

DEPARTMENT OF PLANNING & ZONING PLANNING | ZONING | LAND PRESERVATION | FOREST CONSERVATION | GIS

Site Plan Determination Form

Prior to filing a permit application for additions or revisions for multi-family or non-residential projects, this form shall be completed to determine the necessity of a commercial site plan submittal in compliance with Section 4.11 of the Washington County Zoning Ordinance.

PROPERTY O	WNER INFORMA	<u>TION</u>					
Name:							
Address:							
Phone No.	Office:	Cell:	E-mail:				
PROPERTY SU	JMMARY DATA						
Property Add	ress:		Property Tax ID No.:				
			Parcel Size/Acreage:				
Zoning Distric	ct:	Area of Disturbance: _	sq. ft. (See	attached sheet to estimate area of disturbance)			
Is property cu	rrently occupied	? Yes No	_ If no, when was bu	o, when was building/property vacated?			
Name of last Previous use Residential	of property (circle Other – Describe	: all that apply): Retail Ware e:	ehouse Industrial				
		approved site plan? Yes		ing (plot plan) of the property.			
				: (attach a separate sheet if necessary)			
Daily Traffic (•	cluding employees)	Ho	mber of Employeesurs of Operation			
Grass Floor A	rea of Building (c	.)	Nu	mher of Floors			

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PROPOSED TENANT INFORMATION

Name of proposed busing	ness:							
Proposed Use of prope Restaurant Residenti	rty by new tenant (circle all the	hat apply): Retail	Warehouse	Industrial	Office	Church		
Attach an "AS IS" floor space. Floor plans show office, warehouse, etc. Provide details as to ho	plan of the tenant space a ild include location of ingre bw the building/property w azardous materials, etc. (A	ess/egress, wir	specific in desc	esignations s	uch as re	stroom,		
• • • • • • • • • • • • • • • • • • • •		•	aily traffic (one-way trips, including employees)					
Number of floors			20.22		_			
DAT	S	SIGNATURE OF OWNER/APPLICANT						
	FOR PLANNING & Z	ONING DEPAR	TMENT USE OF	NLY				
Based on the informat	ion provided on this form	by the owner	/applicant:					
Review and apple	Review and approval of site plan required							
Site plan not re	quired		MENTS:					
Conditions:								
Director of Planning & Zoning Signature				 Date				
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Zoning Coordinator Signature				Date				