

Community and Economic Development

Zoning Compliance Letter Request

Staff Use Only:		
Permit Number:		

PURPOSE

Zoning Compliance Letters will address the following items:

- Zoning Classification of the property;
- 2. Abutting Zoning Designations;
- 3. Whether the property is part of a Planned Unit Development;
- 4. Any Variances, Special Exceptions, or Conditional Uses issued for the property, including copies of the decision;
- 5. Any Legal Nonconforming Issues;
- 6. Site and Building Design Standards that may apply;
- 7. Issues concerning the Repair or Reconstruction of Non-Conforming Structures;
- 8. Any history of Zoning Code Violations;
- 9. Whether the property has been granted Site Plan Approval, including copies of the decision;
- 10. A copy of the Certificate of Occupancy (not applicable to single family residences).

Please note that the City of SeaTac incorporated in 1990. Information prior to that year is unavailable through the City; contact King County Records Division to access these records, if available.

If requesting any other documents pertaining to the site, not included in the items listed above, please go through the public records request process. For further information, visit:

http://www.seatacwa.gov/government/city-departments/legal/city-clerk/records-request

or contact:

Records Management Office Attn: Public Records Officer 4800 South 188th Street SeaTac, WA 98188

Email: recordsmanagement@seatacwa.gov

Phone: 206.973.4663

SITE/PROPERTY INFORMATION	
Site Address:	Parcel #:
APPLICANT INFORMATION	
Applicant's Information:	Name:
	☐ Owner ☐ Authorized Agent ☐ Purchaser Mailing Address:
	Phone:
	Email:
REQUEST REQUIREMENTS	
Fee is based upon the current <u>Fee S</u> regarding the required payment am	Schedule. Please contact the Permit Center at 206-973-4750 if you have questions nount.
☐ Payment of applicable fees via Che	ck or Card (Visa + MasterCard limit of \$2,500).
☐ If mailing in the request, attach a cl Community & Economic Developme City of SeaTac 4800 S 188th Street SeaTac, WA 98188	neck made payable to the City of SeaTac with this request form to: ent Department
SIGNATURE	
Applicant Signature:	Date:
Printed Name:	