



Short Subdivision Alteration Application

How do I apply for a Short Subdivision Alteration?

- 1) After you have completed all relevant application materials you may submit the application to the Subdivision Counter Monday through Friday between 8:30 AM and 12 Noon. The applications will be taken in at the front counter and considered vested upon receipt of the applicable fees and a Determination of Completeness.

Short Subdivision Alteration Processing Sequence

- 1) Once the application and fees are submitted staff, will review the project and if all items are submitted a Determination of Completeness will be issued to the applicant. In addition, the project will be routed to the **TECHNICAL REVIEW COMMITTEE** (engineering, natural resources, and the Health Department), as applicable.
- 2) When the requirements of WCC 21.04.120(3) appear to be reasonably satisfied, the Technical Review Committee will issue a **NOTICE OF PRELIMINARY APPROVAL**. This authorizes the surveyor to prepare your deed and/or maps.
- 3) If there are still items that need to be addressed by the applicant, the Technical Review Committee will issue a **NOTICE OF ADDITIONAL REQUIREMENTS (NOAR)**. The applicant shall have 180 days from issuance of the NOAR to submit requested items.
- 4) A Short Subdivision Alteration is not considered approved until a new original drawing (mylar) is submitted, approved and signed by the PDS and **FILED FOR RECORD** with the Whatcom County Auditor. Please see the **FINAL SHORT SUBDIVISION APPLICATION** for submittal requirements.



Short Subdivision Alteration Application

Short Subdivision to be altered _____

Major or Minor Alteration _____

Original Short Subdivision Number _____

(In upper-right corner of plat map)

#SSS _____

Date Recorded _____ Application Date _____

Purpose of Alteration _____

Note: List all property owners of all lots in the original short subdivision on a separate sheet of paper.

Applicant

Name _____ Phone _____

Address _____ City _____

State _____ Zip _____ Email _____

Legal Property Owner

Name _____ Phone _____

Address _____ City _____

State _____ Zip _____ Email _____

Contact Person

Name _____ Phone _____

Address _____ City _____

State _____ Zip _____ Email _____

Surveyor

Name _____ Phone _____

Address _____ City _____

State _____ Zip _____ Email _____

Parcel Information

Tax Parcel Number(s) (APN) _____

Site Address _____

Proposed Use: Residential Other _____

Location in Common Language _____

| Existing Size | Lot Size After Alteration | The proposed uses for each lot. If the proposed use is residential indicate whether you would like the lot to be eligible for an accessory dwelling unit (ADU). |
|------------------|------------------------------|---|
| Lot #1 _____ | Lot #1 _____ | ADU: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Lot #2 _____ | Lot #2 _____ | ADU: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Lot #3 _____ | Lot #3 _____ | ADU: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Lot #4 _____ | Lot #4 _____ | ADU: <input type="checkbox"/> Yes <input type="checkbox"/> No |

Accessory Dwelling Units are prohibited on Reserve Tracts.

Does the Owner of this Property Own any Contiguous Property? Yes No

Zoning Designation _____ Comp Plan Designation _____

Subarea _____ Shoreline Yes No

Watershed Protection Overlay District? Yes No

Washington State Highway Yes No Pipeline within 600' Yes No

Stormwater Special District Yes No

Agriculture Protection Overlay (APO) Yes No
If Yes Soils Taxation Both

Flood Zone Yes No Fire District _____

Re-division of an Existing Short Subdivision Yes No
(If Yes submit 2 copies of SEPA Checklist)

Water Supply Source _____ Sewage Disposal Method _____

Nearest Public Road _____ R.O.W. _____

Private Easement Length _____ R.O.W. _____

Existing Restrictions & Covenants _____

Proposed Restrictions & Covenants _____

Variance Requested _____

Technical Committee Meeting Date (Assigned by PDS) _____

Fee Receipt # _____



Short Subdivision Alteration Application Submittal Requirements

| Applicant Checklist | | PDS Checklist |
|---|--|--------------------------|
| 1. Written and Other Data and Fees- Seven (7) sets of the information (listed below) shall be submitted unless otherwise indicated. | | |
| <input type="checkbox"/> | a) Name, address and phone number of owner(s), applicant, and contact person | <input type="checkbox"/> |
| <input type="checkbox"/> | b) Intended uses | <input type="checkbox"/> |
| <input type="checkbox"/> | c) List of variances and waivers requested | <input type="checkbox"/> |
| <input type="checkbox"/> | d) General written proposal of water supply and sewage disposal method, including letter from public water or sanitary sewer providers stating their willingness and ability to serve the proposed land division | <input type="checkbox"/> |
| <input type="checkbox"/> | e) Preliminary Stormwater Proposal (3 copies) | <input type="checkbox"/> |
| <input type="checkbox"/> | f) Preliminary Traffic Proposal and Transportation Concurrency as required (3 copies) | <input type="checkbox"/> |
| <input type="checkbox"/> | g) Assessor's parcel number (of the parent parcel) | <input type="checkbox"/> |
| <input type="checkbox"/> | h) Fees as specified in the Unified Fee Schedule | <input type="checkbox"/> |
| <input type="checkbox"/> | i) Critical areas assessment and map (3 copies) | <input type="checkbox"/> |
| <input type="checkbox"/> | j) Preliminary title report issued no more than 60 calendar days prior to application | <input type="checkbox"/> |
| <input type="checkbox"/> | k) Net and gross lot size to determine minimum lot size and density requirements as required by the Zoning Ordinance | <input type="checkbox"/> |
| <input type="checkbox"/> | l) Signature of property owners or applicant attesting by written oath to the accuracy of all information submitted for the application | <input type="checkbox"/> |
| 2. Map Data | | |
| <input type="checkbox"/> | a) Name of owner(s) | <input type="checkbox"/> |
| <input type="checkbox"/> | b) Name of proposed land division | <input type="checkbox"/> |
| <input type="checkbox"/> | c) General layout of proposed land division | <input type="checkbox"/> |
| <input type="checkbox"/> | d) Common language description of the general location of the land division | <input type="checkbox"/> |
| <input type="checkbox"/> | e) Approximate locations of existing roads, utilities, and infrastructure. | <input type="checkbox"/> |
| <input type="checkbox"/> | f) Vicinity map | <input type="checkbox"/> |
| <input type="checkbox"/> | g) Short plat map with a common engineering scale with north arrow and sheet numbers (on each sheet containing a map) | <input type="checkbox"/> |

- h) Section, township, range and municipal and county lines in the vicinity
- i) Boundaries of the site with general dimensions shown that is prepared by a licensed surveyor
- j) Legal description of the land
- k) Location and means of proposed water service and sewage disposal
- l) Location and means of proposed access (including proposed improvements to on-site and off-site roadways, and site distance)
- m) Other proposed on-site and off-site utilities and facilities
- n) Location of existing roads, rights-of-way, buildings, parking, and drainage on-site
- o) Where appropriate, location of natural features, including bodies of water, natural drainage areas, critical areas, and buffers
- p) Location of existing facilities, sanitation and water facilities, easements (where appropriate)
- q) Existing and proposed street names
- r) Names or numbers of any adjacent divisions
- s) Sequential numbers or letters to all lots within the short subdivision
- t) Topographic map of sufficient contour interval, acceptable to the county engineer or director of planning and development services or their designee to show the topography of the land to be divided
- u) Location of critical areas, shorelines and base flood elevation where applicable

NOTE: Fees will be assessed in accordance with the Whatcom County Unified Fee Schedule (UFS) in effect at the time of application submittal. Please contact Planning and Development Services to determine project specific fees. Click [here](#) to see the 2019/2020 UFS.

Per UFS 2843 all permits and applications are subject to a Technology fee. The fee is calculated on the permit/application fees due.



Lot of Record Application

What is a Lot of Record?

WCC 20.97.220 defines "Lot of Record" as "a lot which is described by final plat, short plat, or metes and bounds and is established pursuant to applicable local and state regulations at the date a legal instrument creating the lot is recorded at the Whatcom County auditor's office."

Note: "Lot of Record" is in no way synonymous with "buildable lot", it just means that it was legally created/subdivided.

Note: A COMPLETE DEED HISTORY and CORRESPONDING MAP must accompany this application. You may obtain a deed history of your property from any local title company. Use an Assessor's parcel map from the PDS office (You will need to know your Section, Township, and Range) to show the parent parcel and subsequent division/creation of your lot. Color-code the map, deeds and deed list. Do this by showing the pre- 1972 parcel as one color and each subsequent division or alteration with a different color, both on the map, on the deeds and on the deed history chronology on page three. Depending on the complexity of the deed history, you may need professional assistance to do this.

File # (PDS will assign) _____ Date _____

| | | | |
|--------------------------------------|-----------|-------------|--|
| Applicant Name _____ | | Phone _____ | |
| Address _____ | | City _____ | |
| State _____ | Zip _____ | Email _____ | |
| Contact Name _____ | | Phone _____ | |
| Address _____ | | City _____ | |
| State _____ | Zip _____ | Email _____ | |
| Property Owners(s) Name _____ | | Phone _____ | |
| Address _____ | | City _____ | |
| State _____ | Zip _____ | Email _____ | |

Site address (if any) or nearest public road _____

Assessor Tax parcel number(s) _____

Acreage/square footage _____ Current Zoning _____

Current use: Vacant Residential Agriculture Other _____

When was the parcel created in its current configuration? _____
(Check deed history)

Have there been any subsequent boundary line adjustments, vacations, dedications, foreclosures, etc.? Yes No
(If yes, please show on map with corresponding auditor's file numbers)

Is it a platted parcel? Yes No

If yes, name of plat _____

Has the property ever been surveyed? Yes No If so when? _____

(Please include record of survey with application) AF# _____

Does the owner of this parcel own any contiguous property? Yes No
(If yes, please show on map)

Is the parcel located in the Lake Whatcom or Lake Samish watershed, or other water resource protection overlay district? Yes No

Is the parcel subject to any county conditional use permit? Yes No
If yes, CUP # _____

Is the parcel subject to a Forest Practice Application (FPA) from the State Department of Natural Resources? Yes No
(If so, please submit a copy of the application with your completed lot of record application)

Is the parcel within 330 feet of an area designated as mineral resource land, and/or within 660 feet of a pipeline, and/or within one-half mile of land that is designated forestry, and/or land upon which agricultural operations are being conducted? Yes No

(If yes which?) _____

Please list any current county, state, or federal permits affecting the subject property

How many dwelling units (residences) are on the property? _____
(Show on map)

Are there any other structures (barns, shops, sheds, garages, etc.) on the property?
 Yes No (If so, show on map)

Water source _____

Sewage disposal method _____



DEED HISTORY

List deeds from oldest to most recent.
Color-code your section map, deeds and deed list.

Auditor's File Number (AF#), Grantor and Grantee of Pre-1970 Parent Parcel:

Auditor's File# _____ Date: _____
Grantor (From) _____ Grantee (To) _____

**AF# of Subsequent Conveyances, Adjustments or Divisions:
(You May Need To Include Additional Pages)**

Auditor's File# _____ Date: _____
Grantor (From) _____ Grantee (To) _____

Auditor's File# _____ Date: _____
Grantor (From) _____ Grantee (To) _____

Auditor's File# _____ Date: _____
Grantor (From) _____ Grantee (To) _____

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Grantor (From) _____ Grantee (To) _____

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Grantor (From) _____ Grantee (To) _____

Auditor's File# _____ Date: _____

Grantor (From) _____ Grantee (To) _____

Auditor's File# _____ Date: _____

Grantor (From) _____ Grantee (To) _____

Auditor's File# _____ Date: _____

Grantor (From) _____ Grantee (To) _____

Auditor's File# _____ Date: _____

Grantor (From) _____ Grantee (To) _____

YOU MAY USE THIS SECTION TO DESCRIBE HOW YOUR PARCEL WAS CREATED.

For example:

"Farmer Jones bought 40 acres from Grandpa Smith in 1964 with a deed filed under auditor's file number (AF#) 1234567. Farmer Jones sold 20 of the 40 acres to Cousin Bill in 1976 with AF# 93872980. Bill later divided 5 acres off to give to his daughter in 1998..."

WHATCOM COUNTY
Planning & Development Services
5280 Northwest Drive,
Bellingham, WA 98226-9097
360-778-5900, TTY 800-833-6384
360-778-5901 Fax



Mark Personius, AICP
Director

Fee Responsibility

Venue and Jurisdiction: The parties hereto recognize and agree that the venue of any action involving their rights or obligations related to this application shall be in Whatcom County, and the parties' rights and obligations hereunder shall be determined, in accordance with the laws of the State of Washington.

Fee Guaranty: Notwithstanding that this application has been submitted in the name of a company, I personally guarantee payment of fees accrued according to the terms listed in the Whatcom County Unified Fee Schedule and that my personal guarantee is part of the consideration for review of the application.

I/we, _____, hereby certify that the above statements and the information contained in any papers or plans submitted herewith are true and accurate to the best of my knowledge, and that the list of surrounding property owners is complete and current.

Signature of Applicant

Date

Signature of Owner

Date

I certify that I know or have satisfactory evidence that _____
is/are the person(s) who appeared before me, and said person(s) acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in this instrument.

Dated _____

Notary Signature: _____

Printed Name: _____

Notary Public in and for the State of Washington

Residing at _____

My appointment expires: ____/____/____



Agent Authorization

If you are authorizing an agent to apply for permits on your behalf you must complete this form and have it notarized, which will provide authorization for a designated agent to apply for permits on your behalf.

I/we, _____, the owner(s) of the subject property, understand that by completing this form I hereby authorize _____ to act as my agent. I understand that said agent will be authorized to submit applications on my behalf, and that any fees associated with submitted applications are due to me and not to the said agent. I also understand that once an application has been submitted that all future correspondence will be directed to the agent.

Property Address

Parcel Number

Property Owner Printed Name

Property Owner Printed Name

Property Owner Signature

Property Owner Signature

Date

Date

I certify that I know or have satisfactory evidence that _____ is/are the person(s) who appeared before me, and said person(s) acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in this instrument.

Dated _____

Notary Public Signature

Notary Public Printed Name

Notary Public in and for the State of Washington

Residing at _____

My appointment expires: ____/____/____

Application received by _____

Date _____