

**TOWN OF YARROW POINT
COMMUNITY DEVELOPMENT**



4030 -95th Ave NE
Yarrow Point, WA 98004

(425) 454-6994
Fax: (425) 454-7899

VARIANCE-APPLICATION INSTRUCTIONS (Page 1 of 2)

Welcome to the Yarrow Point variance process. The attached packet includes instructions, information, pertinent ordinances, and forms for your use in completing your Application for Hearing Examiner Review/Variance. A variance is the means by which property owners may be granted relief from the strict application of the provisions of the Town's Zoning Code in effect at the time the variance application is filed with the Town Clerk.

To request a variance for your proposed construction project or subdivision, please follow these steps:

1. **READ THE TOWN ZONING CODE ORDINANCES.** These ordinances describe the requirements for your project, including siting regulations, e.g. setbacks, height limits, lot coverage, etc., and the process for requesting a variance to these restrictions. As the applicant, you are responsible for determining and complying with all legal requirements.
2. **DETERMINE WHICH OF THE FOLLOWING DOCUMENTS ARE REQUIRED** for your project when filing an Application for Variance.

- A. APPLICATION FORM AND CHECKLIST:** You must complete an Application for Hearing Examiner Review/Variance and Variance-Application Checklist, provide all information requested in digital form, answer all questions accurately and neatly, and sign the application.
- B. FILING FEE:** \$2,500 application fee. Any underpayment of total hearing costs incurred by the Town must be paid by the applicant to the Town before Hearing Officer findings can be released.
- C. SITE PLANS:** Your digital submittal must include a site plan for the property showing the exact dimensions of the property to an appropriate engineer's scale (e.g. 1"=50'). Please show all existing and proposed buildings or improvements and their setbacks, tree and ground cover, adjoining streets, watercourses, access points, fencing, and other information that will illustrate your proposal on your site plan. If new building construction is involved, the applicant must submit a floor plan showing the existing conditions and proposed changes in addition to the plot plan.
- D. TOPOGRAPHICAL MAP:** When an alleged topographical hardship exists or where height is a consideration, you must submit a topographical map showing five-foot contours and a profile (cross-section) of the project site. This map must be signed and dated.
- E. ASSESSOR'S MAP:** You may be asked to provide an assessor's map or maps showing each lot within 300 feet of the exterior boundaries of the subject property. These maps may be purchased for a nominal fee from the King County Assessor's Department. Please do not cut or draw on this map.
- F. SITE SURVEY:** If the Town determines that verification of site conditions is needed to establish compliance with Town regulations, you may be asked to provide a site survey of the property for which the variance is sought. At a minimum, the survey must be prepared by a licensed surveyor and must identify the property's boundaries, structures, site features, and topographic elevations pertinent to the proposed project.

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VARIANCE-APPLICATION INSTRUCTIONS (Page 2 of 2)

G. PHOTOGRAPHS: You may submit photographs of the subject property on a scale large enough to illustrate the variance requested and reasons for the request, if you desire.

3. **COMPLETE THE APPLICATION FORM**, including the appropriate number of site plans, and all other supplemental forms, documents, and information.
4. **SUBMIT THE COMPLETED APPLICATION AND FEES AT TOWN HALL.** When filed with the Town Clerk, items 2A through F (as required) constitute a complete Application for Variance. The application must be complete in every respect (all questions answered, forms signed) before the Town Clerk can accept and certify it.
5. After accepting your application documents and fees, the Town Clerk will process your application and review it for completeness. The Town Clerk will notify you within 28 days of filing whether the application is complete, and what additional information may be necessary to make the application complete. **PROVIDE ANY ADDITIONAL INFORMATION REQUESTED AS QUICKLY AS POSSIBLE TO AVOID ANY DELAYS IN THE REVIEW OF YOUR APPLICATION.**
6. The Town Clerk will forward a copy of your application and supporting documents to the Town Representative, who will review it and prepare a staff report on behalf of the Town for presentation to the Town Hearing Examiner.
7. The Town Clerk will arrange for your hearing and notify you of the date and time when your request for variance will be heard by the Hearing Examiner. **PLAN TO ATTEND THIS PUBLIC HEARING IN ORDER TO ANSWER ANY QUESTIONS, SUBMIT ADDITIONAL EVIDENCE IN SUPPORT OF YOUR REQUEST, AND TO RESPOND TO EVIDENCE SUBMITTED BY OTHERS.**
8. At the conclusion of the public hearing, the Hearing Examiner will review the evidence submitted and testimony given at the hearing and produce written findings of fact and conclusions outlining his/her decision in this matter. This decision will be either to grant the variance, grant it with modifications, or deny it. The date that such findings are mailed by the Hearing Examiner is the date of action on your variance request.
9. The Town Clerk will contact you when these findings are available and notify you of the additional fees due for the Hearing Examiner's review of and ruling on your application. **COME TO TOWN HALL TO PAY THESE FEES AND PICK UP YOUR COPY OF THESE FINDINGS.**
10. The action of the Hearing Examiner shall be final and conclusive unless, within twenty-one (21) days from the date of the action, you apply to the Council for an appeal. Contact the Town Clerk if you need more information.

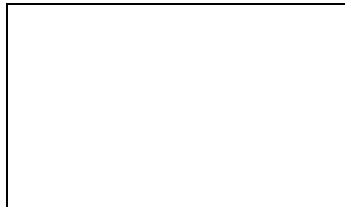
VARIANCE APPLICATION CHECKLIST (Page 1 of 1)

Please describe the nature of the proposed project, why it does not conform with existing zoning regulations, and what adjustment or relief is sought.

For the Hearing Examiner to grant a variance, the applicant must show that the request meets the conditions set forth in the Town Zoning Code. Please use the space provided below or a separate sheet to describe accurately and completely how your project meets each of the following conditions. Attach this information and any other information, that you wish the Hearing Examiner to consider, including photographs, diagrams, surveys, etc to your completed variance application form.

1. That because of special circumstances applicable to subject property, including size, shape, topography, location or surroundings, the strict application of the zoning ordinance is found to deprive subject property of rights and privileges enjoyed by other properties in the vicinity and under identical zone classifications.
2. That the granting of the variance shall not constitute a grant of special privilege inconsistent with the limitations upon other properties in the vicinity and zone in which subject property is situated.
3. That the granting of the variance will not be materially detrimental to the public welfare or injurious to the property or improvements in the vicinity and zone in which subject property is situated.

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CASE NO.

ACCEPTED _____ DATE _____
 HRG SCHED: _____ DATE _____
 FINDINGS _____ DATE _____
 GRANTED _____ DATE _____
 MODIFIED _____ DATE _____
 DENIED _____ DATE _____

APPLICATION FOR HEARING EXAMINER REVIEW / VARIANCE

To be completed by owner or owner's agent:

PROPERTY ADDRESS _____ ZONING _____
 PROPERTY OWNER _____ PHONE _____
 ADDRESS _____ ZIP CODE _____
 OWNER'S AGENT/CONTACT _____ PHONE _____
 ADDRESS _____ ZIP CODE _____
 EMAIL ADDRESS _____
 PROPERTY LEGAL DESCRIPTION _____

 _____ ASSESSOR'S PARCEL NO. _____ - _____

(Attach separate legal description, if necessary)

DATE PROPERTY ACQUIRED BY APPLICANT: _____

HAVE THERE BEEN OTHER VARIANCES GRANTED TO THIS PROPERTY: O YES O NO

If so, please attach list of date(s) and type(s) of variances granted.

USE TYPE	IMPROVEMENT TYPE	PERMIT TYPE
<input type="checkbox"/> RESIDENCE	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> BUILDING
<input type="checkbox"/> CARPORT/GARAGE	<input type="checkbox"/> ADDITION	<input type="checkbox"/> FENCE/WALL
<input type="checkbox"/> ACCESSORY BUILDING	<input type="checkbox"/> REMODEL	<input type="checkbox"/> BULKHEAD/PIER
<input type="checkbox"/> FENCE/WALL	<input type="checkbox"/> REPLACEMENT	<input type="checkbox"/> _____
<input type="checkbox"/> POOL/SPA	<input type="checkbox"/> REPAIR	
<input type="checkbox"/> PIER/MOORAGE	<input type="checkbox"/> RECONSTRUCTION	
<input type="checkbox"/> _____	<input type="checkbox"/> _____	

I certify under penalty of perjury that i am the owner of the above described property or the duly authorized agent of the owner(s) acting on behalf of the owner(s) and that all information furnished in support of this application is true and correct.

SIGNATURE _____ OWNER O AGENT O DATE _____

TO BE COMPLETED BY TOWN:

RCPT NO. _____	APPLICATION FEE \$ <u>2,500.00</u>
AMOUNT REC'D: \$ _____	HEARING EXAMINER FEE \$ _____
REC'D BY: _____	TECHNOLOGY FEE \$ _____
	OTHER FEES \$ _____
	TOTAL FEES \$ _____
RCPT NO. _____	LESS FEE PAID AT SUBMITTAL \$(_____)
AMOUNT REC'D: \$ _____	
REC'D BY: _____	BALANCE DUE \$ _____