



SHORELINE LETTER OF EXEMPTION REQUEST

Planning and Economic Development Department
 200 NE Moe Street | Poulsbo, Washington 98370
 (360) 394-9748 | fax (360) 697-8269
 www.cityofpoulsbo.com | plan&econ@cityofpoulsbo.com

For complete information on exemption submittal and review requirements, refer to the [Shoreline Letter of Exemption Handout](#) and [Chapter 16.09](#) of the Poulsbo Municipal Code (PMC).

PROJECT	
Application Date:	Tax Assessor's ID:
Project Name:	Site Address:
Shoreline Environment: <input type="checkbox"/> Shoreline Residential 1 (SR-1) <input type="checkbox"/> Shoreline Residential 2 (SR-2) <input type="checkbox"/> High Intensity (HI) <input type="checkbox"/> Urban Conservancy (UC) <input type="checkbox"/> Natural (N) <input type="checkbox"/> Aquatic (A)	Does the property contain any of the following critical areas ? <input type="checkbox"/> Wetlands <input type="checkbox"/> Fish and Wildlife Habitat Areas <input type="checkbox"/> Geologically Hazardous Areas <input type="checkbox"/> Critical Aquifer Recharge Areas <input type="checkbox"/> Frequently Flooded Areas
Total cost or fair market value of the project (whichever is higher):	
Have you consulted with City staff regarding the project? If so, who?	
PROPERTY OWNER	
Name:	Phone:
Address:	
Email:	
APPLICANT/AGENT NAME (IF DIFFERENT):	
Name:	Phone:
Address:	
Email:	
SUBMITTAL REQUIREMENTS	
<input type="checkbox"/> Shoreline Exemption Fee: \$160 <input type="checkbox"/> Vicinity map <input type="checkbox"/> Site plan, including: property lines and lot dimensions, ordinary high water mark of water body located adjacent to or within boundary of the project (this may be an approximate location), location of existing and proposed structures and improvements, dimensions of all setbacks (distance from wall of existing and proposed structures to property lines or shoreline buffer), location of any proposed docks/ramps and bulkheads, all easements, and north arrow. <input type="checkbox"/> Detailed project narrative/description <input type="checkbox"/> One electronic version of all submitted materials in PDF format (CD, thumb drive, or via e-mail) <input type="checkbox"/> Notarized property owner and/or applicant signature page (attached) <input type="checkbox"/> Any other information/documents:	



SIGNATURES:

I, the undersigned, state that, to the best of my knowledge, all the information provided in this application is true and complete. It is understood that the City of Poulsbo may nullify any decision made in reliance upon information given on this application form should there be any willful misrepresentation or willful lack of full disclosure on my part.

I hereby authorize City of Poulsbo representative(s) to inspect the subject property Monday-Friday between the hours of 8:00 am and 4:00 pm during this permit application process.

Signature of Applicant/Agent

Print Name of Applicant/Agent

STATE OF WASHINGTON)) SS
COUNTY OF KITSAP)

On this _____ day of _____, 20_____ before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared _____ to me known to be the individual(s) described in and who executed the within and foregoing instrument, and acknowledged that he/she/they signed the same as his/her/their free and voluntary act and deed, for the uses and purposes therein mentioned, and on oath stated that he/she/they was (were) authorized to execute said instrument.

WITNESS my hand and official seal this _____ day of _____, 20_____.

NOTARY PUBLIC in and for the
State of Washington Residing at

Commission Expires _____

PROPERTY OWNER'S SIGNATURE (if other than applicant/agent):

I, the undersigned, state that, to the best of my knowledge, all the information provided for this application is true and complete. It is understood that the City of Poulsbo may nullify any decision made in reliance upon information given on this application form should there be any willful misrepresentation or willful lack of full disclosure on my part.

Signature of Property Owner

Print Name of Owner

STATE OF WASHINGTON)) SS
COUNTY OF KITSAP)

On this _____ day of _____, 20____ before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared _____ to me known to be the individual(s) described in and who executed the within and foregoing instrument, and acknowledged that he/she/they signed the same as his/her/their free and voluntary act and deed, for the uses and purposes therein mentioned, and on oath stated that he/she/they was (were) authorized to execute said instrument.

WITNESS my hand and official seal this _____ day of _____, 20_____.

NOTARY PUBLIC in and for the
State of Washington Residing at

Commission Expires _____