



Pre-Application, Pre-App Waiver Application (PIR)

415 W 6th ST ~ Vancouver, WA 98660, P.O. Box 1995 ~ Vancouver, WA 98668, Phone (360) 487-7800

Email completed application to eplans@cityofvancouver.us

<input type="checkbox"/> PRE-APPLICATION	<input type="checkbox"/> PRE-APPLICATION WAIVER	<input type="checkbox"/> SECOND PRE-APP (within 1 year)
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Note: Pre-application conferences are held virtually when requested. Whether a pre-application conference is held or not, the pre-application reports will be available in the City's ePlans system the day before the pre-application is scheduled to be held.

Request a virtual (Microsoft Teams) pre-application conference YES NO

OCCUPANCY TYPE

<input type="checkbox"/> Single-Family	<input type="checkbox"/> Commercial	<input type="checkbox"/> Multi-family	<input type="checkbox"/> Mixed Use <small>(commercial with multi-family)</small>	<input type="checkbox"/> Industrial	<input type="checkbox"/> Critical Area
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ADDITIONAL INFORMATION

Lot Acreage/Square footage:	Zoning:
Proposed # of lots:	Proposed Multi-family Dwelling Units:
Infill Project (utilizing infill ordinance): <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, tier level: <input type="checkbox"/> Tier I <input type="checkbox"/> Tier II	

PROJECT SITE INFORMATION AND LOCATION

Proposed project name:	
Project site address:	Parcel #(s):

PROJECT DESCRIPTION

(Briefly describe the proposed project. Provide a more detailed description in the project narrative)

PRIMARY APPLICANT	CONTACT
Business Name:	Business Name:
Contact Name:	Contact Name:
Address:	Address:
City/State/Zip:	City/State/Zip:
Phone:	Phone:
Email:	Email:

*ELECTRONIC PLANS SUBMITTER (required) <small>(responsible for ePlans uploading and correspondence)</small>	OWNER <small>(attached additional sheets for multiple owners)</small>
Name:	Name:
Address:	Address:
City/State/Zip:	City/State/Zip:
Email (required):	Email:
Phone:	Phone:

ONLINE PAYMENT

Existing ePermits User Name: [Request an ePermits Account](#)

REQUIRED SIGNATURES

As evidenced by my signature below, I/we agree that City of Vancouver staff has my/our full permission to enter upon the subject property at any reasonable time to consider the merits of the application, to take photographs and to post public notices.

Applicant Signature:	Date:
Property Owner Signature:	Date:

QUESTIONS FOR COMMERCIAL, INDUSTRIAL & MULTI-FAMILY PROJECTS

Do you anticipate managing/storing any chemicals, petroleum products or automotive fluids on the site? If yes, please describe:

Will this facility discharge process wastewater to the sanitary sewer system? If so, please describe:

PROJECT QUESTIONS

Please list specific questions and/or issues you wish to have answered at the Pre-application Conference:

1.

2.

3.

PRE-APPLICATION SUBMITTAL REQUIREMENTS

Fee

Signed and Dated Application Form

Narrative - Complete and accurate depiction of the proposal.

Preliminary Site Plan or Plat drawn to-scale and legible. The plan shall include sufficient information to allow city departments to make an adequate determination as to the potential impacts and development standards required for the proposal and respond accordingly.

PRE-APPLICATION WAIVER REQUEST SUBMITTAL REQUIREMENTS

Fee

Signed and Dated Application Form

A written narrative justifying the request for pre-application waiver.