



BENTON COUNTY PLANNING DEPARTMENT

INFORMATION HANDOUT FOR CONDITIONAL USE/SPECIAL PERMITS

This packet is designed to assist you in preparing your application for a Conditional Use/Special Permit. Application(s) may be submitted to the Benton County Planning Department, 1002 Dudley Avenue, Prosser, WA 99350 between the hours of 8 a.m. and noon and 1 p.m. and 5 p.m., Monday thru Friday or to the Benton County Building Department, 5600 W. Canal Place, Kennewick, WA 99336 between the hours of 9 a.m. and noon and 1 p.m. and 5 p.m. , Monday thru Friday.

Please provide the following information at the time of submittal. If any of the following information is not available we may not be able to process your application.

- 1. A completed application form and applicable non-refundable fee.** Please be as specific as possible with regard to your proposed use on the application, you may use an additional sheet, if necessary.
- 2. Environmental Checklist (EA) and non-refundable fee:** If an environmental checklist is required it will need to be submitted along with the **application fee of \$100.00** at the same time as the conditional use/special permit application.
- 3. Detailed scaled drawing showing the following:** location of proposed shop, business or manufactured home, size of the shop/business/manufactured home, access to the site, easements, parking spaces, etc. **Please see attached sample site plan.**
- 4. Written approval from the respective municipality** if the property will be served by a public water and/or sewer system.
- 5. PLEASE NOTE:** Contact the Benton County Building Department at 735-3500 or 786-5622, if you are changing the use of a building or portion thereof, as you may be required to make changes to the building in order to be in compliance with the Uniform Building Code, Uniform Fire Code, the American Disability Act, etc. This may prevent the expending of application fees only to find out that the remodeling or altering of the original use of the structure cannot be cost effectively remodeled for the intended use.

NOTE: THE APPLICATION FEE IS NON-REFUNDABLE. THERE ARE NO GUARANTEES THAT YOUR APPLICATION WILL BE APPROVED.

Upon acceptance of your application, a file will be setup and the application routed to appropriate reviewing agencies. Each agency will review your application and provide the planning department with their comments.

The Board of Adjustment meets on the first Thursday of each month. The application will be heard

CONDITIONAL USE/SPECIAL PERMIT APPLICATION

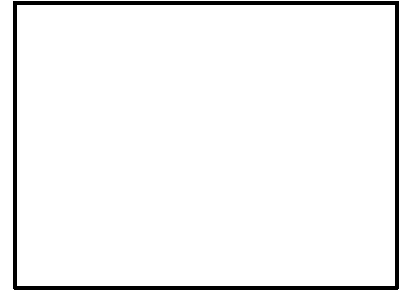
FILE NO. _____

1. Applicant Name _____
Applicant Address: _____

Telephone number: Home _____ Work _____

2. Legal owners name: _____
Legal Owners address: _____

Telephone number: Home _____ Work _____



For Office Use Only

3. Legal description and Parcel Number of property for which permit is for: _____

4. If you are amending a previous conditional use/special use permit - please list the file number(s): _____

5. The Conditional Use/Special Permit is requested to conduct the following use **PLEASE BE SPECIFIC - USE ADDITIONAL PAPER IF NECESSARY - # OF PARKING SPOTS, SIZE, LOCATION OF STRUCTURE, ACCESSING OFF OF COUNTY ROAD, # OF EMPLOYEES, HOURS OF OPERATION, ETC.:** _____

6. The property will be served by:
WATER: Well _____ Private System _____ City System _____
SEWER: Septic Tank _____ City Sewer _____
POWER: PUD _____ REA _____
PHONE: Yes ___ No ___ Name of Utility _____
GAS: Yes ___ No ___ Name of Utility _____
CABLE: Yes ___ No ___ Name of Utility _____
IRRIGATION: Yes ___ No ___ Name of Utility _____
PRIVATE IRR. Yes ___ No ___

7. Total acres of property: _____ Zoning Classification of Property: _____
Comprehensive Plan Designation _____

8. Describe existing structures and/or uses currently existing on your property, such as well, septic residential dwelling, garage, etc.: _____

9. Describe existing structures and present land uses in the surrounding area of your property: _____

10. If you are applying for a Business Activity as defined in BCC 11.04.020 please answer the following questions:
a. Is there a residence on site? Yes _____ No _____
b. Does at least one of the proprietors of the business own or lease the property where the business and the residence are located? Yes _____ No _____
c. Does at least one of the proprietors live in said residence? Yes _____ No _____
d. List the number of non-resident employees. _____

- e. What is the **total** square footage of the detached building? _____
- f. What is the **total** square footage that will be used for the business activity?

- g. Is only one detached building to be used for the business activity? Yes____ No____
- h. Are any signs going to be used with the business activity? Yes____ No____
If Yes, give the number and sizes of the sign(s)

- i. State the number of vehicles marked to identify the business to be stored on site.

- j. List the preferred office hours for the presence of customer/clients and non-resident employees. Days of the week _____
Hours of Operation _____

11. Applicant shall attach a site plan of the property, drawn to a scale of one inch equals fifty feet (1" = 50') or one inch equal 100 feet (1" = 100') unless otherwise specifically approved by the Planning Department, showing the following information.

- A. Dimensions of the property.
- B. Location and size of the proposed use, number of parking spaces, etc., complete with distances between buildings and all property lines.
- C. Location and size of existing structures, complete with distances, buildings and all property lines.
- D. All streets, roads, easements, and rights-of-way located on or adjacent to this property. (Label structures and roadways)
- E. Label and Show a floor plan for the structure to be used for the Business Activity.

COMMENTS OR PERTINENT INFORMATION:

PLEASE SIGN AND THEN PRINT YOUR NAME Signatures of **all** persons holding an ownership interest in the real property are required. (Include Power of Attorney when signing for others.)

I certify that the information given above is true and complete to the best of my knowledge.

_____ Applicant's Signature	_____ Print Name	_____ Date
_____ Legal Owners Signature	_____ Print Name	_____ Date
_____ Other Ownership Interest	_____ Print Name	_____ Date

NOTE: THE CONDITIONAL USE/SPECIAL PERMIT APPLICATION FEE OF \$250.00 and \$100.00 FOR THE SEPA CHECKLIST, IF REQUIRED, MUST BE SUBMITTED WITH THE APPLICATION. THIS FEE IS NON-REFUNDABLE. PLEASE MAKE YOUR CHECK PAYABLE TO BENTON COUNTY TREASURER. THERE ARE NO GUARANTEES THAT YOUR APPLICATION WILL BE APPROVED. THE APPLICATION FEES are NON REFUNDABLE.

SITE PLAN FOR: _____

Scale: 1" = 50' or 1" = 100'

Please Specify

