



# CITY OF SNOHOMISH

116 UNION AVENUE · SNOHOMISH, WASHINGTON 98290 · (360) 568-3115 · WWW.SNOHOMISHWA.GOV

## SITE DEVELOPMENT PLAN (SDP)

For more information refer to Chapter 14.65 SMC

Date: 01/23/19	Project # 01-19-SDP
Project Name: 120 Willow	
Project Address: 120 Willow Ave, Snohomish, WA	
Land Use Designation: Mixed Use (MU)	
Property Tax #(s): 00579401600400	

### APPLICANT / CONTACT

Name: Jeff Fransen
Address: Pier 70, 2801 Alaska Way, Suite 107
City/State/Zip: Seattle, WA 98121
Phone: (206) 374-0414
Cell Phone:
Alternate Phone:
E-mail:

### OWNER (IF DIFFERENT FROM APPLICANT)

Name: WILLOW 120 LLC
Address: 120 Willow Ave
City/State/Zip: Snohomish, WA 98290
Phone:
Cell Phone:
Alternate Phone:
E-mail:

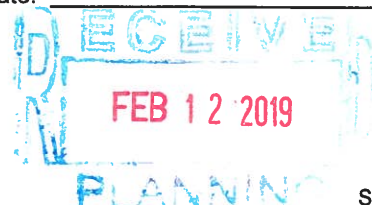
SUBJECT TO SEPA:  YES  NO

### DEPOSITS & FEES

<input type="checkbox"/>	Description	Amount	Date of Receipt:
<input checked="" type="checkbox"/>	SDP submittal fee		2/21/19
	SEPA-Exempt	\$ 865.00	
*	Subject to SEPA	\$2,265.00	
<input type="checkbox"/>	SEPA review fee (assumes DNS)	\$ 650.00	Receipt #: 125799
<input type="checkbox"/>	Critical areas fee (if applicable)	\$ 200.00	
<input type="checkbox"/>	Critical areas consultant deposit (full cost recovery)	\$2,500.00	
<b>TOTAL</b>		<b>\$ 865.00</b>	

Signature of Owner/Contractor or Authorized Agent:  Printed Name: JEFF FRANSEN Date: 2/12/19

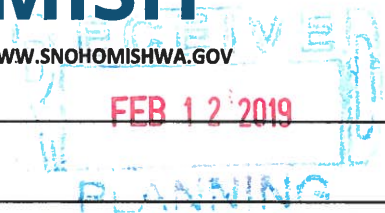
Permit Coordinator:  Date: \_\_\_\_\_





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## LAND USE APPLICATION

<b>Date:</b> 01/23/19
<b>Site Address:</b> 120 Willow Ave, Snohomish, WA
<b>Land Use Designation:</b> Mixed Use (MU)

<b>Project #:</b> 01-19-SDP
<b>Application Type:</b> Site Development Plan (SDP)
<b>Property Tax #(s):</b> 00579401600400

**APPLICANT/CONTACT**

<b>Name:</b> Jeff Fransen
<b>Address:</b> Pier 70, 2801 Alaska Way, Suite 107
<b>City/State/Zip:</b> Seattle, WA 98121
<b>Phone:</b> (206) 374-0414
<b>E-mail:</b>

**OWNER (IF DIFFERENT FROM APPLICANT)**

<b>Name:</b> WILLOW 120 LLC
<b>Address:</b> 120 Willow Ave
<b>City/State/Zip:</b> Snohomish, WA 98290
<b>Phone:</b>
<b>E-mail:</b>

**OWNER #2 (IF APPLICABLE)**

<b>Name:</b> N/A
<b>Address:</b>
<b>City/State/Zip:</b>
<b>Phone:</b>
<b>E-mail:</b>

**OWNER #3 (IF APPLICABLE)**

<b>Name:</b> N/A
<b>Address:</b>
<b>City/State/Zip:</b>
<b>Phone:</b>
<b>E-mail:</b>

**Description of request:** Submit additional pages if necessary  
 Site Development Plan review for an eight unit hotel development with a lobby, comprised of nine "tiny house" structures at 120 Willow Avenue. The proposal includes a central gathering area, a parking lot, and a three foot wide screening area with a solid wood fence.

Legal - LOT 4, BLOCK 16, SNOHOMISH CITY EASTERN PART, ACCORDING TO THE PLAT THEREOF RECORDED IN VOLUME 1 OF PLATS, PAGE 7, RECORDS OF SNOHOMISH COUNTY, WASHINGTON. SITUATE IN THE COUNTY OF SNOHOMISH, STATE OF WASHINGTON.

**Property Legal Description Must be Attached**

**SIGNATURE OF OWNER(S):** Submit additional pages if necessary

The undersigned owner(s), and his/her/its heirs, and assigns, in consideration of the processing of the application, agree to release, indemnify, defend and hold the City of Snohomish harmless from any and all damages, including reasonable attorney's fees, arising from any action or infraction based in whole or in part upon false, misleading, inaccurate or incomplete information furnished by the owner, his/ her/ its agents or employees. The undersigned owner grants his/her/its permission for public officials and the staff of the City of Snohomish to enter the subject property for the purpose of inspection and posting attendant to this application.

I/We, hereby attest that I am/we are the owner(s) in fee simple of the property involved in this application and that the foregoing statements and answers contained herein, and the information herewith submitted, are in all respects true and correct to the best of my/our knowledge and belief. I/We shall be solely responsible for verification of all property lines and setbacks. I/We also understand that signing and submitting this application authorizes City staff and agents to enter and inspect the site at any reasonable time for the purpose of reviewing this application.

	JEFF FRANSEN	2/12/19
Signature	Printed Name	Date
Signature	Printed Name	Date
Signature	Printed Name	Date