proposed text amendment would serve the interests of the public as a whole, including health safety or welfare.

SECTION III COMPREHENSIVE PLAN TEXT AMENDMENT CRITERIA

Proposed text amendments to the Chelan County Comprehensive Plan and County adopted city plans must meet the following criteria:

- 1) The proposal is necessary to address a public land use issue or problem: and
- 2) The proposed amendment is consistent with the requirements of the Washington State Growth Management Act (RCW 36.70A as amended); and any applicable County-Wide Planning Policies
- 3) The text amendment complies with or supports the Comprehensive Plan's goals and policies, or how amendment of the Plan's goals or policies is supported by changing conditions or State or Federal mandates; and
- 4) The amendment does not adversely affect lands designated as resource lands of long-term commercial significance or designated critical areas in ways that cannot be mitigated; and
- 5) The proposed amendment would serve the interests of not only the applicant, but the public as a whole, including health, safety or welfare.

SECTION IV SIGNATURE

I hereby certify that that all information submitted with this application is complete and correct. False statements, errors, and/or omissions may be sufficient cause for denial of the request.

Applicant Name: _____

Applicant Signature: _____ Date: _____

Agent Name: _____

Agent Signature: _____ Date: _____

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, except variance, planned development, and rezone requests.

SECTION V: AGENT AUTHORIZATION FORM

I am authorizing _____, to act as my agent or 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 _____ Date _____

for (corporation or company name) _____

Signature _____

At _____

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

ACKNOWLEDGEMENT

State of Washington }

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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: _____