



## **ISLAND COUNTY PLANNING & COMMUNITY DEVELOPMENT**

PHONE: (360) 679-7339 ■ from Camano (360) 629-4522 ■ from S. Whidbey (360) 321- 5111  
■ FAX: (360) 679-7306 ■ 1 NE 7th St., Coupeville, WA 98239-5000 ■ 121 N East Camano  
Drive, Camano Island, WA 98282 ■ Phone (360) 387-3443  
[www.islandcountywa.gov/planning](http://www.islandcountywa.gov/planning)

### **INSTRUCTIONS FOR FILLING OUT AND SUBMITTING AN APPLICATION**

- Type or neatly print all information. Only fill out those portions that are not shaded in gray.
- If someone other than the landowner is applying for the permit, the application must be accompanied by a notarized "Applicant Authorization Form". Without this form, the application will be incomplete and will not be accepted by County staff. The "Applicant Authorization Form" is attached to this application.
- This application is a "Master Land Development Permit" and must be filled out for all types of development permits. Depending upon your specific proposal you will need to fill out supplemental attachments to this application that provide more specific information. No development proposals can be reviewed using only this form so please ask what additional forms you will need.

### **Electronic Submittal Process**

It is preferred for applicants to use the electronic submittal process to submit application materials. Please save all electronic files in **PDF file format**, using the following file naming procedure for submittal:

***ApplicantLastName\_DocumentName\_DateSubmitted.pdf***

Document names should be abbreviated; below is a list of common document names and their abbreviations:

Application APP	Arch Report ARCH	AsBuilt ASB	Site Plan SPLAN
Buffer Enhancement Plan BEP	Biological Site Assessment BSA	Certificate of Appropriateness COA	Field Indicators Worksheet FIELD
Elevations ELV	Mitigation Plan MIT	Geocoastal GEOC	Geotechnical GEO
Revisions REV 1,2,3,	SEPA Checklist SEPA	Wetland Report WET	Drainage Narrative DRNG

Example of file naming using document abbreviation: **Johnson\_APP\_091324.pdf**

Once all files have been saved using the naming procedure above, all files can then be submitted to: [planningdept@islandcountywa.gov](mailto:planningdept@islandcountywa.gov) Emails over 7 MB should be sent through a file sharing application, or contact the Planning Department for an FTP sharing link. Once application materials have been reviewed by planning staff and deemed sufficient for submittal, the applicant will receive an email along with an invoice and payment instructions.

**All fees must be paid within 14 calendar days, or the application will become null and void, cancelling the application.**

After payment is received, the applicant will receive a letter of completeness indicating that the review period has begun. If the application is deemed incomplete, the applicant will receive a letter stating that the application is incomplete and requires revisions.

IF APPLICANT CHOOSES IN PERSON SUBMITTAL AN APPOINTMENT IS PREFERRED

Whidbey: call 360-678-7339

Camano: call 360-387-3443



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### CERTIFICATE OF ZONING COMPLIANCE APPLICATION

**Purpose of a Certificate of Zoning Compliance (CZC):** As described in ICC 17.03.230 Existing Uses, a CZC provides a simple and expeditious process for establishing, upon request of a property Owner, that a Lot, Use or Structure lawfully existed prior to the effective date of this Chapter (December 1, 1998). In addition, this section established the terms and conditions for continuing Existing Uses, Structures and Lots which were lawfully established prior to the effective date of this Chapter and to allow Existing businesses and uses to continue to operate even though the Use is no longer permitted in the zone in which the Use is located. The burden of establishing that any Lot, Use or Structure lawfully existed as of the effective date of this Chapter shall, in all cases, rest with the Owner and not with the County.

**PLEASE NOTE: If you have any question or comments please do not hesitate to phone, e-mail or make an appointment with the Planning Department.** All of the requested items listed below must be provided and complete at the time of application or the application will not be accepted. The purpose of this cover sheet and checklist is to ensure that minimum requirements have been met before an application can be accepted at the counter.

APPLICANT	APPLICATION REQUIREMENT	COUNTY
_____	Completed Application Form (Parts A and B);	_____
_____	Signatures of all owners and/or an Affidavit of Owner's Consent;	_____
_____	Answers to the questions in Part A are completed;	_____
_____	Answers to the questions in Part B are completed;	_____
_____	A legible plot plan showing required elements (See Part B).	_____

I hereby certify that I am the authorized applicant named above and that I have familiarized myself with the rules, regulations, and procedures with respect to preparing and filing this application and that all statements, answers and information provided as part of this submittal are in all respects complete, true and accurate to the best of my knowledge and belief.

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Signature (Owner or Authorized Agent)

\_\_\_\_\_  
Date



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## CERTIFICATE OF ZONING COMPLIANCE PART A

FOR COUNTY USE ONLY			
Application Number	Date Received	Fee Paid	Receipt
_____	_____	_____	_____

Application information must be TYPED or NEATLY PRINTED. In order to speed our review of your application, please provide all information requested. If any portion is not applicable, enter N/A in the blank. Submit the **original and electronic copy** of this application and all necessary documentation and plans as outlined on the Application Checklist to the Island County Planning Department. Illegible and/or incomplete applications will not be accepted. An application will not be considered technically complete until a Notice of Application is provided.

APPLICANT \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

CONTACT PERSON\* \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

OWNER \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

PROJECT ADDRESS (or closest intersection) \_\_\_\_\_

Assessor Parcel Number \_\_\_\_\_ Plat Name \_\_\_\_\_

Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ 1/4 Section \_\_\_\_\_

Location: North Whidbey ☐ Central Whidbey ☐ South Whidbey ☐ Camano Island ☐ Freeland NMUGA ☐

Comprehensive Plan Land Use Designation \_\_\_\_\_ Zoning \_\_\_\_\_

Size of Parcel (Square Feet or Acres) \_\_\_\_\_ Existing Use \_\_\_\_\_

BRIEF DESCRIPTION OF REQUEST AND PROPOSAL:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other County, State or Federal Applications or Permits Obtained or Pending:

\_\_\_\_\_  
\_\_\_\_\_



# AGENT AUTHORIZATION FORM

Received date: \_\_\_\_\_

Received by: \_\_\_\_\_

Landowners may authorize agents, designers, contractors, etc. to apply for permits and conduct activities on their behalf by completing this form and returning to Island County staff. Once received, this form will expire in 3 years. Any applications or requests that agents submit on an owner's behalf must meet the general description provided by the owner below.

I/We hereby authorize the following companies or individuals to submit applications on my/our behalf. I/We also understand that once a permit/application is submitted that all future correspondence may be directed to said agent(s).

Description of work/project: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

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

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

Parcel number(s): \_\_\_\_\_

Name 1 (printed) \_\_\_\_\_ Date: \_\_\_\_\_

Signature 1: \_\_\_\_\_

Name 2 (printed) \_\_\_\_\_ Date: \_\_\_\_\_

Signature 2: \_\_\_\_\_

1. **Checklist.** The following is a checklist to assure that all the items identified in the Island County Code (ICC) have been provided. In the Applicant's Checklist, check items included with the application or write N/A in those which are not applicable. Note: If the plot plan submitted with this application is drawn on the Universal Plot Plan sheet it may be used to meet plan requirements for a single family building permit.

Applicant	Application Requirement	County
_____	<b>BASIC PLOT PLAN.</b> Legible map(s) on sheets no larger than 11" by 17" that includes the following:	_____
_____	Drawn to a standard engineering scale not to exceed 1" = 60'. Indicate the engineering scale and provide a bar scale.	_____
_____	North Arrow.	_____
_____	Boundaries, dimensions, and area of lot (square feet or acreage).	_____
_____	Land features (e.g. top and toe of all slopes, direction of slope, percentage of slope, soggy areas, ditches, ravines, lakes, ordinary high water mark of shoreline, etc.	_____
_____	Critical Areas. Show protected species habitats, geologically hazardous areas, floodplains, aquifer recharge areas, streams, wetlands as well as all of their associated buffers onsite or off-site when they may affect the proposal. If the proposal is in an archaeological area, a report must be submitted that identifies resources and how they will be protected. (note: if a feature is shown on the County's Critical Areas map it must be shown on the plot plan; if you do not believe that feature is present please describe)	_____
_____	Location, size, and purpose of all existing buildings (temporary or permanent) and proposed buildings. If you are establishing a Structure, label the structure. If you are establishing a Use label all buildings associated with the Use.	_____
_____	Location, dimensions and volume of all existing and proposed propane tanks, fuel tanks, etc., labeled as existing or proposed.	_____
_____	Location and dimensions of all decks, roof overhangs, porches, cantilevers, bay windows, retaining walls, patios and chimneys	_____
_____	Distances between property lines and existing and proposed buildings and between buildings.	_____
_____	Location and width of existing and proposed driveways/accesses serving each structure and any parking areas. Access permit numbers, if assigned.	_____
_____	Width and name of road(s) bordering the property.	_____
_____	Any and all easements (access, utility, drainage, etc.) on the property including their width. Label them with intended use and the Auditor File No.	_____
_____	Location of septic tank, drainfield, reserve area and tightline between house and septic tank. Show distance between drainfield and reserve area to property lines. Indicate if hooked up to sewer.	_____
_____	Road distances to nearest fire hydrant, if applicant has right to use fire hydrant.	_____

PART B

## CERTIFICATE OF ZONING COMPLIANCE

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**Modification of Standards:** Pursuant to ICC 17.03.230 Existing Uses, the Planning Director may administratively determine, based on evidence of prior existence, that the Lot, Use or Structure will comply with the conditions of the current code and allow a reasonable use of the property. The decision may be appealed to the Hearing Examiner in writing within 14 days of the mailing of the Director's decision. A CZC Application shall be processed as a Type II administrative decision pursuant to ICC Chapter 16.19.

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**Supplemental Application Requirements:** In addition to the information required in Part A the following must also be submitted with the CZC application. In order to aid processing please make all written and mapped materials legible and include or show the items listed below.

**1. Questions.**

- a) Legal description of the Parcel or property (note if attached): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- b) Names, addresses and telephone numbers of associated professional consultants such as architects or engineers not identified on cover sheet: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- c) Why are you applying for a Certificate of Zoning Compliance? Check one or more statements as appropriate:
- ☐ Establish the legality of parcel. *Enclose any known information relating to the creation of the parcel.*
  - ☐ Establish the legality of a Structure. *Locate and mark the structure on the submitted plot plan and enclose copies of any building permits or information that would indicate the date the structure was built if before building codes.*
  - ☐ Establish the legality of a Use of the property. *Specify the precise uses you currently employ and the earliest date you or previous owners have conducted those uses on this property. Please include any documentation and/or affidavits supporting your position. Use additional paper if necessary.*  
\_\_\_\_\_  
\_\_\_\_\_
  - ☐ Other (please specify): \_\_\_\_\_
- d) Provide documents, photos, statements and other evidence of how long the use has lawfully been in existence: \_\_\_\_\_
- e) Describe the specific ways in which the lot, use or structure does not conform to this Chapter:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_