



City of Oak Harbor
Development Services Department
865 SE Barrington Drive, Oak Harbor, WA 98277
<http://www.oakharbor.org>

Phone: 360-279-4510
Fax: 360-279-4519

Development Application

Project Information

Project Name: Oak Harbor Clean Water Facility
Project Address: Approximately at 1501 SE City Beach Street, Oak Harbor, WA 98277. Immediately north and west of the wastewater treatment plant.
Description of Work: Construction of a new facility to treat and discharge wastewater within the City of Oak Harbor service area.
Assessor Parcel Number(s): S6565-00-00B05-2, S6565-00-00B13-1, R13202-106-0750
Land Area (sq. ft. or acres): 4-5 acres Zoning District: conditional use under Zone C-3
What is the Project Valuation (best guess, if necessary) \$ \$85-90 million

Applicant Information

Applicant Name: City of Oak Harbor / Brett Arvidson, PE
Address: 865 SE Barrington Drive
City/State: Oak Harbor, WA Zip: 98277 Phone/Fax: (360)279-4521 / (360)679-3902
Email: barvidson@oakharbor.org

Applicant's Interest to Property* (check one):

- Owner Owner's Agent Lessee Contractor Licensed Architect Licensed Engineer
 Other (specify) _____

Primary Contact (if other than applicant)

Name: _____
Address: _____
City/State: _____ Zip: _____ Phone/Fax: _____
Email: _____

Property Owner(s) (if other than applicant)

Name: _____
Address: _____
City/State: _____ Zip: _____ Phone/Fax: _____
Email: _____

*Documentation demonstrating authorization to sign applications on behalf of the Owner(s) is required.

All Persons/Firms having an ownership interest in the property:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Architect / Engineer:

Name: Carollo Engineers Address: 1218 Third Avenue, Suite 1600

City/State: Seattle, WA Zip: 98101 Phone/Fax: (206)538-5158 / (206)903-0419

Email: Susanna Leung, PE / sleung@carollo.com

Architect / Engineer:

Name: _____ Address: _____

City/State: _____ Zip: _____ Phone/Fax: _____

Email: _____

Contractor:

Name of Business: Hoffman Construction Company

Contact Person: Trevor Thies

Email: trevor-thies@hoffmancorp.com

Address: 1505 Westlake Ave., North, Suite 500

City/State: Seattle, WA Zip: 98109 Phone/Fax: (206)438-2722

WA State Contractors License: #HOFFMCC164-NC Exp. 07/12/2016

City of Oak Harbor Business License: to be issued

Authorization

I declare under penalty of the perjury laws that the information I have provided on this form/application is true, correct, and complete.

Applicant Signature*

Date

*Documentation demonstrating authorization to sign applications on behalf of the Owner(s) is required.

Permit Type (check all that apply)

- Building
 Land Use
 Engineering
 Grading Only
 Land Clearing Only
 Demolition Only
 Residential Construction
 Commercial Construction

Please Note: Additional applications or supplementary pages may apply to your project.

Permits Requested (check all that apply)

<input type="checkbox"/> Accessory Dwelling Unit	<input type="checkbox"/> Grading	<input type="checkbox"/> Site Plan – Type I, II, IV
<input type="checkbox"/> Binding Site Plan	<input type="checkbox"/> Land Clearing	<input type="checkbox"/> Short Plat
<input type="checkbox"/> Boundary Line Adjustment	<input type="checkbox"/> Lot Combination	<input checked="" type="checkbox"/> Shoreline Substantial Development
<input type="checkbox"/> Civil Plan Review	<input type="checkbox"/> Pre-Application	<input type="checkbox"/> Transportation Concurrency
<input type="checkbox"/> Conditional Use - Consolidated	<input type="checkbox"/> Preliminary PRD	<input type="checkbox"/> Simple Variance - Consolidated
<input type="checkbox"/> Conditional Use - Simple	<input type="checkbox"/> Preliminary Plat	<input type="checkbox"/> Variance - Simple
<input type="checkbox"/> Final Plat	<input type="checkbox"/> SEPA Review	<input type="checkbox"/> Zoning Code Text Amendment

Are you requesting to process the applications individually per OHMC 18.20.360(1)?

Yes No

Project Details (fill in all applicable sections)

Ground Disturbance: Yes No If yes, completes the following questions:

Is disturbance greater than 100 cubic yards? Yes No

Type of equipment to be used _____

Total cubic yards of excavation _____ Total cubic yards of fill _____

Critical Areas:

Does the site contain a critical area as defined in OHMC 20.12.030(2) Yes No Unknown

If yes, please state critical area type(s) [wetland buffer](#), [geologically sensitive](#), [floodplain](#), [critical aquifer](#)

Shoreline Development:

Is construction planned within 200 feet of ordinary high water? Yes No Unknown

Floodplain:

Is the project site /property/or portions of the property within a floodplain? Yes No Unknown

Project Details (fill in all applicable sections)

Stormwater:

Will the completed project result in 2,000 or more square feet of impervious surface? Yes No Unknown

Total replaced new and impervious surface (in sq. ft)_____

What is the stormwater facility type(s) proposed to be used for the project?_____

Land Clearing: Yes No If yes, complete the following questions:

Percentage of land to be cleared_____ Types of vegetation to be removed_____

Garry Oaks on the property? Yes No Estimated date of clearing_____

Type of equipment to be used_____

Transportation Concurrency:

Licensed Traffic Engineer_____ Phone_____ Email_____

Total length of public streets _____ Total length of private streets_____

Existing property use_____

Land Use Data:

Sq ft of new construction_____ Existing property use_____

Proposed Property Use_____ Housing Type Proposed_____

Proposed Number of Buildings _____ Number of Existing Dwelling Units_____

Number of Proposed Dwelling Units_____ Number of Existing Parking Spaces_____

Number of New Parking Spaces_____ Number of Existing Lots_____

Number of New Lots Proposed_____ Proposed Density_____