

CITY OF TUMWATER

555 ISRAEL RD. SW, TUMWATER, WA 98501

(360) 754-4180

Email:cdd@ci.tumwater.wa.us

FEASIBILITY SITE PLAN REVIEW Application

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Application fee: \$80.00 (one acre or less); \$137.50 (greater than one acre) Conceptual Site Plan Required.

In most cases, meetings will be scheduled on Thursdays of the following week, when applications are received prior to 5:00 p.m. on Wednesdays.

SUBJECT PROPERTY	
ADDRESS OF PROPERTY (COMPLETE):	
PROJECT NAME:	PARCEL NUMBER(S):
APPLICANT (please print neatly)	
NAME OF APPLICANT:	
APPLICANT'S MAILING ADDRESS (COMPLETE):	
APPLICANT'S TELEPHONE(S):	APPLICANT'S E-MAIL:
PROJECT REPRESENTATIVE	
NAME OF PROJECT REPRESENTATIVE:	
REPRESENTATIVE'S MAILING ADDRESS (COMPLETE):	
REPRESENTATIVE'S TELEPHONE(S):	REPRESENTATIVE'S E-MAIL:
PROPERTY OWNER	
NAME OF PROPERTY OWNER:	
OWNER'S MAILING ADDRESS (COMPLETE):	
OWNER'S TELEPHONE(S):	OWNER'S E-MAIL:
PROJECT DESCRIPTION (attach additional sheets	and documentation, as needed)
the best of my knowledge. I also affirm that I owner to act with respect to this application representatives of the City of Tumwater and other controls.	mation submitted with this application are correct and accurate to am the owner of the subject site or am duly authorized by the n. Further, I grant permission to any and all employees and her governmental agencies to enter upon and inspect said property on. I agree to pay all fees of the City that apply to this application.
Signature of Applicant/Representative	Date