Master Land Use Application

City of La Center, Planning Services
305 NW Pacific Highway
La Center, WA 98629
www.ci.lacenter.wa.us
Ph. 360.263.7665 Fax: 360.263.7666
www.ci.lacenter.wa.us

Property Information

Site Address _____

Legal Description _____

Assessor's Serial Number _____

Lot Size (square feet) _____

Zoning/Comprehensive Plan Designation _____

Existing Use of Site _____

Contact Information

APPLICANT:

Contact Name _____

Company _____

Phone _____ Email _____

Complete Address _____

Signature _____
(Original Signature Required)

APPLICANT'S REPRESENTATIVE:

Contact Name _____

Company _____

Phone _____ Email _____

Complete Address _____

Signature _____
(Original Signature Required)

PROPERTY OWNER:

Contact Name _____

Company _____

Phone _____ Email _____

Complete Address _____

Signature _____
(Original Signature Required)

Development Proposal

Project Name
Type(s) of Application _____

Previous Project Name and File Number(s), if known _____

Pre-Application Conference Date and File Number _____

Description of Proposal _____

Office Use Only

File # _____ **Planner** _____

Received By _____ **Fees: $**_____

Date Received: _____ **Date Paid:** _____

Procedure: ☐ **Type I** **Receipt #** _____
☐ **Type II**
☐ **Type III**
☐ **Type IV**

Notes _____