



LAND USE APPLICATION FOR CITIES, COUNTIES AND THE COLVILLE CONFEDERATED TRIBES

(The City/County/Tribes may require that additional application forms be completed)



PROJECT TITLE: _____

Total Fees Paid \$ _____ **Receipt #** _____ **Initials** _____

THIS APPLICATION IS FOR (check one):

<input type="checkbox"/> Building Permit	<input type="checkbox"/> Short Form Development Permit	<input type="checkbox"/> Variance	<input type="checkbox"/> Conditional Use Permit (CUP)	<input type="checkbox"/> Short Subdivision (4 or fewer lots)	<input type="checkbox"/> Subdivision (5 or more lots)
<input type="checkbox"/> Binding Site Plan	<input type="checkbox"/> Petition for Rezone or Code Amendment	<input type="checkbox"/> Planned Development	<input type="checkbox"/> Flood Plain Development Permit	<input type="checkbox"/> Shoreline Development Permit or Exemption	<input type="checkbox"/> Other (specify) _____ _____

APPLICANT INFORMATION:

SURVEYOR OR AGENT INFORMATION:

Name: _____ Name: _____
 Mailing Address: _____ Mailing Address: _____
 City/State/Zip: _____ City/State/Zip: _____
 Phone: _____ Phone: _____

NAME AND ADDRESS OF PROPERTY OWNER, IF DIFFERENT FROM APPLICANT ABOVE:

Name: _____ Phone: _____
 Address: _____ City/State/Zip: _____

CHECK ONE: Colville Tribal Member (Enrollment number _____) **OR** Non Tribal Member

CHECK ONE: Within the boundaries of the Reservation **OR** Outside the boundaries of the Reservation

TOWNSHIP _____ **RANGE** _____ **SECTION** _____

CHECK ONE: Trust land [allotment number(s)] **101--** _____ **101--** _____
 Fee Land [10 digit parcel number(s)] _____

This property is located within the _____ ZONING DISTRICT

↓FOR OFFICIAL USE ONLY↓

After reviewing all relevant information about this land use application, the reviewing agencies hereby agree that

The Colville Tribes Okanogan County Municipality of _____ will be the permitting agency.

Signature _____ Date _____
 Authorized Colville Tribal Representative

Signature _____ Date _____
 Authorized County Representative

Signature _____ Date _____
 Authorized City Representative

PROJECT INFORMATION:

Brief Description of Proposal (kind of use, size, # of units, method of water supply and sewage disposal, etc.): _____

General Description (miles from nearest town, water body, highway, etc. Vicinity map may be attached): _____

Current Land Use, Comprehensive Plan, Shoreline, Flood and Zoning Designations: _____

Name of Irrigation District: _____

Electrical Service Provider: _____

Name of Water System: _____

Name of Local Telephone Company: _____

Point of Legal Access (existing or proposed): _____

Please attach any other plans, specifications, or information as required by ordinance or guidelines.

Please see specific site plan requirements for Okanogan County applications.

SIGNATURE BLOCK

I am the applicant name on the reverse page and hereby state that the foregoing information, and all information attached hereto, is true to the best of my knowledge.

Signature _____ Date _____