

POST DECISION MODIFICATION

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 post permit/decision modifications, refer to Section 19.90.040 of the Poulsbo Municipal Code (PMC). Please note that the Planning and Economic Development Director, with consultation with other development review departments, may determine that the proposed post decision modification to an approved permit will require review as a new application rather than as a modification if it exceeds the provisions of PMC 19.90.040.

PROJECT		
Original Permit Number:	Tax Assessor's ID:	
Project Name:	Site Address:	
PROPERTY OWNER		
Name:	Phone:	
Address:		
Email:		
APPLICANT/AGENT NAME (IF DIFFERENT):		
Name:	Phone:	
Address:		
Email:		
MODIFICATION		
The modification includes the following changes (check all that apply):		
☐ Building footprint/square footage ☐ Building height ☐ Approved façade materials/color ☐ Landscaping ☐ Conditions of approval Description of Modification (include any supporting	Street design Parking areas Property lines, lot lines, or easements Technical engineering items or design Open space or recreation areas g docs if applicable):	
SUBMITTAL REQUIREMENTS		
Application Fees and Deposits		
Site plan and/or elevations clearly showing requested modifications.		
One electronic version of all submitted materials in PDF format (CD, thumb drive, or via e-mail).		
Notarized property owner and/or applicant signature page (attached).		
Any other information/documents:		



SIGNATURES:

provided in this application is true and complete	the best of my knowledge, all the information e. It is understood that the City of Poulsbo may formation given on this application form should lack of full disclosure on my part.
I hereby authorize City of Poulsb property Monday-Friday between the hours of 8 application process.	oo representative(s) to inspect the subject 3:00 am and 4:00 pm during this permit
	Signature of Applicant/Agent
	Print Name of Applicant/Agent
STATE OF WASHINGTON)) SS COUNTY OF KITSAP)	
and for the State of Washington, duly commission described in and who executed the within and he/she/they signed the same as his/her/their from the same as	before me, the undersigned, a Notary Public in oned and sworn, personally appeared to me known to be the individual(s) d foregoing instrument, and acknowledged that ee and voluntary act and deed, for the uses and that he/she/they was (were) authorized to execute
WITNESS my hand and official seal this 20	sday of,
	NOTARY PUBLIC in and for the State of Washington Residing at
	Commission Expires

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

nullify any decision made in reliance upon informathere be any willful misrepresentation or willful lac	
	Signature of Property Owner
	Print Name of Owner
STATE OF WASHINGTON)) SS COUNTY OF KITSAP	
On this day of, 20 be and for the State of Washington, duly commissioned described in and who executed the within and for the/she/they signed the same as his/her/their free a purposes therein mentioned, and on oath stated that said instrument. WITNESS my hand and official seal this	to me known to be the individual(s) oregoing instrument, and acknowledged that and voluntary act and deed, for the uses and the/she/they was (were) authorized to execute
	NOTARY PUBLIC in and for the State of Washington Residing at
	Commission Expires