



GRANT COUNTY
PLANNING DEPARTMENT
P.O. Box 37 - 264 WEST DIVISION AVENUE
EPHRATA, WA 98823
(509) 754-2011 EXT 2501

VARIANCE APPLICATION & PROCEDURES

Variance fee: \$750

PART I PROCEDURES FOR APPLYING FOR A VARIANCE

1. The applicant must complete the following and present it to the Planning Department. The permitting process for an application will take an average of 60 days to complete. However, Grant County will issue a decision on the variance application no later than 120 days following the determination of completeness.
 - a. An application for a variance (see attached);
 - b. A scaled drawing showing, in detail, the site of the proposed use in which a variance is needed.
 - 1) Vicinity map
 - 2) Legal Description of property (be as complete as possible)
 - 3) Map or plot plan of the layout of property and proposed use including the following:
 - a) Scale of drawing.
 - b) North arrow.
 - c) Location of the proposed project including existing and proposed structure dimensions and distances to property lines.
 - d) Location of all proposed and existing utilities including power, water, septic tank and drainfield.
 - e) Off street parking (if applicable).
 - f) Location of all proposed and existing roads providing access to property, driveways, parking areas, rights-of-way and easements.
 - g) Location of any distinguishing physical features located on the property including but not limited to streams, culverts, drainage ways, wetlands, bluffs, etc.
 - c. A check for \$750.00 made payable to “Grant County” and submitted with the completed application.
 - d. Please note that if you are requesting a Variance to the setback requirements, you may be required to make changes to the building to comply with the Uniform

Building Code, Uniform Fire Code, and Americans with Disabilities Act, etc. You are requested to contact the Grant County Building Department to determine if any modifications are required. This may prevent spending money on the permit process only to find out later that the structure cannot be cost effectively constructed at the proposed location for the intended use.

2. **The Planning Department Staff** will do the following:
 - a. Prepare a list of names and addresses of all property owners within three hundred (300) feet of the exterior boundaries of the subject property;
 - b. Provide notice of application upon the issuance of a determination of completeness;
 - c. Mail notice of any open record hearing (if applicable) to the applicant and the applicant's representative, the above list of names, and any person who submits written or oral comments on the application at least fifteen (15) calendar days prior to the hearing; and shall
 - d. Publish legal notice of public hearing of a variance request according to the requirements of the Local Project Permit Review Ordinance 97-192-CC.
3. **The Hearing Examiner** meets on the second (2nd) Wednesday of the month. The application will be heard before the Hearing Examiner at an open record public hearing. The applicant or representative shall be present to answer any questions the Hearing Examiner may have relative to the proposed use. You will be notified by mail as to what date your application will be heard before the Hearing Examiner.
4. **Hearing:** After the open record public hearing and based upon findings of fact, the Hearing Examiner will determine whether the variance is to be granted, granted with conditions, or denied. The Hearing Examiner's written decision should be issued within 10 working days of the date of the hearing.
5. **Time Frame for Decision:** Once the application is deemed complete, the review process will begin. Provided there is no continuation of the application, a decision on the variance will be made within 120 days, subject to an open record public hearing.
6. **Appeals:** Decisions of the Hearing Examiner shall be final unless the original applicant or a party with standing makes an appeal to the Superior Court of Grant County pursuant to RCW 36.70C and the Grant County Local Project Permit Review Ordinance, 97-192-CC.

Variance Application – Responses to Criteria of Approval

Pursuant to GCC 25.08.050, any request for a variance shall be accompanied by a narrative statements demonstrating how the proposed request conforms to the criteria for approval specified in GCC 25.08.060. Please provide a narrative statement addressing each of the following criteria for approval and how your proposal complies with the criteria

1. Special conditions and circumstances exist that are peculiar to the land such that literal interpretation and application of the provisions of GCC Titles 22, 23, and 24 would deprive the applicant of the rights commonly enjoyed by other properties in the same district under the terms of GCC Titles 22, 23, and 24.
2. Allows the variance will be in harmony with the intent and spirit of GCC Titles 22, 23, and 24.
3. A variance is necessary for the preservation and enjoyment of a property right possessed by other property in the same vicinity or district, but which is denied to the property in question because of special circumstances on that property.
4. The special conditions and circumstances described in Criteria #1 above, are specifically related to the property and are the result of unique conditions such as specifically irregular lot shape, size, or natural feature, and the application of GCC Titles 22, 23, and 24, and not, for example, from deed restrictions or the applicant's own actions.
5. The granting of the variance requested will not confer on the person seeking the variance any special privilege that is denied by this Chapter to other lands, structure, or buildings under similar circumstances.
6. The variance requested is the minimum necessary to afford relief.
7. The requested variance will not create significant impacts to critical areas and will not be materially detrimental to the public welfare, injurious to the right of other property owners in the vicinity, or contrary to the public interest.
8. The variance will not permit a use prohibited by GCC Title 23 in the district in which the subject property is located.

All requested information shall be provided - use black ink or type for photocopying purposes

Fee \$750

**PART II
VARIANCE APPLICATION**

Legal Owner's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ (Work): _____ Fax: _____

If applicant is not the owner, include the written owner authorization form (see Part III) designating the contact to serve as representative.

Owner's Designated Contact: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ (Work): _____ Fax: _____

Project/Proposal Site Area (Acres or sq. ft.): _____

Assessor Tax Parcel No.(s) of Proposal Site: _____

Adjacent Area Owned or Controlled (Acres or sq. ft.): _____

Assessor Tax Parcel No.(s) of Adjacent Land Owned or Controlled: _____

Street Address of Proposed Site (if any): _____

Describe Existing Use(s) on Proposed Site (Such as buildings, well, sewer drainfield and others): _____

Existing Zoning Classification: _____

Comprehensive Plan Category: _____

Growth Management Act Designation: Within IUGA or UGA? () yes () no

School District: _____

Fire District: _____

Water Purveyor: _____

Irrigation District: _____

Proposed Use of Property:

- | | | |
|------------------------|---------------|----------------------------|
| () Duplexes | () Business | () Multi-Family dwelling |
| () Industrial | () Mixed Use | () Single-family dwelling |
| () Manufactured Homes | | () Other: Please describe |

List Previous Grant County Actions Involving this Property: (Such as tax segregation application, certificate of exemptions, subdivision, lot segregation or Agriculture District segregation, zone change, variance, temporary use SEPA review, estate transfer, zoning code violation or others)

LEGAL INFORMATION

Location of Proposal Site (General description by which direction and how far from roads and intersections and other community features):

Section(s): _____ Township: _____ Range: _____

Legal description attached: () yes () no

Name of Public Road (s) providing access:

Width of Property Fronting on Public Road:

Section of the zoning ordinance under which it is claimed that a variance should be granted:

Purpose for the requested variance:

Are there special circumstances such as lot size, slope, topography or necessary size or shape of the building which prevent compliance with the zoning ordinance? If so, please explain:

Does strict application of the zoning ordinance deprive subject property of rights and privileges enjoyed by other properties in the vicinity and under the same zoning classification? If so, please explain:

Is the granting of the variance materially detrimental to the public welfare? If so, please explain:

(If you have any additional comments, please attach them on a separate sheet of paper.)

**PART III
LEGAL OWNER SIGNATURE**

(Signature of legal owner or representative as authorized by legal owner)

I, the undersigned, swear or affirm under penalty of perjury that the above responses are made truthfully and to the best of my knowledge.

I further swear or affirm that I am the owner of record of the area proposed for the previously identified land use action, or, if not the owner, attached herewith is written permission from the owner authorizing my actions on his or her behalf.

Name: _____ Date: _____
Address: _____ Home Phone: _____
Zip: _____ Work Phone: _____

Signature of Applicant or representative

Date

Notary
(For Part III Above)

STATE OF WASHINGTON)
COUNTY OF GRANT) ss:

SUBSCRIBED AND SWORN to me this _____ day of _____, 20____.

NOTARY SEAL

Notary Signature

Notary Public in and for the State of Washington

Residing at: _____

My appointment expires: _____

PART IV
(To be completed by the Planning Department)

Date Submitted: _____ Planner: _____

Total Fees: _____ Receipt #: _____

File #: _____ Complete Application: _____

SITE PLAN INSTRUCTIONS

INSTRUCTIONS:

- A. Complete the information requested in the gray box at the top of the reverse side of this page and draw your site plan in the space provided; you may use additional 8½ X 11 sheets as needed;
- B. Identify the north arrow in the space provided;
- C. Use an accurate scale for drawing (ie; "1 inch = 10 feet" or "1 inch = 20 feet" or "1 inch = 100 feet" etc.);
- D. Draw the boundaries of the parcel including the dimensions (you may need a plat map copy from the assessor's office)
- E. Draw the location and dimensions of all existing buildings and structures;
- F. Draw the location of the proposed project including the structure dimensions, and distances to property lines and existing buildings and structures;
- G. Draw the location of all proposed and existing utilities (including power, phone, water, sewer systems, reserve drainfield, etc.);
- H. Draw the location and dimensions of all existing and proposed roads, driveways, parking areas, rights-of-way and easements;
- I. Draw the location of any distinguishing physical features located on or adjacent to the property (including but not limited to : streams, culverts, drainage ways, wetlands, slopes, bluffs, etc.);
- J. In the gray box at the bottom of the page, please provide detailed directions to the site;
- K. If you have questions regarding these instructions, please see the "EXAMPLE" SITE PLAN provided below. If you have further questions not covered in the example, please call (509) 754-2011, extension 620 for assistance.

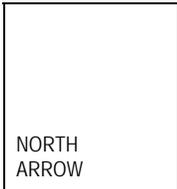
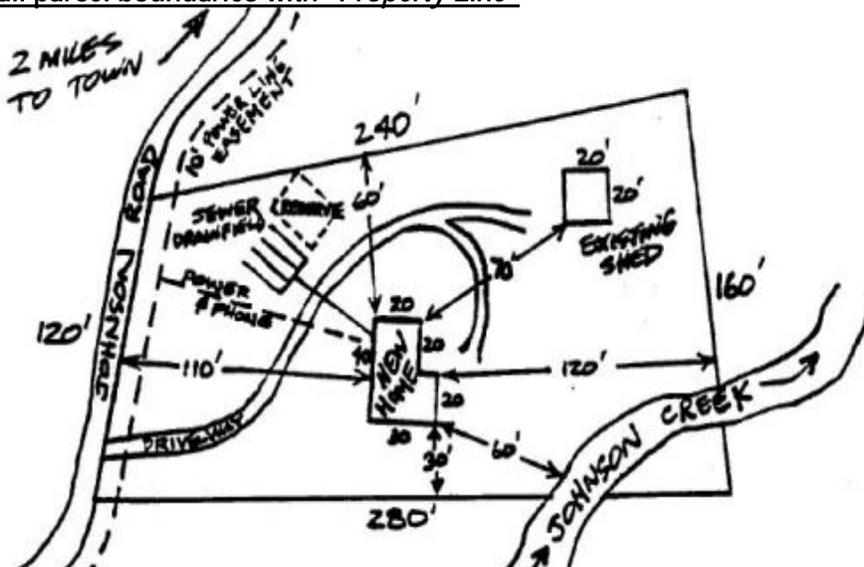
"EXAMPLE" SITE PLAN

IN ORDER TO PROCESS LANDUSE APPLICATIONS, ALL SUBMISSIONS MUST INCLUDE A COMPLETED SITE PLAN MAP OF THE PROPOSED PROJECT (SEE INTRUCTIONS), submission of an incomplete site plan map will be considered as an incomplete application and returned to the applicant:

PROJECT/ OWNER NAME _____ DATE _____

PARCEL #(s) _____ DRAWING SCALE _____ inch(s) = _____ feet

NOTE: Please label all parcel boundaries with "Property Line"



Directions to the Site:

SITE PLAN

IN ORDER TO PROCESS LAND USE APPLICATIONS, ALL SUBMISSIONS MUST INCLUDE A COMPLETED SITE PLAN MAP OF THE PROPOSED PROJECT (SEE INTRUCTIONS), submission of an incomplete site plan map will be considered as an incomplete application and returned to the applicant:

PROJECT/ OWNER NAME _____ DATE _____

PARCEL #(s) _____ DRAWING SCALE _____ inch(s) = _____ feet

NOTE: Please label all parcel boundaries with "*Property Line*"

NORTH
ARROW

Directions to the Site:

Critical Areas Checklist
Pursuant to Grant County 24.08.070

- 1) Section _____ Township _____ Range _____ Parcel Number _____
- 2) Site Address: _____
- 3) Directions to site and landmarks to help staff locate the site: _____

- 4) If this checklist is submitted independently, please attach a Section map obtained from the Assessor's office and highlight the project area. Attached? Yes ___ No ___
- 5) Proposed uses: _____
- 6) For independent CAO review, please attach a Site Plan. Attached? Yes ___ No ___
- 7) Please answer the following questions concerning Critical Area indicators located on or within 300 feet of the project area.
 - a) Are you aware of any environmental documentation that has been prepared related to critical areas that includes the subject area? (if yes, please attach a list of document titles).
Yes ___ No ___ Unknown ___

 - b) Are there any surface waters (including year-round and seasonal streams, saltwater, lakes, ponds, bogs, fens, swamps, marshes)?
Yes ___ No ___ Unknown ___

 - c) Is there vegetation that is associated with wetlands?
Yes ___ No ___ Unknown ___

 - d) Have any wetlands been identified?
Yes ___ No ___ Unknown ___

 - e) Are there areas where the ground is consistently inundated or saturated with water?
Yes ___ No ___ Unknown ___

 - f) Is there any State or Federally listed sensitive, endangered or threatened species and habitats?
Yes ___ No ___ Unknown ___

 - g) Are there slopes of 15% or greater?
Yes ___ No ___ Unknown ___

 - h) Is the project located within a Flood Hazard Zone?
Yes ___ No ___ Unknown ___

 - i) Do you know of any geologic hazards (for example: erosion hazards, landslide hazards, seismic hazards and mine hazards)?
Yes ___ No ___ Unknown ___

 - j) Do you know of any cultural resource sites (lands, sites, structures with historic or archaeological significance) located on the proposed site?
Yes ___ No ___ Unknown ___

Information regarding endangered species, wetland vegetation and flood hazard zones is available for public use at the Grant County Planning Department. I understand that if the information on this form is later determined to be incorrect, the project or activity may be subject to conditions or denial as necessary to meet the requirements of GCC 24.08, the Grant County Critical Areas Ordinance.

Applicant's Signature

Date

PRE-APPLICATION REVIEW CONFERENCE WAIVER

Pre-application conferences are intended as an informal discussion and review of possible applications to assist the applicant in discovery of appropriate county regulations, standards, application materials and review processes, that would be required of a project, as well as to identify environmental issues that may arise in connection with the application for proposed development.

- However, the requirement for the pre-application conference may be waived by the administrative official with the concurrence of the applicant.

Application No.: _____

Type of Application: _____

I hereby request a waiver to the pre-application conference as provided in the Grant County Local Project Review Ordinance (Ord. #97-192-CC). I have been provided with copies of the county ordinances and other related information concerning this application. Furthermore, I have read and understand the requirements and will be providing all the necessary information needed for the formal review process of this application.

Name

Date

ADMINISTRATIVE REVIEW

Upon consideration of the application and supplemental materials and information submitted thus far by the applicant, Administrator finds that:

- 1) the application itself **is / is not** relatively simple; and
- 2) the administrative official had made a good faith determination that the applicant **will / will not** be harmed by the failure to hold a pre-application conference.

The above request for a waiver of the Pre-Application Conference requirement is hereby **APPROVED / DENIED**.

Project Planner

Date



GRANT COUNTY
PLANNING DEPARTMENT
P.O. Box 37 - 264 WEST DIVISION AVENUE
EPHRATA, WA 98823
(509) 754-2011 EXT 2501

LAND USE ACTIVITY

ACKNOWLEDGEMENT AND AUTHORIZATION FORM

I, _____, legal owner
of Parcel (s) _____ - _____ - _____, _____ - _____ - _____, hereby authorize
_____ to act as my agent, in the
_____ application filed in the
Grant County Planning Department.

Legal Owner Signature

Legal Owner Signature

Date

Date

**A GRANT COUNTY HEALTH DISTRICT “*LAND
USE PROPOSAL APPLICATION*” MAY BE
REQUIRED FOR THIS PROJECT; PLEASE
CONTACT THE PLANNING DEPARTMENT AND
HEALTH DISTRICT* FOR VERIFICATION**

IF APPLICABLE, IN ORDER FOR YOUR LAND USE PERMIT
APPLICATION PACKET TO BE ACCEPTED IT MUST CONTAIN THE
FORM SIGNED BY THE HEALTH DISTRICT REPRESENTATIVE.

* Grant County Health District Contact information:
1038 West Ivy
Moses Lake, WA 98837
(509) 766-7960
www.granthealth.org