

# PRELIMINARY PLAT / PBD APPLICATION

**FEES:**

- DCD:  Preliminary Plat: \$250 plus \$3 per lot  
Environmental (SEPA) Checklist: \$150  
 Plat/PBD: \$1,250 plus \$3 per dwelling unit or lot  
Public Works: See attached fee schedule  
Health District: See attached fee schedule

*All fees must accompany this application.  
These fees are non-refundable and subject to change.*

<b>FOR OFFICIAL USE ONLY</b>
Received by: _____
Receipt #: _____

The following items shall be submitted to Kitsap County DCD in order for the application to be accepted and for review of the application to commence:

One (1) original application and fifteen (15) copies of the application form; sixteen (16) folded copies of the site plans; a copy of the Pre-application Meeting Checklist (PMC) and information indicated in the PMC and/or Section 410 (Site Plan Review) of the Zoning Ordinance; six (6) copies of the Environmental (SEPA) Checklist; and three (3) copies each of availability letters from the appropriate sewer and water provider.

*Make check(s) payable to Kitsap County Department of Community Development (DCD).*

Project/Plat Name: \_\_\_\_\_ Number of Dwelling Units or Lots: \_\_\_\_\_

Pre-application Project Name: \_\_\_\_\_ No. \_\_\_\_\_

Assessor s Tax Account No: \_\_\_\_\_

Location: Section(s) \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

Specific Location of Property: \_\_\_\_\_

Legal Description of Property (No abbreviations; may be attached): \_\_\_\_\_

Applicant: \_\_\_\_\_

Applicant s Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Applicant s Phone No. Work: \_\_\_\_\_ Home: \_\_\_\_\_

Owner(s) of Record: \_\_\_\_\_

Owner(s) of Record s Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Owner(s) of Record s Phone No. Work: \_\_\_\_\_ Home: \_\_\_\_\_

Project Representative (if applicable): \_\_\_\_\_

Representative s Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Representative s Phone No. Work: \_\_\_\_\_ Fax: \_\_\_\_\_

Engineer (if applicable): \_\_\_\_\_

Engineer s Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Engineer s Phone No. Work: \_\_\_\_\_ Fax: \_\_\_\_\_

Description of Proposed Use: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parcel Size: \_\_\_\_\_ Total Project Area: \_\_\_\_\_

Existing Zone Classification: \_\_\_\_\_

Comprehensive Plan Designation: \_\_\_\_\_

Sewage Disposal Method: \_\_\_\_\_  
state name of sewer provider if applicable

Water Source: \_\_\_\_\_  
state name of water provider if applicable

Are there any critical areas (shorelines, creeks, lakes, wetlands, slopes over 30%) on-site? Yes No

Has the property been logged in the past six (6) years? Yes No

If yes, Forest Practice Application Number: \_\_\_\_\_

If your project site will be logged, a Forest Practice Application must be obtained from Kitsap County and issued by the Department of Natural Resources prior to logging. Kitsap County Forest Practices Administrator may be reached at (360) 876-7181, extension 4993.

- Single Family Project (SF)                       Multi-Family Project (MF)
- Commercial Project (C)                               Residential & Commercial Project (R&C)

Building Area:

Number of buildings:      MF \_\_\_\_\_      C \_\_\_\_\_      R&C \_\_\_\_\_

Number of dwelling units: SF \_\_\_\_\_      MF \_\_\_\_\_      R&C \_\_\_\_\_

Number of dwelling units per acre: \_\_\_\_\_

Number of dwelling units per net developable area (excluding critical areas & infrastructure): \_\_\_\_\_

Minimum lot area: \_\_\_\_\_

Square footage of each building: MF \_\_\_\_\_      C \_\_\_\_\_      R&C \_\_\_\_\_

Square footage devoted to various uses: \_\_\_\_\_

Lot coverage by buildings and structures: \_\_\_\_\_ % of site, \_\_\_\_\_ square feet

Building Description (height, number of stories, construction materials to be used, style, if known):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total Disturbed Area: \_\_\_\_\_

Earthwork Grading Quantity: \_\_\_\_\_

Total New Impervious Area: \_\_\_\_\_

Area Landscaped: \_\_\_\_\_ % of site, \_\_\_\_\_ square feet

Common Open Space: \_\_\_\_\_ % of site, \_\_\_\_\_ square feet

Recreational Open Space: \_\_\_\_\_ % of site, \_\_\_\_\_ square feet

Number of Recreational Facilities: \_\_\_\_\_

Number of Off-street Parking Spaces: MF \_\_\_\_\_      C \_\_\_\_\_      R&C \_\_\_\_\_

Days/Hours of Operation (if applicable): \_\_\_\_\_

