



COMPREHENSIVE PLAN & DEVELOPMENT CODE AMENDMENT REQUEST

Liberty Lake Planning & Building Services
22710 E. Country Vista Drive, Liberty Lake WA 99019
Phone: (509) 755-6707 Fax: (509) 755 6713
Website: www.libertylakewa.gov

PLEASE CHECK APPLICABLE AMENDMENT REQUEST (submit 1 application per request)

- COMPREHENSIVE PLAN TEXT AMENDMENT
- COMPREHENSIVE PLAN LAND USE MAP AMENDMENT
- DEVELOPMENT CODE TEXT / ZONING MATRIX AMENDMENT
- ZONING MAP AMENDMENT

NOTE: A DEVELOPMENT CODE / ZONING MAP AMENDMENT MAY BE REQUIRED CONCURRENT WITH A COMPREHENSIVE PLAN MAP / TEXT AMENDMENT REQUEST IN ORDER TO KEEP THE DOCUMENTS CONSISTENT. CONSULT PLANNING & BUILDING SERVICES FOR MORE INFORMATION.

ADDITIONALLY, A PRE-APPLICATION CONFERENCE IS REQUIRED PRIOR TO SUBMITTAL OF THIS APPLICATION. TO SCHEDULE A PRE-APPLICATION CONFERENCE, PLEASE CONTACT PLANNING & BUILDING SERVICES.

Planning is an ongoing process, and improved data or changing circumstances will require amendment to the comprehensive plan or development regulations. Amendments to the comprehensive plan or development regulations can be requested by the City Council, Planning Commission, City Staff, or by any affected citizen on a yearly basis. Yearly review of proposed amendments shall begin in April and should conclude in December. **Complete applications for amendments shall be submitted by 4pm on April 1st of each year in order for the amendment to be reviewed that year.** Applications for amendments submitted after 4pm on April 1st or incomplete applications shall be reviewed the following year. Refer to City Development Code Section 10-4B-5 (Type IV Projects) for additional information.

COMPREHENSIVE PLAN TEXT / LAND USE MAP AMENDMENT:

Proposed amendments to the City of Liberty Lake Comprehensive Plan will initially be reviewed by the Planning Commission. A public workshop and a public hearing will be held, and the Planning Commission will make a recommendation of approval or denial to the City Council. The City Council will approve or deny the proposed amendment after an additional public workshop and public hearing. Comprehensive Plan amendments can only be considered once each calendar year; City Staff, the Planning Commission, and the City Council must consider all of the proposed amendments for the year concurrently in order to assess their cumulative impact. A Development Code / Zoning Map Amendment may also be required concurrent with a Comprehensive Plan Map / Text Amendment request in order to keep the documents consistent.

DEVELOPMENT CODE / ZONING MAP AMENDMENTS:

The annual deadline for submittal of requests for Development Code Amendments is 4pm on April 1st. Proposed amendments to the Development Code, the Zoning Map, and the Zoning Matrix are reviewed once a year during the Comprehensive Plan annual review period in order to keep the documents consistent.

The Planning Commission will review amendment requests and prepare a recommendation of approval or denial to the City Council based on the following criteria. Amendments will only be granted if the City Council determines that the request is consistent with the following criteria. Applicants must address each of the following standards and criteria in a written response that shall be attached to this amendment request application:

1. The amendment will not result in development that will adversely affect the public health, safety, and general welfare.
2. The amendment is based on new information that was not available at the time of adoption of the Comprehensive Plan / Development Code, or that circumstances have changed since the adoption of the Comprehensive Plan / Development Code that warrant an amendment.
3. The amendment is consistent with other goals and policies of the Comprehensive Plan, and that the amendment will maintain concurrency between the Land Use, Transportation, and Capital Facilities Elements of the Comprehensive Plan and/or Development Code sections.

To address the above criteria, consider and discuss the following questions:

- What is the public benefit, necessity and/or convenience that requires this amendment?
- What significance will the proposed amendment have to the community?
- What effect will the proposed amendment have on other elements of the Comprehensive Plan or Development Code sections?
- What effect will the proposed amendment have on public funding? Will approval or denial of the proposed amendment cause public funds to be expended?
- Will approval of the proposed amendment require expansion of infrastructure for transportation, utilities and/or other essential public services and facilities?
- What effect will the proposed amendment have on related ordinances, regulations, and development standards?
- What impact will the proposed amendment have on:
 - a) The health, safety and general welfare of the public;
 - b) The City design and aesthetics;
 - c) Development interests;
 - d) Neighborhoods;
 - e) Environmentally sensitive areas.

APPLICATION - PART 1

ANSWER THE FOLLOWING, AS APPLICABLE (ANSWER N/A IF NOT APPLICABLE TO THIS AMENDMENT REQUEST)

APPLICANT 1:

Name: _____ Contact Person: _____
Mailing Address: _____ Phone: _____
City/State/Zip: _____ Fax Number: _____
Signature: _____ E-mail: _____

APPLICANT 2:

Name: _____ Contact Person: _____
Mailing Address: _____ Phone: _____
City/State/Zip: _____ Fax Number: _____
Signature: _____ E-mail: _____

AGENT/ CONSULTANT/ ATTORNEY: (mandatory if primary contact is different from applicant or property owner)

Name: _____ Contact Person: _____
Mailing Address: _____ Phone: _____
City/State/Zip: _____ Fax Number: _____
Signature: _____ E-mail: _____

PROPERTY OWNER:

Name: _____ Contact Person: _____
Mailing Address: _____ Phone: _____
City/State/Zip: _____ Fax Number: _____
Signature: _____ E-mail: _____

PROPERTY OWNER 2 : (if more than two property owners attach additional info/signature sheets)

Name: _____ Contact Person: _____
Mailing Address: _____ Phone: _____
City/State/Zip: _____ Fax Number: _____
Signature: _____ E-mail: _____

The above signed property owners certify that the above information is true and correct to the best of our knowledge and under penalty of perjury, each state that we are all of the legal owners of the property described above and designate the above listed agent/consultant/attorney to act as our agent with respect to this application.

Comprehensive Plan & Development Code Text Amendment -

Which goals and policies of the Liberty Lake Comprehensive Plan are you requesting to be amended or added? List the applicable element(s) and text sections for which an amendment is being sought. Please include the element number(s), specific sections of the text and page number(s).

Comprehensive Plan & Development Code Text Amendment -

What do you want to change about the Comprehensive Plan / Development Code and why? Discuss the reason or rationale for the proposed text amendment.

Comprehensive Plan & Development Code Text Amendment -

What specific language revisions to the Comprehensive Plan / Development Code text are you requesting?

Comprehensive Plan Land Use Map & Zoning Map Amendments -

Site Address / Location: _____

Parcel Number(s) of Project / Proposal: _____

Legal Description of Project / Proposal: _____

Section____ Township____ Range____ Source of Legal Description: _____

Parcel Size(s): _____

Adjacent Area Owned or Controlled (acres or sq. ft.): _____

Parcel Number(s) of Adjacent Area: _____

Description of Proposal: _____

	<u>Current Designation</u>	<u>Requested Designation</u>
Land Use Map:	_____	_____
Zoning Map:	_____	_____

Existing Use of Property: _____

Proposed Use of Property:

- Single Family Dwellings Duplexes Multifamily Dwellings
Manufactured Homes Commercial Industrial Mixed Use
Other (describe): _____

Reason or Rationale for the Proposed Amendment / Reclassification: _____

What Factors Support the Proposal?

Consistency with the Comprehensive Plan: _____

Compliance with the Purpose and Intent of the Zoning: _____

School District: _____

Fire District: _____

Sewer Purveyor: _____

Water Purveyor: _____

List Previous Planning Actions Involving Subject Property: _____

Name of Public Road(s) Providing Access: _____

Width of Property Fronting on Public Road: _____

Does the Proposal Have Access to an Arterial or Planned Arterial: YES NO

Name of Arterial Road(s): _____

If You Do Not Hold Title to the Property, What is Your Interest In It? _____

What Impacts Will the Proposed Amendment / Reclassification Have on the Adjacent Properties? _____

What Measures Do You Propose to Mitigate Your Proposal's Impact on Surrounding Land Use? _____

APPLICATION - PART 2

THE ITEMS BELOW MUST BE SUBMITTED WITH YOUR APPLICATION, AS APPLICABLE:

APPLICATION FORM & FEES

Submit completed application on the attached form with all signature blocks completed and non-refundable application fees and associated environmental fees (contact Planning & Building Services for a copy of the current fee schedule). *Acceptance of the application and fees does not guarantee approval of the amendment).*

AGREEMENT TO PAY FEES

WRITTEN RESPONSE TO STANDARDS & CRITERIA FOR AMENDMENTS (see Page 2 of 10 above)

ASSESSOR'S SECTION MAPS (MAP AMENDMENTS ONLY)

Submit 1 copy of current County Assessor maps showing the subject property outlined in red and adjacent property owned or under option to the owner or sponsor (indicate adjacent property with a red dashed line). Adjacent includes property located across roads and rivers, etc.

Assessor maps are available at the County Assessor's Office and must be current (less than 30 days old) at the time of submittal and stamped by a licensed land surveyor. Platted (1"=200') and range (1"=400') parcel maps must be obtained, as you may need both sets, depending on your property location. The maps are used for legal notification of property owners within 400 feet of the boundary of the total contiguous ownership and/or controlled property (shown in red). Label and show in red line the 400 foot boundary from the total contiguous ownership.

Note: The property does not have to be surveyed at this time. The map stamped by a licensed land surveyor verifies the written legal description for the proposed zone change is an approximate representation on the map.

ZONING SECTION MAP (MAP AMENDMENTS ONLY)

Submit 1 copy of the official zoning map with the boundary of the proposed zone change(s) indicated in red, with the proposed zoning labeled on the property. The zoning boundary shall be stamped by a licensed land surveyor. Copies of official zoning maps are obtainable from the City of Liberty Lake. (The written legal description(s) on the application form and the zoning boundary(s) shown on the map shall coincide).

Note: The property does not have to be surveyed at this time. The map stamped by a licensed land surveyor verifies the written legal description for the proposed zone change is an approximate representation on the zoning map.

ENVIRONMENTAL CHECKLIST

CERTIFICATE OF WATER & SEWER AVAILABILITY (MAP AMENDMENTS ONLY)

Submit 1 copy of a signed certificate of water availability from the water purveyor and 1 copy of a letter from the sewer purveyor discussing how sewer will be provided to the site (size of lines and improvements required to connect) and whether the required improvements are in conformance with the approved sewer comprehensive plan or an amendment to the sewer comprehensive plan is required.

ZONING PLAN AND / OR SITE PLAN (MAP AMENDMENTS ONLY, IF APPLICABLE)

Submit 1 hard copy of the development proposal zoning plan / site plan drawn to scale and 1 .pdf (on CD) indicating the following information in a clear and concise manner:

- a. Scale of drawing; north arrow; dimensions of the site boundaries and area in square feet or acres; corporation, firm, or individual preparing the site plan – with the date; and a small vicinity map.
- b. The following data in table form on the site plan:

Existing Zone(s)	Proposed Zone(s)	Acres or Sq. Ft.
<p>Building Information:</p> <p>Percent of Building Coverage _____ (in sq. ft.)</p> <p>Building Use(s) _____</p> <p>Landscaped Areas _____ (in sq. ft.)</p> <p>Type of Landscaping _____</p> <p>No. of Parking Spaces Required _____</p> <p>Percent of Open Space (exclude paved areas) _____ (in sq. ft.)</p> <p>Building Setbacks _____</p>		

c. Indicate the following:

1. Indicate right of way width and names of streets adjacent to the site.
2. Existing buildings and other improvements; indicate which ones are to remain, which ones are to be removed.
3. Proposed buildings and dimensions.
4. Height of all buildings, structures, and signs.
5. Access points and driveways.
6. Proposed or existing easements providing access to the site.
7. Interior circulation patterns.
8. Parking areas and spaces.
9. Building setbacks to property lines, and to center line of adjacent private and public roads.
10. Type and location of landscaping, fencing, lighting, and signage.

REQUIRED PUBLIC NOTICE - Planning & Building Services staff will provide you with the preparation instructions at the Pre-Application Conference

OTHER EXHIBITS OR APPLICATIONS

APPLICATION - PART 3

SURVEYOR VERIFICATION

I, THE UNDERSIGNED, A LICENSED LAND SURVEYOR, HAVE COMPLETED THE INFORMATION REQUESTED. THE MAP / SITE PLAN HAS BEEN PREPARED BY ME OR UNDER MY SUPERVISION IN ACCORDANCE WITH THE REQUIREMENTS OF THE CITY OF LIBERTY LAKE ZONING / SUBDIVISION REGULATIONS AND THE LAWS OF THE STATE OF WASHINGTON.

PRINTED NAME: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SIGNATURE OF SURVEYOR DATE

I, THE UNDERSIGNED, SWEAR OR AFFIRM UNDER PENALTY OF PERJURY THAT THE ABOVE RESPONSES ARE MADE TRUTHFULLY AND TO THE BEST OF MY KNOWLEDGE. I FURTHER SWEAR OR AFFIRM THAT I AM THE OWNER OF RECORD OF THE AREA PROPOSED FOR THE PREVIOUSLY IDENTIFIED LAND USE ACTION, OR, IF NOT THE OWNER. ATTACHED HEREWITH IS WRITTEN PERMISSION FROM THE OWNER AUTHORIZING MY ACTIONS ON HIS/HER BEHALF.

PRINTED NAME: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SIGNATURE OF APPLICANT OR REPRESENTATIVE DATE

STATE OF WASHINGTON)
) ss:
CITY OF LIBERTY LAKE)

Notary: Signed and sworn to before me this _____ day of _____, 20_____

Notary Public in and for the State of Washington

Residing at: _____

My Appointment Expires: _____

THIS APPLICATION AND ALL SUPPORTING MATERIAL REQUIRED BY THE CITY MUST BE SUBMITTED AT THE TIME OF APPLICATION IN ORDER FOR THE APPLICATION TO BE COMPLETE.

(PLANNING & BUILDING SERVICES OFFICE USE ONLY)

DATE RECEIVED: _____

RECEIVED BY: _____

DATE COMPLETE: _____

FILE NUMBER: _____

TOTAL FEES: _____

RECEIPT NUMBER: _____

AMENDMENT INITIATED BY:

Citizen
Staff

Planning Commission

City Council

City

Other: _____