

Master Land Use Application

Staff Use Only:

Project Name:

Master Project #:

Sub-Projects #:

Pre-Application #/Date:

Check all specific Land Use Actions you are applying for in the boxes provided:

<input type="checkbox"/> Accessory Dwelling Unit <input type="checkbox"/> Code Interpretation <input type="checkbox"/> *Comprehensive Plan Amendment <input type="checkbox"/> *Conditional Use – Minor <input type="checkbox"/> *Conditional Use – Major <input type="checkbox"/> *Development Agreement <input type="checkbox"/> *Development Regulations Amendment <input type="checkbox"/> Lot Line Adjustment <input type="checkbox"/> *Planned Unit Development <input type="checkbox"/> *Preliminary Site Plan Review	<input type="checkbox"/> *Public Utility Exception <input type="checkbox"/> *Reasonable Use Exception <input type="checkbox"/> SEPA <input type="checkbox"/> Separate Lot Status Determination <input type="checkbox"/> Shoreline Exemption <input type="checkbox"/> *Shoreline Substantial Development <input checked="" type="checkbox"/> *Short Plat – Preliminary <input type="checkbox"/> *Short Plat – Final <input type="checkbox"/> *Subdivision – Preliminary <input type="checkbox"/> *Subdivision – Final	<input type="checkbox"/> Sign Special Event or Grand Opening <input type="checkbox"/> *Sign Variance <input type="checkbox"/> *Special Home Occupation (SHOP) <input type="checkbox"/> Temporary Use Permit <input type="checkbox"/> *Variance <input type="checkbox"/> Wireless Communication Facility (WCF) <input type="checkbox"/> Zoning Compliance Letter <input type="checkbox"/> *Zone Reclassification (Rezone)
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This Master Land Use Application **and** specific Land Use Action(s) Checklist must be completed, with all required supplemental documents provided for an application to be considered complete and accepted through the Permit Center.

Failure to submit all requested items (in legible form) may delay processing of your application. Additional information may be required after review of your proposal.

In an effort to reduce paper and transition to digital review, electronic plan submittal is preferred via files on a USB/Thumb drive instead of hard copies.

Please note that any land use action above marked with an asterisk (*) will require a pre-application meeting prior to an intake appointment when ready to submit. Please see the “Application Requirements” section below for more information.

Application Requirements:

- ☒ Schedule pre-application meeting, if applicable (click [here](#) for request form);
- ☒ Master Land Use Application completed;
- ☐ Specific Land Use Action submittal checklist(s) completed (please see the [Permits & Land Use Applications Page](#));
- ☐ Multimodal Transportation Concurrency Application completed (click [here](#) to view);
- ☒ Schedule intake appointment, if applicable (click [here](#) to view intake appointment FAQ);
- ☒ Payment of applicable fees via Check or Card (Visa + MasterCard limit of \$2,500).

SITE/PROPERTY INFORMATIONSite Address: 4414 S 168th Street SeaTac, WA 98188Parcel #: 537980-3260-04Property's Existing Zoning: UL-7200

☒ UL ☐ UM ☐ UH ☐ UH-UCR ☐ T ☐ MHP ☐ NB ☐ O/C/MU ☐ O/CM ☐ ABC ☐ CB ☐ CB-C ☐ BP ☐ I
☐ P ☐ AVC ☐ AVO

APPLICANT/OWNER INFORMATION

Applicant's Information:

Name: Kamaljit Singh☒ Owner ☒ Authorized Agent ☐ PurchaserMailing Address: 4426 S 166th St SeaTac, WA 98188Phone: 206-423-8800Email: sidhucustomhomes@gmail.com

Property Owners Information:

*(If an LLC, please provide documentation
of being an authorized signer)*Name: Kamaljit Singh, Bandhanjit SinghMailing Address: 4426 S 166th St SeaTac, WA 98188Phone: 206-423-8800Email: SidhuBuiLLC@gmail.com

Designated Contact Person:

*(Who will receive and disseminate all
correspondence from the City)*

Same as:

☒ Applicant ☒ Property Owner ☐ OtherName: Kamaljit SinghMailing Address: 4426 S 166th St SeaTac, WA 98188Phone: 206-423-8800Email: sidhucustomhomes@gmail.com*(Contact 1)*

PROFESSIONAL CONTACT INFORMATION

Architect:

Name: Yuri Manchik

Mailing Address: _____

Phone: 253-293-6768

Email: Vertexdb@yahoo.com

Engineer:

Name: Patrick E. Carroll, P.E

Mailing Address: 2621 NE 109th St Vancouver, WA 98686

Phone: 503-849-1646

Email: Pat@PecDesign.net

Surveyor:

Name: Jay Babcock

Mailing Address: 19512 94th Street East Bonney Lake WA 98391

Phone: 206-396-2022

Email: JayBabcock@comcast.net

Designer/Landscape Architect/etc.:

Name: N/A

Mailing Address: _____

Phone: _____

Email: _____

ACKNOWLEDGEMENTS

1. *By signing this application, I authorize employees/agents of the City of SeaTac to enter onto the property that is the subject of this application during regular business hours. The sole purpose of entry is to make an examination of the property that is necessary to process this application.*
2. *I certify that I am the owner of this property or the owner's authorized agent. If acting as an authorized agent, I further certify that I have full power and authority to file this application and to perform, on behalf of the owner, all acts required to enable the jurisdiction to process and review such application. I will comply with all provisions of the law and ordinance governing this type of application. If the scope of work requires a licensed contractor to perform the work, the information will be provided prior to permit issuance.*
3. *I CERTIFY THAT THE INFORMATION FURNISHED BY ME AS PART OF THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.*

I am the: ☒ Owner ☒ Authorized Agent

Applicant Signature: Bandhanjit Singh

Date: 01-05-2022

Printed Name: Bandhanjit Singh