



**CITY OF COVINGTON**  
**Community Development Department**  
 16720 SE 271st Street · Suite 100 · Covington, WA 98042  
 Phone: 253-638-1110 · Fax: 253-638-1122  
 www.ci.covington.wa.us

A-431

## APPLICATION FOR DEVELOPMENT REGULATION AND/OR ZONING MAP AMENDMENT

<b>STAFF USE ONLY</b>	Docket Number: _____ Application Date: _____ <input type="radio"/> City-initiated <input type="radio"/> Privately-initiated
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APPLICANT
<i>Check if Primary Contact Person</i> <input type="checkbox"/>
Name _____
Address _____
City, State, Zip _____
Phone Number _____
Fax Number _____
E-mail _____
Signature _____

AGENT
<i>Check if Primary Contact Person</i> <input type="checkbox"/>
Name _____
Address _____
City, State, Zip _____
Phone Number _____
Fax Number _____
E-mail _____
Signature _____

PROPERTY OWNER 1
<i>Check if Primary Contact Person</i> <input type="checkbox"/>
Name _____
Address _____
City, State, Zip _____
Phone Number _____
Fax Number _____
E-mail _____
Signature _____

PROPERTY OWNER 2
<i>Check if Primary Contact Person</i> <input type="checkbox"/>
Name _____
Address _____
City, State, Zip _____
Phone Number _____
Fax Number _____
E-mail _____
Signature _____

<b>TYPE OF AMENDMENT (Check all that apply)</b> <input type="checkbox"/> This is a proposal to amend development regulation text or tables contained in the Covington Municipal Code. <b>Complete development regulation information on Page 2.</b> <input type="checkbox"/> This is a proposal to amend the City's zoning map. <b>Complete zoning map amendment information on Page 2.</b>
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## DEVELOPMENT REGULATION AMENDMENT

Chapter(s) and section(s) of Covington Municipal Code to be amended:

1. Is the proposed amendment a minor correction (i.e. one that does not result in any substantive change to the content or meaning of a development regulation, such as a correction to punctuation or numbering, or a typographical or technical error)?  Yes  No

*If yes, amendment proposal is exempt from the notice and hearing requirements of CMC 14.27 and the Director may make a recommendation directly to City Council.*

2. What are the reasons for requesting this change?

3. Provide either conceptual or specific proposed amendatory language. Please be as specific as possible to aid in the evaluation of your proposal. If specific changes are requested, please indicate current language and proposed language. Attach additional sheets if necessary.

## ZONING MAP AMENDMENT

PROPOSED CHANGE TO ZONE DESIGNATION: FROM \_\_\_\_\_ (CURRENT) TO \_\_\_\_\_ (PROPOSED)

SURROUNDING ZONE DESIGNATIONS: EAST \_\_\_\_\_ WEST \_\_\_\_\_ NORTH \_\_\_\_\_ SOUTH \_\_\_\_\_

COMPREHENSIVE PLAN FUTURE LAND USE MAP DESIGNATION: \_\_\_\_\_

CURRENT LAND USE: \_\_\_\_\_

*If this is a site-specific zoning map amendment, complete the following property information. Give street address, or, if vacant, indicate lot(s), block, and subdivision OR tax lot number, access street, and nearest intersection. If proposal applies to several parcels, list the streets bounding the area.*

ADDRESS(ES): \_\_\_\_\_

ASSESSOR'S PARCEL NUMBER(S): \_\_\_\_\_

SITE AREA: \_\_\_\_\_  square feet  acres

LEGAL DESCRIPTION(S):

## DESCRIBE HOW PROPOSAL MEETS DECISION CRITERIA

1. Proposed amendments that are the same or substantially-similar to an amendment proposed during the last three amendment cycles are not eligible for consideration, except in certain cases due to geographic expansion by the City (see CMC 14.27.030(3)). Has the same or a substantially-similar amendment been proposed in the last three amendment cycles?  Yes  No If yes, how has geographic expansion necessitated the proposed amendment?

2. Explain how the proposed amendment is consistent with the goals, objectives, and policies of the comprehensive plan.

3. Explain how the proposed amendment is consistent with the scope and purpose of the City's zoning ordinances and the description and purpose of the zone classification applied for.

4. Explain how circumstances have changed substantially since the establishment of the current development regulation, zoning map or district to warrant the proposed amendment.

5. Explain how the proposed zoning is consistent and compatible with the uses and zoning of surrounding property.

## DESCRIBE HOW PROPOSAL MEETS DECISION CRITERIA (cont'd.)

6. Explain how the property that is the subject of the amendment is suited for the uses allowed in the proposed zoning classification.

7. Explain how adequate public services could be made available to serve the full range of proposed uses in that zone.

## COST & BENEFITS / ADDITIONAL INFORMATION

1. Describe the effects of the proposed amendment in terms of costs and benefits to the public, both monetary and non-monetary.

2. Describe and/or attach any studies, research information, or other documentation that will support this proposal.

## CERTIFICATION / SIGNATURE

- I certify that the information provided in the application is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

*Print form, sign, date, and return to Permit Services counter at City Hall with the required fee. If this is a site-specific amendment proposal, all affected property owners must complete, sign, and have notarized a Property Owner Declaration.*