



# Lewis County Community Development

125 NW Chehalis Ave, Chehalis, WA 98532  
Phone: (360) 740-1146 • [www.lewiscountywa.gov](http://www.lewiscountywa.gov)

## LAND DEVELOPMENT REVIEW (LDR) APPLICATION

Type I applications involve decisions that do not require public notice and are decided by the administrator.

The following are required to be submitted for the Land Development Review application to begin the review process:

STAFF

APPLICANT

Completed Survey Map drawn by a Washington State Professional Land Surveyor (PLS) - With all the requirements on the Lewis County Community Development "Survey Map Requirements Page 1 and Page 2" Handout.

Completed 'General Information' Application page

Completed 'Land Development Review' Application page 1 and page 2

Original Legal Descriptions and Proposed Legal Descriptions

Documentation of a legal lot of record and meet the criteria in Lewis County Code Section 16.02.050

Lot Closure Notes for each lot (before and after if BLA proposed) prepared by a Washington State Professional Land Surveyor

Application Fees

Other

Any appeals will be heard by the Lewis County Hearing Examiner per the Lewis County Code Chapter 17.05.

### For Official Use Only:

Date of Application Submittal: \_\_\_\_\_

Application Number: \_\_\_\_\_

Associated Permits: \_\_\_\_\_

Permit Technician: \_\_\_\_\_

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## Survey Map Requirements - Page 1

**Survey Maps:** For electronic submittal, PDF from mapping program (preferred method). If hard copy, then one (1) copy of a map (18" by 24" Survey) meeting all the requirements for recording by the Lewis County Auditor to the Administrator for review with, permanent black ink, and meeting the requirements of WAC 332-130-050 and RCW 58.09.

### STAFF APPLICANT

A label identifying the map as the correct land division type (0 \_\_\_\_\_ Short Plat, Large Lot Subdivision or Subdivision of \_\_\_\_\_ [insert proposed unique name of the Long Plat Subdivision])

Reference \_\_\_\_\_ Land Division Permit number (00 LLS, SP, LP) \_\_\_\_\_  
"O" on the face of the map

Original legal description and proposed legal descriptions on the face of the map

A vicinity map, the date, map legend, and north arrow

The names and addresses of the owner

The acreage of the \_\_\_\_\_ proposed lots

The original lot lines

The proposed lot lines with a number assigned to each lot. Lot numbers are to begin with number one (1) and proceed in a consecutive sequence

The location, width, and names of all existing streets, ingress, egress, or easements within or adjacent to the proposal, including, but not limited to, existing or proposed easements to provide access to each lot, and indication as to whether they be public or private and the Auditor's File Number

The location and label of existing structures, fences, buildings and improvements

The location of natural features such as water bodies, rivers, steep slopes and wetlands

The location and label of all existing and proposed wells and septic systems including reserve areas, water lines, sanitary control areas, and other utility lines

Point of proposed access for each lot to the public road, whether each lot shall use a common access or have individual access

The boundaries of any land to be reserved for the common use of the property owners

Location (to the extent possible) of all section and section subdivision lines referenced in the legal description of the entire property to be subdivided

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### STAFF APPLICANT

Survey maps shall also contain:

- i. Name of professional land surveyor (PLS), stamp and signature of PLS;
- ii. Any monuments and markers of record, a minimum of two corners must be set or found;
- iii. A signature block for the approval and signature of the Administrator, and the date signed;
- iv. Signature block for Treasurer with a statement that property taxes for the parcel within this map have been paid through the year of recording; and
- v. Signature block for Auditor
- vi. Signature block and notary block for owners

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## GENERAL INFORMATION

### Property Owner Information:

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

Site Address: \_\_\_\_\_

\_\_\_\_\_ Quarter Section, Section \_\_\_\_\_, Township \_\_\_\_\_ North, Range \_\_\_\_\_ East/West (Circle One)

### Applicant (if different from owner):

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

Site Address: \_\_\_\_\_

\_\_\_\_\_ Quarter Section, Section \_\_\_\_\_, Township \_\_\_\_\_ North, Range \_\_\_\_\_ East/West (Circle One)

### Surveyor or Other Contractor Information (Attach additional sheets if necessary):

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

## Acknowledgment

I understand that County regulations require owner permission for County personnel to enter private property to conduct permit processing, review, and inspections. I also understand that my failure to grant permission to enter may result in denial or withdrawal of a permit or approval. By my signature below, permission is granted for representatives of the Community Development, Environmental Health, and Public Works Department to enter and remain on and about the property for the sole purpose of processing such permits and performing required inspections or reviews.

Prior notification of the date of inspections will take place is: Required Not Required

(\_\_\_\_\_) (Must provide phone number where applicant/representative can be reached)

I/We certify that all plans, specifications and other submissions required in support of this application conform to the requirements of all federal, state, and local codes and applicable laws and ordinances; and I certify that I am either the current legal owner of this property or their authorized representative. With this document, I take full responsibility for the lawful action that this document allows.

I certify that I have read and understand the limitations and conditions of Lewis County Code and agree to comply with all conditions of approval. I understand that any permits issued by Lewis County, consistent with the attached site plan, are valid ONLY if construction is in according to this plan and all other conditions of the permit are followed. By my signature below, I affirm that all the information and documents provided with this application are true and accurate to the best of my knowledge.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Check one: ☐ Owner ☐ Authorized Agent

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## LAND DEVELOPMENT REVIEW - page 1

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

### Site Characteristics:

How many lots are proposed: \_\_\_\_\_ **Additional sheet for more than 4 lots proposed.**

Acreage of each lot:	Existing Water Sources	Proposed Water Sources for Each Lot
Lot 1 _____	_____	Lot 1 _____
Lot 2 _____	_____	Lot 2 _____
Lot 3 _____	_____	Lot 3 _____
Lot 4 _____	_____	Lot 4 _____

Are there any easements (access, utility, etc.) on the subject property being proposed? ☐ Yes ☐ No

Location of site (road name/city): \_\_\_\_\_

Is the property contained within this land division application a part of any previous Simple Segregation Subdivision? ☐ Yes ☐ No;

If yes, what is the Auditors File Number (AFN)?: \_\_\_\_\_

Has the existing lot previously been subdivided with any type of subdivision process?: ☐ Yes ☐ No;

If Yes, what is the Auditor's File Number (AFN)?: \_\_\_\_\_

Do any of the lots have existing structures? If so, please identify the lot number and the type of structure.

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## LAND DEVELOPMENT REVIEW - page 2

Parcel Number(s): \_\_\_\_\_ Permit Number: \_\_\_\_\_ Zoning: \_\_\_\_\_

### Water Supply:

Existing Source:	Private Well	<input type="checkbox"/> Shared Well	Public Water	Group B	Group A
	<input type="checkbox"/> Other; If other, please explain: _____			<input type="checkbox"/> None	
Proposed Source:	Private Well	Shared Well	Public Water	<input type="checkbox"/> Group B	<input type="checkbox"/> Group A
	<input type="checkbox"/> Other; If other, please explain: _____			<input type="checkbox"/> None	

## Sewage Disposal:

Existing Method:    ☐ Septic    ☐ Public Sewer    ☐ Other; If other, please explain: \_\_\_\_\_    ☐ None

Proposed Method:    ☐ Septic    ☐ Public Sewer    ☐ Other; If other, please explain: \_\_\_\_\_    ☐ None

**Site Characteristics if proposed boundary line adjustment:**

How many lots are involved with the proposed Boundary Line Adjustment: \_\_\_\_\_

What is the existing size of each lot: \_\_\_\_\_

What is the proposed size of each lot: \_\_\_\_\_

Are there any easements (access, utility, etc.) on the subject property that would be affected by the proposal?

☐ Yes    ☐ No;            If yes, explain and identify them on the map

Where any of the lots created by a subdivision: ☐ Yes ☐ No;

If Yes, what is the Auditor's File Number (AFN): \_\_\_\_\_

If yes, a subdivision/plat amendment may be required