

SP



# PRELIMINARY SHORT SUBDIVISION APPLICATION

Department of Community & Economic Development

321 E. 5th Street, Port Angeles, WA 98362  
360.417.4750 | [www.cityofpa.us](http://www.cityofpa.us) | [ced@cityofpa.us](mailto:ced@cityofpa.us)

file no.

A Short Subdivision, is the subdivision or redivision of land into four or less Parcels. Please review design standards, requirements, and the Short Subdivision process in Chapter 16.04 of the Port Angeles Municipal Code (PAMC). It is recommended that any interested party schedule a pre-application meeting with DCED Staff, to review preliminary plat design and the Short Subdivision process.

A copy of Chapter 16.04 of the PAMC is available online [cityofpa.us](http://cityofpa.us) or at the Department of Community and Economic Development at City Hall

## APPLICATION MATERIALS CHECKLIST

A complete Short Subdivision Application will include:

**SP:** A completed Short Subdivision Application

**Project narrative:** A narrative of the purpose for the Short Subdivision

**Access & Utilities:** Proposed method(s) for serving individual lots with access and utilities, to include stormwater management

**Scaled Drawings:** Preliminary Plat Drawing to be provide a digital copy of the scaled drawing

Preliminary Plats shall:

- Be in black ink;
  - Be in no less than 1" = 100' scale;
  - Include the date, scale, and North arrow;
  - The boundaries of the property, including all contiguous property owned by the subdivider;
  - A legal description of the property;
  - Identification, dimensions, and area of all proposed subdivided lots;
  - The name and location of existing and proposed public right-of-ways;
  - The required building setbacks on each proposed lot;
  - The location of existing structures and the distance from property lines;
  - The location of existing natural features, such as streams, rivers, wetlands, shorelines, drainage;
  - The location and size of existing utilities, including water, sewer, stormwater and fire hydrants
- SEPA Checklist:** A complete SEPA Environmental Checklist (If determined necessary by staff)

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file no. \_\_\_\_\_

## APPLICANT INFORMATION

Applicant Name: \_\_\_\_\_ (Property Owner:  Yes  No)

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant's Representative (If other than applicant): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

(If applicant, or applicant's representative, is not the owner, property owner acknowledgment of this proposed land use action must be provided)

## SUBJECT PROPERTY

Property Owner(s): \_\_\_\_\_ ( Same as Applicant)

Property Owner Address: \_\_\_\_\_

Full Street Address(es): \_\_\_\_\_

Full Legal Description(s): \_\_\_\_\_

Tax Parcel Number(s): \_\_\_\_\_

Current Zoning: \_\_\_\_\_ Comprehensive Plan Designation: \_\_\_\_\_

## SHORT SUBDIVISION DETAILS

Existing Lot Area	(acres / sq.ft)	Number of New Lots	
Proposed Lot #1	(acres / sq.ft)	Proposed Zoning	
Proposed Lot #2	(acres / sq.ft)	Water (Service Type)	
Proposed Lot #3	(acres / sq.ft)	Sewer (Service Type)	
Proposed Lot #4	(acres / sq.ft)	Electricity (Service Type)	
Streets / ROW	(acres / sq.ft)	Street Type	
Parks / Open space	(acres / sq.ft)	Stormwater Facilities	

I (We) hereby certify under penalty and perjury of the laws of the State of Washington that I (we) are the owner(s) or authorized representative(s) of the owner of the above-described property and request that the short plat be approved. It is understood that willful misrepresentation of the information will terminate the application.

Date \_\_\_\_\_ Print Name \_\_\_\_\_ Signature ( Owner  Representative) \_\_\_\_\_

Notes:

Fees: \$200 Application

DATE STAMP