Administrative Design Review

Application

Submittal Items

Please include the following:

- O Application
- O Two copies of elevation plans, site design plan, exterior mechanical devices screening plans, and/or other related documents needed for review.
- Required building/construction plans
- O Review Fee: \$250 intake \$300 deposit

The applicant shall be responsible for the actual cost incurred by the City in processing the application. The total fee shall be reduced by the amount of the deposit. The applicant shall remit to the City the amount exceeded by the deposit. If the deposit fee exceeds the City's actual costs, the balance shall be refunded.

Administrative design review requires a staff review to ensure project compliance with all applicable development regulations contained in this code, the design guidelines adopted in this title and incorporated by reference in Chapter 22.64 FMC, and the goals, policies and objectives of the comprehensive plan. Administrative design review may consist of either a one-step or two-step process depending on the complexity of the proposal and the applicant preferences.



Planning and Building 115 Ramsdell St Fircrest WA 98466 253-564-8902 www.cityoffircrest.net

Applicant Name:			
Address:			
Representative (if different):			
Phone:	Email:		
Property Owners (if different):			
Phone:	Email:		
Project Address:			
Brief Description of Project:			
Parcel Number(s):	Commercial Use:		
Land Use Designation:	Zoning Designation:		
Environmental sensitive areas of	on or within 150': Yes No		
Physical Characteristics of Site:			
I certify that all of the information	on submitted in this application including any		

I certify that all of the information submitted in this application including any supplemental information is true and complete to the best of my knowledge and I acknowledge that willful misrepresentation of information will result in the cancellation of this permit application. I have read this application in its entirety and understand that my submittal will be reviewed for completeness and, if found to be complete, will be processed in accordance with FMC 22.05.

Signature:	 Date:	
Signature:	Date:	