City of Sumas
Long Subdivision Application

The following information or material is required with all long subdivision applications. If any of this information is missing or incomplete, processing of the application will not begin.

Filing fee as established in Section 3.30.010 SMC. **($500 plus $50 per lot)**

Complete application form.

Five copies of the short plat map. The plat map must contain all information noted in Section 20.88.040 SMC.

A completed SEPA checklist ($250 as per Section 3.30.010 SMC, if applicable)

Self-adhesive address labels preaddressed to the latest recorded real property owners within three hundred feet (300') of the property affected by the application, as shown by the records of the Whatcom County Assessor. If the owner of the affected property owns other land adjacent to the affected property, the address labels must include all neighboring owners within 300' of that adjacent property as well. (see RCW 58.17.090(b)).

Applicant(s) Name(s): _____

_____

Single entity and address to which the City will mail all notices and determinations:

_____

_____

_____

Phone: _____ Fax: _____

Address of affected property: _____

Assessor's tax parcel number for affected property: _____

Legal description of affected property (attach separate page if necessary):

_____

_____

_____

_____

CITY OF SUMAS   PO BOX 9/ 433 CHERRY ST.   SUMAS, WA 98295   360-988-5711

DECLARATION

I (We) the undersigned hereby declare under penalty of perjury that:

a. The property affected by this application is exclusively owned by the applicant(s) or has been submitted with the consent of all owners of the affected property;

b. The project permit application materials contain no known misrepresentation of fact of proposed action or design that, if completed, would result in a structure, improvement, lot or condition in violation of the Sums Municipal Code; and

c. The address labels submitted with the application are complete and accurate as of the date of application

Signature of Applicant(s)   _____

_____

Date of Submittal: _____

FOR OFFICE USE ONLY BELOW THIS LINE

Date of notice of completion to applicant (mailed): _____

Date of notice of application to public (mailed, publication): _____

Date of close of comment period: _____

Date of administrator's decision: _____

Date of notice of decision to public (mailed, published): _____

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