



King County
Department of Development
and Environmental Services

900 Oakesdale Avenue Southwest
 Renton, WA 98057-5212

206-296-6600 TTY : Relay: 711

Critical Areas Designation Application

For alternate formats, call 206-296-6600.

Background/General Information

The critical areas designation process establishes conditions and constraints on site development (King County Code (K.C.C.) 21A.24.500). Through this process a property owner can establish a site plan that will be vested for a period of five years. The scope of the process can be adapted to meet the property owner's needs. Options include:

1. Limited Scope Critical Areas Designations – address only a portion of the property, as requested by the applicant.
2. Comprehensive Critical Areas Designations – address all critical areas in the proposed development area.

For more information, see Customer Information Bulletin 21, *Critical Areas Review*, available via the Department of Development and Environmental Services (DDES) Web site at www.kingcounty.gov/permits, or telephone DDES at 206-296-6600 to request a copy of the bulletin.

Application Requirements

The following information is required at the time a Critical Areas Designation is requested:

1. A completed Critical Areas Designation Application Form. (See page 2 of this document.)
2. If the request for site designation is for less than the entire parcel, clearly show the area to be evaluated on the site plan.
3. Fees: Deposit based on assumption of one critical area. Actual fees will be determined during review, based on the table below.

Critical Area Inquiries/Designations - KCC 27.10.130	2011 Fee	5% Surcharge	Total Fees
No areas found	\$510	\$25.50	\$535.50
Less than 5 acres with 1 critical area	\$935	\$46.75	\$981.75
Less than 5 acres with 2 critical areas	\$1,445	\$72.25	\$1,517.25
Less than 5 acres with 3 critical areas	\$1,785	\$89.25	\$1,874.25
5-10 acres with 1 Critical Area	\$1,190	\$59.50	\$1,249.50
5-10 acres with more than 1 critical area	\$170/hour	\$8.50/hour	\$178.50/hour
All others not listed	\$170/hour	\$8.50/hour	\$178.50/hour

If available, please submit any surveys of the site or special studies, including site plans showing the location of features, geotechnical studies, or wetland reports.

Site preparation

Prior to application, the property boundaries must be clearly flagged. If the site designation request is for only a portion of the property, the boundaries of the area covered by the request must be flagged prior to the initial site investigation. Failure to clearly flag the property may result in increased costs and delays in completing the site designation.

Critical Areas Designation Application

For DDES Use - Application Number assigned:

Deposit amount: \$981.75, based on assumption of one critical area. Fix fee to be corrected based on actual site conditions.

Parcel Number: _____

Address of proposed work: _____ address not assigned yet
(if not assigned yet, check box at right)

Related permit number(s): _____

Provide a brief description of the purpose of site designation:

This request is for: The entire parcel
 Only a portion of the property (*must* include site plan showing specific location of review. Include all areas within 200 feet of any proposed development within the area for review.)

Property Owner: _____

Phone: _____ E-mail: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Applicant Name: _____

Phone: _____ E-mail: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Contact/Agent Name: _____

Phone: _____ E-mail: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Critical Area Compliance:

The undersigned applicant declares:

I am the legal owner of this parcel, or have obtained permission from the legal owner for King County staff to access the site.

I certify under penalty of perjury and under the laws of the State of Washington the forgoing is true and correct. **I accept financial responsibility for all fees** associated with this permit, approval or application and will receive any refunds. Please mail any refunds to the address above. I also understand that signing and submitting this application authorizes DDES staff to inspect the site at any reasonable time for the purpose of reviewing this application.

Applicant Signature: _____ Date: _____