



**THE CITY OF FIRCREST**

115 RAMSDELL STREET • FIRCREST, WASHINGTON 98466-6999 • (253) 564-8901 • FAX (253) 566-0762

**COMPREHENSIVE PLAN AMENDMENT TO TEXT AND/OR MAP**

**Case No.** \_\_\_\_\_

**Background Information**

Applicant \_\_\_\_\_

Phone \_\_\_\_\_ Fax # \_\_\_\_\_ e-mail \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact person (if different from applicant) \_\_\_\_\_

Phone \_\_\_\_\_ Fax # \_\_\_\_\_ e-mail \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Property owner (if different from applicant) \_\_\_\_\_

Phone \_\_\_\_\_ Fax # \_\_\_\_\_ e-mail \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Project Engineer/Land Surveyor \_\_\_\_\_

Phone \_\_\_\_\_ Fax # \_\_\_\_\_ e-mail \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Proposal Description**

**Existing Comprehensive Plan Designation** \_\_\_\_\_

**Proposed Comprehensive Plan Designation** \_\_\_\_\_

**Site Area (sq. ft. or acres)** \_\_\_\_\_

**Address of site:** \_\_\_\_\_ **Parcel No.** \_\_\_\_\_

**Describe proposed land uses:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Describe how the proposed amendment is consistent with the goals, objectives and policies of the comprehensive plan:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Describe how the proposed amendment will promote, rather than detract from, the public health, safety, morals and general welfare:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Describe how the proposed zoning is compatible with the uses and zoning of surrounding property (required only for zoning map amendments):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Describe how the property is suited for the uses allowed in the proposed zoning classification (required only for zoning map amendments):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Describe the change of conditions that has occurred within the neighborhood or community since adoption of the comprehensive plan, this title, and amendments thereto, to warrant a determination that the proposed amendment is in the public interest (required only for zoning map amendments and amendments to this title which require a comprehensive plan amendment to ensure consistency under subsection (a) of this section):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Submittal Requirements**

1. An accurate map and legal description of the subject property (see below)
2. A completed environmental checklist for project subject to review under the State Environmental Policy Act (when applicable)
3. Any supplemental information or special studies identified by the director
4. Completed application

**Legal Description of Property Involved in this Request**

Lot(s) \_\_\_\_\_ Block(s) \_\_\_\_\_ Subdivision \_\_\_\_\_

**Note:** If the property is not platted, provide a complete legal description and parcel number for each parcel or tract within the project site, obtained from a Title company or the Pierce County Assessor-Treasurer. If the project site is large and contains several lots or tracts and different ownerships, do not attempt to write an overall legal description. Outlining the project site on a current print of an Assessor's Map will be sufficient.

If more space is needed attach additional 8-1/2" x 11" sheets to this form.

I/We \_\_\_\_\_, hereby attest that I/We am/are a property owner(s) or officer of a corporation owning property involved in this request and that I have familiarized myself with the rules and regulations of the City of Fircrest, with respect to preparing and filing this application, and hereby give consent to this application and that the foregoing statement, answers and information submitted in behalf of this application are in all respects true and correct, to the best of my knowledge and belief.

\_\_\_\_\_  
 Name of individual, corporation or company      Signature

\_\_\_\_\_  
 Address      City, State, Zip

**For Staff Use Only**

Application Request	Intake Fee	Deposit
Amendment to Comprehensive Plan Map	\$450.00	\$1,800.00
Amendment to Comprehensive Plan Text	\$450.00	\$1,800.00

Received by \_\_\_\_\_ Fees paid \_\_\_\_\_ Receipt # \_\_\_\_\_