



CITY OF CARNATION

4621 Tolt Avenue • P. O. Box 1238 • Carnation, WA 98014-1238
(425) 333-4192 phone • (425) 333-4336 fax • www.carnationwa.gov

MASTER APPLICATION FORM, PERMITS TYPE I

Permit Review and Approval in the City of Carnation is governed by Title 15 of Carnation Municipal Code. A copy of the Carnation Municipal Code can be found on the City of Carnation website, www.carnationwa.gov. Please use the “Submittal Requirements” for the type of permit you are applying for. The submittal requirements list all of the necessary materials that must accompany this application.

APPLICANT: Please check the box of the permit(s) you are applying for:

Type I Permit

- Administrative Interpretation
- Boundary Line Adjustment
- Design Review, Minor
- Sign Permit
- Other construction permit exempt from SEPA
- Zoning Permit
 - Mobile Sales & Delivery (Class 2.3 Uses)
 - Non-Conforming Situation Repair, Maintenance, Reconstruction
 - Planned Business District
 - Temporary Residence Permit – 180 days
 - Temporary RV Use Permit – Guest Stay/30 days per year

APPLICANT: Please complete the following with as much detail as possible.

General Information	
Property Owner Name*:	
Property Owner Mailing Address:	
Property Owner Phone:	Property Owner Fax:
Applicant Name*:	Applicant Phone:
Applicant Mailing Address:	
Applicant Fax:	Applicant Email:
Temporary Permits	
Dates of Approved Use: _____ to _____	

** A notarized statement of ownership signed by all owners of record must accompany this application. If the owner(s) of record is/are not the applicant, a notarized statement signed by all of the property owners authorizing the applicant to act as a representative for the property owners must accompany this application. All owners of the subject property must sign the notarized statement.*



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Project Information:		
Project Name:		
Site Address:		
Assessor's PIN:	Zone:	Total Parcel Area (sf):
Existing Use of Property:		
Proposed Use of Property:		
Square Footage of Existing Buildings:		
<div style="display: flex; justify-content: space-between;"> _____ Retail _____ Residential _____ Storage _____ Industrial _____ Office _____ TOTAL </div>		
Please describe the scope of the proposed project:		



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Affidavit:

I, the undersigned, hereby declare that:

1. I am the owner of the above referenced property OR the property owner(s) have authorized me to act as their representative; and
2. The above information is true and complete to the best of my knowledge.

It is understood that the City of Carnation may nullify any decision made in reliance upon information given on this application form should there be any willful omission of significant information or any misrepresentation or lack of full disclosure on my part.

Applicant's Signature: _____
(to be signed in the presence of a Notary Public)

Date: _____

**NOTE: Notary is *not needed* for
Sign Permits or Minor Design Review**

For City use only:

Date Paid:	Amount Paid:
	Receipt No.
<input type="checkbox"/> Approved <input type="checkbox"/> Approved as Noted <input type="checkbox"/> Revise and Resubmit <input type="checkbox"/> Denied.	
By (Name, please print): _____	
Title: _____	
Signature: _____	Date: _____
Comments:	



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Certificate for an Acknowledgment in an Individual Capacity

STATE OF WASHINGTON)
) ss
COUNTY OF _____)

I certify that I know or have satisfactory evidence that _____ is the person who appeared before me, and said person acknowledged that (he/she) signed this instrument and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in the instrument.

Dated _____

X _____
Notary Public in and for th State of Washington

Printed Name

Residing at: _____

My appointment expires: _____