

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:

Please note that you do not need to duplicate any of the information requested from the land use action submittal checklists below if you have already provided it in this application.

<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 checked="" type="checkbox"/> *Preliminary Site Plan Review <input type="checkbox"/> Public Utility Exception	<input type="checkbox"/> Reasonable Use Exception <input type="checkbox"/> Request for Zoning Compliance Letter <input checked="" type="checkbox"/> SEPA <input type="checkbox"/> Separate Lot Status Determination <input type="checkbox"/> Shoreline Exemption <input type="checkbox"/> *Shoreline Substantial Development <input 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) (see submittal checklists above) must be completed with all required supplemental documents provided prior to submitting for an application to be considered complete and accepted through the Permit Center. Please note that any land use action above marked with an asterisk (*) will require an intake appointment when ready to submit. Please see the [Land Use Application Intake Appointment FAQ's](#) page for more information.

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.

Application Requirements:

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

SITE/PROPERTY INFORMATION

Site Address: 19059 INTERNATIONAL BLVD 98188

Parcel #: 332304-9101

Property's Existing Zoning:

☐ 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: Brad Kaul

☐ Owner ☒ Authorized Agent ☐ Purchaser

Mailing Address: 1733 Ferndale Ave SE, Renton, WA 98058

Phone: 206.200.0015

Email: bradkaul@kauldesignarchitecture.com

Property Owners Information:

*(If an LLC, please provide documentation
of being an authorized signer)*

Name: PNW Group LLC

Mailing Address: 11900 NE 1st st, Ste. 300, Bellevue, WA 98005

Phone: 206.919.6882

Email: jp.athwal@gmail.com

Designated Contact Person:

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

Same as:

☒ Applicant ☐ Property Owner ☐ Other

Name: Brad Kaul

Mailing Address: 1733 Ferndale Ave SE, Renton, WA 98058

Phone: 206.200.0015

Email: bradkaul@kauldesignarchitecture.com

(Contact 1)

PROFESSIONAL CONTACT INFORMATION

Architect:

Name: Brad Kaul

Mailing Address: 1733 Ferndale Ave SE, Renton, WA 98058

Phone: (206) 200-0015

Email: bradkaul@kauldesignarchitecture.com

Engineer:

Name: CWA Consultants

Mailing Address: 8675 E Caraway Rd, Port Orchard, WA 98366

Phone: (360) 871-5433

Email: chuck@cwaconsultants.net

Surveyor:

Name: _____

Mailing Address: _____

Phone: _____

Email: _____

Designer/Landscape Architect/etc.:

Name: _____

Mailing Address: _____

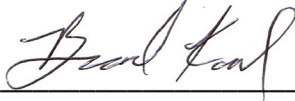
Phone: _____

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: 

Date: 04/08/2021

Printed Name: Brad Kaul