



23204 58th Ave W
 Mountlake Terrace, WA 98043
 Phone 425.744.6267
PermitSpecialist@mltwa.gov
www.cityofmlt.com

CONDITIONAL USE PERMIT APPLICATION

FOR STAFF USE ONLY	
Permit # _____	Receipt # _____
Fee \$ _____	Plan Check Fee \$ _____
Total \$ _____	
RECEIVED BY: _____ (Initials) DATE: ____/____/____	

Primary Conditional Use

Accessory Conditional Use

Job Site Address _____

Description of Proposal _____

Zoning District _____

Submittal Requirements:

1. The [Permit Contact Information Form](#) (page 2) is required to accompany this application.
2. In order to determine specific submittal prerequisites necessary for this proposal, a pre-application meeting is required. Please contact a Permit Specialist at www.permitspecialist@mltwa.gov or call 425-744-6267.
3. Prior to arranging a meeting, please review and respond to the Conditional Use Permit Application Criteria and supplemental information listed on pages three and four.

I certify the information provided on this permit application is true and correct.

Owner / Agent _____ Date _____

Signature

Owner / Agent _____

Print



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PERMIT CONTACT INFORMATION

FOR STAFF USE ONLY
Permit(s) Number(s): _____
PROCESSED BY: _____ (Initials) DATE: ____/____/____

Project Name/Name of Business (If Applicable) _____

Subject Property Address _____ **Suite No.** _____

Parcel Number(s) _____

Applicant _____				
Mailing Address _____				
Street Address	City	State	Zip	
Phone	E-Mail	_____		

Property Owner _____				
Mailing Address _____				
Street Address	City	State	Zip	
Phone	E-Mail	_____		

Contractor _____				
<i>If Applicable</i>				
Mailing Address _____				
Street Address	City	State	Zip	
Phone	E-Mail:	_____		
State License #	Expires	City Business License #	Expires	_____

Contact Person: _____				
<i>This person is designated by the applicant to receive all communications, correspondence, determinations and notices as required by development regulations.</i>				
Mailing Address: _____				
Street Address	City	State	Zip	
Phone	E-Mail:	_____		

Design Professional: _____				
Mailing Address: _____				
Street Address	City	State	Zip	
Phone	E-Mail:	_____		

Signed: _____ **Print Name:** _____ **Date:** _____

**CONDITIONAL USE APPLICATION
CRITERIA PER MTMC 19.110.200.D**

Prepare a detailed description addressing each of the following criteria as it relates to the proposal. Be as clear and complete as possible. Attach additional sheets as needed. The responses shall be included as part of the submittal package and used to evaluate the proposal. The Hearing Examiner will make a decision based, in part, on these criteria and the responses provided.

1. The proposal is in accordance with the goals, policies, and relevant land use designations of the Comprehensive Plan. (Cite specific goals and policies.)

2. The proposal will not adversely impact the established character of the surrounding vicinity. Character shall mean:

- a. The distinctive features or attributes of buildings and site design, including but not limited to building façade, scale, building modulation, tree cover, landscaping, size and location of signs, amount and location of parking, fencing, and walkability;

- b. The level of noise, vibrations, or odors,

- c. The type of vehicular traffic and traffic patterns associated with the permitted uses in the zoning district.

3. The proposed use will not endanger the public health, safety, and general welfare of the community.

4. The proposal complies with all requirements of the zoning district in which it is located and with the general provisions of the municipal code.

5. The proposal will be served by existing public facilities as may be necessary. This standard may be met if the applicant pays the cost of or installs any additional facilities needed.

City of Mountlake Terrace

**CONDITIONAL USE PERMIT APPLICATION
SUPPLEMENTAL INFORMATION**

1. Proposed hours of operation _____

2. Number of individuals involved (employees, clients, students, members or other users of facility)

3. Estimate of traffic generated, and types of vehicles involved (cars, vans, trucks, semi-trailers, etc.)

4. Anticipated age group of users _____

5. Sign sizes and location (also shown on Plot Plan)

6. Do you own or rent the property? _____

