



# BENTON COUNTY PLANNING DEPARTMENT

## INFORMATION PACKET FOR TEMPORARY DWELLING OR MULTIPLE DETACHED DWELLING PERMIT APPLICANTS

This Packet is designed to assist you in preparing your application for either a Temporary Dwelling Permit or a Multiple Detached Dwelling Permit. Applications may be submitted to the Benton County Planning Department, 1002 Dudley Avenue, Prosser WA 99350 between 8 a.m. and Noon and 1 p.m. and 5 p.m. or to the Benton County Building Department, 5600 W. Canal Place, Kennewick WA 99336 between 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 this information is not provided, we may not be able to process your application.

1. **A completed application form and applicable non-refundable fee**, including a scaled drawing (See *attached sample*) showing in detail the location of any existing and proposed dwelling units, structures, septic systems, easements, and other improvements on the site.
2. **Additional information** and/or permits may be required from other agencies such as, but not limited to; the Benton County Building Dept., the Benton Franklin District Health Dept., the Washington State Department of Health, Department of Ecology, or the respective city.
3. **Written approval from the respective municipality** if the property is to be served by a public water and/or sewer system.
4. **Written verification of a recorded perpetual non-exclusive access easement** if the parcel does not front onto a county road.

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

Upon determining you have submitted a complete 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.

### **CRITERIA FOR TEMPORARY DWELLINGS:**

A temporary dwelling may be approved for the following situations only.

1. An individual is to receive or administer continuous care and assistance due to advanced age, illness or infirmity. Such care is being received or administered by a resident located in the existing dwelling. A letter from a physician substantiating a need for a person to receive or administer continuous care and assistance necessitated by advanced age, illness or infirmity may be required by the Planning Department.
2. A caretaker, hired hand or other employee working on the parcel in connection with an agricultural use of the premises. (A temporary dwelling approved under this category is for one year with a **possible** renewal for one more year. Two years maximum)

3. An owner in the process of building a permanent dwelling or placing a factory assembled structure (manufactured home) on a parcel. (A temporary dwelling approved under this category is for one year with a **possible** renewal for one more year. Two years maximum)

4. A caretaker living on the parcel for the purpose of caring for the existing dwelling and for making other improvements on the property while the owner is on vacation or is working out of the area. Only a self-contained recreational vehicle shall be used as a temporary dwelling. The caretaker may only reside on the parcel six months out of a twelve month period.

The temporary dwelling must be located in such a manner as to comply with the comprehensive plan and meet all applicable county, state, and federal regulations (except density), lot size and the provisions as stated in BCC Section 11.52.060. The temporary dwelling shall meet the setback requirements applicable to other dwellings in the same zone.

A current vehicular license, if applicable, shall be maintained under this section. No more than one (1) temporary dwelling per parcel shall be authorized under this section and no rent or remuneration is to be paid for the occupancy of the temporary dwelling.

When the review of the temporary dwelling is complete, the Planning Department will approve, approve with conditions, or deny the application. The applicant will be notified by mail of the Planning Department's decision.

**APPEAL**

The decision of the Planning Department to approve or disapprove a temporary dwelling permit may be appealed to the Board of Adjustment within twenty (20) days following issuance of the decision. The Board will hold an open record hearing and may affirm or reverse the administrator's decision or may remand the application to the administrator with instruction to approve the same upon compliance with the conditions imposed by the Board.

**PERMIT RENEWAL/CONTINUATION**

A temporary dwelling permit shall be valid for one (1) year from the date of approval unless the permit has been terminated or revoked; or unless the permit has received a one-year renewal per the requirements of BCC Section 11.52.094(b). A temporary dwelling permit issued for a person to receive or administer continuous care and assistance due to age, illness, or infirmity may be continued on a year to year basis per BCC Section 11.52.094(c).

**MULTIPLE DETACHED DWELLING PERMIT PROCESS** *(placement of more than one dwelling on a parcel on a permanent basis)*

If the Planning Director determines that all of the criteria for a Multiple Detached Dwelling Permit (MDD) has been met, written notification will be sent to property owners within 300 feet of the parcel boundaries and they will have seven (7) days to submit objections, if no objection is submitted to the planning director the permit may be issued.

If no objections are received and the proposal is in compliance with the Comprehensive Plan and other regulations and ordinances, the permit may be approved or conditionally approved. If conditionally approved, the applicant will have six months to satisfy the conditions.

If an objection to the proposed use is received within seven (7) calendar days following the mailing thereof, the application shall be referred to the Board of Adjustment and an open record hearing before the Board will be conducted.

After the permit has been issued anyone aggrieved by the director's decision shall have twenty (20) calendar days following the date of the decision to appeal the administrative decision to the Board of Adjustment. This must be done by submitting a written request and must be accompanied by a non-refundable fee of \$100.00. The Board of Adjustment shall conduct an open record hearing on the request and the decision of the Board of Adjustment may be appealed per RCW 36.70C.

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*Any questions regarding this process should be directed to the Benton County Planning Department, 786-5612 -*

Prosser or 736-3086 - Tri-Cities. Our office hours are 8 a.m. to Noon and 1p.m. to 5 p.m. Monday through Friday, except holidays.

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**JURISDICTIONS TO BE CONTACTED**

**BENTON COUNTY PLANNING/BUILDING DEPARTMENT**

Planning Annex, P.O. Box 910, 1002 Dudley Avenue,  
Prosser WA99350  
Prosser - 786-5612  
Tri-Cities - 736-3086  
Building Department, 5600 W. Canal Place,  
Kennewick WA 99336  
Prosser - 786-5622  
Tri-Cities - 735-3500

**Benton Franklin Dist. Health Dept.**  
Kennewick Office - 582-7761 - 800 West Canal Drive,  
Kennewick WA 99336  
Prosser Office - 786-1633 - 310 7th Street, Prosser  
WA 99350  
Prosser Office Hours - Mon., Tues., Thurs. 9-10:30 a.m.

**BENTON COUNTY PLANNING DEPARTMENT APPLICATION FOR**

**TEMPORARY DWELLING** File No. \_\_\_\_\_

**MULTIPLE DETACHED DWELLING PERMIT**

File No. \_\_\_\_\_



For Office Use Only

**PLEASE CHECK THE BOX IDENTIFYING WHICH APPLICATION YOU ARE APPLYING FOR.**

1. Applicant Name: \_\_\_\_\_  
Applicant Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone number : Home \_\_\_\_\_ Work \_\_\_\_\_

2. Legal Owners Name: \_\_\_\_\_  
Legal Owners Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone number : Home \_\_\_\_\_ Work \_\_\_\_\_

3. Legal description **and Parcel Number** of property for which permit is for: \_\_\_\_\_  
\_\_\_\_\_

4. List the Auditor's File No. for the perpetual non-exclusive access easement if the property does not front onto a County road. \_\_\_\_\_

5. Permit is requested to conduct the following use (**explain in detail**): (list type of units, i.e., manufactured home, RV, site built home and the **total number** of residences to be located on site)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Is the proposed use to be temporary or permanent? If temporary, explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. The property will be served by:  
WATER: Well \_\_\_ Private System \_\_\_ City System \_\_\_  
SEWER: Septic Tank \_\_\_ City Sewer \_\_\_ Private Sewer System \_\_\_  
POWER: PUD \_\_\_ REA \_\_\_  
PHONE: Yes \_\_\_ No \_\_\_ Name of Utility \_\_\_\_\_  
GAS: Yes \_\_\_ No \_\_\_ Name of Utility \_\_\_\_\_  
CABLE: Yes \_\_\_ No \_\_\_ Name of Utility \_\_\_\_\_  
IRRIG.: Yes \_\_\_ No \_\_\_ Name of Utility \_\_\_\_\_  
PRIVATE IRR. Yes \_\_\_ No \_\_\_

8. Total acres of property: \_\_\_\_\_

9. Zoning classification of the property: \_\_\_\_\_
10. Describe existing improvements, uses, and structures currently existing on the subject property:\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
11. Describe existing land uses in the vicinity of subject property: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**IF APPLYING FOR A TEMPORARY DWELLING PERMIT PLEASE COMPLETE THE FOLLOWING QUESTIONS: (as well as those listed above)**

12. The temporary dwelling permit is being requested for the following reason: (Check one)
- \_\_\_\_\_ An individual is to receive or administer continuous care and assistance necessitated by advanced age, illness or infirmity. Such care is being received or administered by a resident located in the existing dwelling. Name and Address of Person(s) receiving care \_\_\_\_\_  
 \_\_\_\_\_
- \_\_\_\_\_ A caretaker, hired hand or other employee working on the parcel in connection with an agricultural use of the premises.
- \_\_\_\_\_ An owner in the process of building a permanent dwelling or placing a manufactured home on the parcel. **Provide the Building Permit/FAS Permit Number or date the application was submitted to the Building Dept.** \_\_\_\_\_
- \_\_\_\_\_ A caretaker living on the parcel for the purpose of caring for the existing dwelling and for making other improvements on the property while the owner is on vacation or is working out of the area. Only a self-contained recreational vehicle shall be used as a temporary dwelling under this subsection.
13. Explain circumstances which necessitate the temporary dwelling. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
14. Type and size of temporary dwelling to be used: \_\_\_\_\_
15. Applicant has obtained the following permits and/or approvals. (ATTACH COPIES)
- |    |                                       |           |          |           |
|----|---------------------------------------|-----------|----------|-----------|
| a. | Benton-Franklin District Health Dept. | Yes _____ | No _____ | N/A _____ |
| b. | Municipality (water and/or sewer).    | Yes _____ | No _____ | N/A _____ |
| c. | Other _____                           |           |          |           |
16. Are there any existing temporary dwellings on the parcel now **other than the one you are presently**



**SITE PLAN FOR:** \_\_\_\_\_

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

**Please Specify**

