



Public Works Development Engineering Department Application

Project Site Summary	Project Name _____		<input type="checkbox"/> Phased Project Number of Phases _____		
	Description of Proposal _____				
	Serial Numbers of Parcels _____				
	Land Division: Number of Lots: _____	<input type="checkbox"/> Minimum Requirement #2(Erosion Control) <input type="checkbox"/> Minimum Requirement (MR) # 1 – 5 <input type="checkbox"/> Minimum Requirement (MR) # 1 - 9	<input type="checkbox"/> Frontage Linear Ft. _____ Existing Collector or Arterial (ONLY)		
	Grading: <input type="checkbox"/> Non-Engineered Grading (0 – 4,999 c.y.) <input type="checkbox"/> Engineered Grading (excess of 5,000 c.y.)	<input type="checkbox"/> Urban <input type="checkbox"/> Rural	Onsite Excavation Amount c.y. _____ Fill From Offsite Source c.y. _____ Total Volume Amount c.y. _____	<input type="checkbox"/> Basic – Erosion Control <input type="checkbox"/> Minimum Requirement (MR) # 1–5 <input type="checkbox"/> Minimum Requirement (MR) # 1–9 RURAL: Area of Disturbance _____	
	Site Plan: Disturbed Area Sq. Ft. _____	<input type="checkbox"/> Minimum Requirement #2(Erosion Control) <input type="checkbox"/> Minimum Requirement (MR) # 1 – 5 <input type="checkbox"/> Minimum Requirement (MR) # 1 - 9	<input type="checkbox"/> Frontage Linear Ft. _____ Existing Collector or Arterial (ONLY)		
Construction Inspection: Disturbed Area Acres _____					

Check Type of Application	<input type="checkbox"/> Critical Aquifer Recharge Area (CRA)	<input type="checkbox"/> Floodplain (FLP) <input type="checkbox"/> Inquiry <input type="checkbox"/> Permit
	<input type="checkbox"/> Development Inspection (DIN) <input type="checkbox"/> Drainage Project <input type="checkbox"/> Extension Grading Inspection <input type="checkbox"/> Grading and Drainage Permit <input type="checkbox"/> Land Division <input type="checkbox"/> Rural Driveway <input type="checkbox"/> Performance Bond <input type="checkbox"/> Site Plan <input type="checkbox"/> Unoccupied Comm & Utility Structure	<input type="checkbox"/> Geological Hazard (GEO) <input type="checkbox"/> Preliminary <input type="checkbox"/> Final <input type="checkbox"/> Grading and Drainage (GRD) <input type="checkbox"/> Basic grading (Erosion Control) <input type="checkbox"/> Basic grading and stormwater MR #1 – 5 <input type="checkbox"/> Basic grading and stormwater MR #1 – 9 <input type="checkbox"/> Extension <input type="checkbox"/> Post Plan Approval – Plan Revisions **
	<input type="checkbox"/> Final Engineering Review (ENG) <input type="checkbox"/> Construction Revision <input type="checkbox"/> Drainage Project <input type="checkbox"/> Land Division <input type="checkbox"/> Post Plan Approval – Plan Revisions ** <input type="checkbox"/> Site Plan	<input type="checkbox"/> Road Modification (EVR) <input type="checkbox"/> Minor-Stand Alone <input type="checkbox"/> Minor-Associated Prelim Case (No Fee, Admin) <input type="checkbox"/> Major <input type="checkbox"/> Technical
	<input type="checkbox"/> Concurrency Transportation <input type="checkbox"/> Early Concurrency <input type="checkbox"/> TIF Installment Plan <input type="checkbox"/> Developer's Agreement <input type="checkbox"/> Frontage Improvement Agreement	<input type="checkbox"/> Single Family Residence Stormwater (ENG) <input type="checkbox"/> Roof and Crawlspace Drainage <input type="checkbox"/> Stormwater Review – MR #1-9 <input type="checkbox"/> Simplified Stormwater Review – MR #1-9 ****
	<input type="checkbox"/> Developer's Certification	<input type="checkbox"/> Erosion Control Inspection (SWI) <input type="checkbox"/> Annual Erosion Control Inspection <input type="checkbox"/> During Maintenance Warranty <input type="checkbox"/> Annual Extension

Please review submittal requirements. Incomplete applications will delay processing this project.
–To finalize application signature page must be completed –

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Property Owner	Name	
	Address	City, State, Zip
	Email	Cell Phone
	Phone	Fax
Applicant Representative	Name	
	Address	City, State, Zip
	Email	Cell Phone
	Phone	Fax
Contact Name	Name Same as <input type="checkbox"/> Applicant	
	Address	City, State, Zip
	Email	Cell Phone
	Phone	FAX
Contractor Name	Name	
	Address	City, State, Zip
	Email	Cell Phone
	Phone	Fax

This application must be signed by ALL the owners. This also authorizes the designated Applicant's Representative or Contact (if applicable) to act on behalf of the Applicant for the processing of the request.

Applicant and Owner Authorization and Acknowledgement

The undersigned hereby certify that all information submitted with this application is complete and correct. False statements, errors, and/or omissions may be sufficient cause for denial of the request. This application gives consent to the County to enter the properties listed above.

*** Applicant's Representative and / or Contact (if applicable) agree that this is an hourly billing application and fees above the \$200.00 deposit will be assessed. ***

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Owner Signature	Date	Owner (print)	Date
<hr/>		<hr/>	
Applicant Representative Signature	Date	Applicant Representative (print)	Date
<hr/>		<hr/>	
Contact Signature	Date	Contact (print)	Date

For more information, please refer to: [http:// www.clark.wa.gov/publicworks/engineering/index.html](http://www.clark.wa.gov/publicworks/engineering/index.html)
General Inquiry email: DevEngineer@clark.wa.gov
General Inquiry Phone: (360) 397-6118 ext. 4559