# SHORT PLAT Information



3609 Market Place W, Suite 200 University Place, WA 98466-4488 PH: 253.566.5656

This form provides information and an explanation of the procedures of a Short Plat. If you have any questions, contact the Planning and Development Services Department at 253.566.5656.

A Short Subdivision (or Short Plat) is the creation of four (4) or fewer building lots. Short Plat applications are reviewed administratively and **do not** require a public hearing.

### Pre-Application/Technical Review Meeting (OPTIONAL)

The City offers an opportunity for applicants to meet with reviewing staff prior to submittal of the Short Plat application. There is no charge for the Technical Review Committee (TRC) meeting. If you would like to schedule a meeting, applications are available at the Permit Counter. Meetings are generally scheduled on Wednesday afternoons and for the week following the request.

#### <u>Application Submittal and Review</u>

Please fill out the application completely and submit all documents required on the *Application Checklist*.

The initial review will be the "Determination of Completeness." The allowable time to complete this review is 28 days. Generally, it does not take the full 28 days, however, projects are worked in the order received. If the documentation received is not sufficient, you will receive a "Notice of Incomplete Application" stating what materials or information must be submitted to continue the review of your project.

The next step in the process is the notification of neighboring property owners. A "Notice of Application" is sent to property owners within a 300′ but not less than 2 parcels deep radius. There is a two-week public comment period indicated on this notice.

The project is then routed to the various departments and agencies for their review and comments. Two weeks are allowed to receive their comments or conditions. The comments are then compiled and the short plat drawings redlined and returned to the applicant for corrections.

Once all corrections are made and approved the applicant can have the final plan prepared for recording. The property owners must sign the plan (these signatures must be notarized). The applicant is responsible for obtaining the signatures from the Pierce County Assessor/Treasurer and Pierce County Sewer Utility before returning plan to the City for signatures. Staff will obtain required City signatures prior to recording. After all required signatures are obtained, the applicant must pick up and record the plan at the Pierce County Auditor and provide two (2) recorded copies to the City.

Page 1 of 1 Updated: 8/2021

# SHORT PLAT Checklist



3609 Market Place W, Suite 200 University Place, WA 98466-4488 PH: 253.566.5656

This is a checklist of materials required for a Short Plat. This checklist is provided to assist you in submitting a complete application. If you have any questions, contact the Planning and Development Services Department at 253.566.5656.

#### RETURN THIS CHECKLIST WITH YOUR APPLICATION

## The Short Plat drawings shall include:

- O Survey map with original surveyor's signature and date. The map must be a 18" x 24" scaled ink drawing and must include the following:
  - " Legal Description
  - " Free Consent Statement(s)
  - " Signature Blocks
  - " Zoning Designation and/or Land Use File Number
- O **Existing** (old) lot lines including:
  - " Assessor's Parcel Numbers
  - Dimensions and bearings of all lot lines and identification of existing property corners
  - All existing improvements and structures with addresses
- O **Proposed** (new) lot lines including:
  - "Total lot, tract, or parcel sizes in square feet (lot size includes area of easement(s))
  - " Lot width
  - " New lot numbers (e.g. Lot "1")
- O Dimensions of **existing** and **proposed** utilities. Utility information must include:
  - Location, size, and material of utility pipes for sewer systems and/or location of drain fields and septic systems
  - Drainage systems showing how water is to be retained on site or detained/conveyed off site (wet ponds, detention facilities, percolation pits, swales and pipes)
  - " Location of nearest fire hydrants or sprinkling needed for fire protection
- O Width and names of existing adjacent public right-of-way(s)

Page 1 of 2 Updated: 8/2021

O **Existing** and **proposed** access roads, access driveways, including locations, grades (slopes), widths and lengths. Also include turnarounds (where necessary) serving the site. Clearly identify what is proposed and what is existing. Provide documentation of existing easements.

#### **Public Notice:**

A Public Notice Sign must be posted on the site. Applicant will be notified when to request the public notice sign from the Planning and Development Services Department and the required posting time.

Fees must be paid at the time of submittal. The table below indicates the number of sets required at the time of submittal:

# OF SETS REQUIRED	DESCRIPTION
1	Short Plat Application
1	Short Plat Drawings
1	Vicinity Map identifying proposed subdivision, including the nearest cross streets and a North arrow
1	SEPA Checklist (if required)
1	Title Report (must be dated within 30 days of application)
1	Two (2) stamped copies of Lot Closure Report
1	Tree Survey (required if removing more than 5 trees): Location of all trees within the subdivision that are 6 caliper inches and above, measured 4'6" from the ground. Indicate all trees that are to be retained and those to be removed.
1	Landscape Plans
1	Affidavit of Ownership
1	Water Availability Letter from Tacoma Water
1	Verification of Pierce County Assessor review submittal (copy of receipt)
1	Verification of Pierce County Utilities Short Plat review submittal (copy of receipt and application)
1	Health Department Application – Reviewed and Approved (must turn in 8½" x 14" application stamped as received by TPCHD along with receipt. Take 2 copies to the Health Department so you can take one away with you)

Page 2 of 2 Updated: 8/2021

# SHORT PLAT Application



3609 Market Place W, Suite 200 University Place, WA 98466-4488 PH: 253.566.5656

Please type or print clearly. Incomplete information may delay the project approval.

APPLICANT:		Phone:		Fax:	
Address (Street, City, State, Zip):	E-Mail Ad	dress:			
PROPERTY OWNER:	Phone:		Fax:		
Address (Street, City, State, Zip):	E-Mail Ad	E-Mail Address:			
AGENT:	Phone:	Phone: Fax:			
Address (Street, City, State, Zip):		E-Mail Ad	dress:	<u> </u>	
PROJECT NAME & TYPE:		•			
Project Address:		Parcel Number	er(s):		
Zoning:	Current Use:				
Area/Acreage:	Township:	Range:	Section:		Quarter Section:
	Township.	11901	Section.		Quartor Gootionii
Has this project been reviewed at a T					☐ Yes ☐ No
Has this project been reviewed at a T	echnical Review	Committee (TRC)	) Meeting?		
_	echnical Review	Committee (TRC)	) Meeting?	ED)	
Has this project been reviewed at a T	echnical Review	Committee (TRC)	) Meeting?	ED)	
Has this project been reviewed at a T	echnical Review	Committee (TRC)	) Meeting?	<b>ED</b> )	
Has this project been reviewed at a T	echnical Review	Committee (TRC)	) Meeting?	<b>ED</b> )	
Has this project been reviewed at a T	echnical Review	Committee (TRC)	) Meeting?	<b>ED</b> )	
Has this project been reviewed at a T	echnical Review	Committee (TRC)	) Meeting?	<b>≡</b> D)	
Has this project been reviewed at a T	echnical Review	Committee (TRC)	) Meeting?	<b>ED</b> )	
Has this project been reviewed at a T	echnical Review	Committee (TRC)	) Meeting?	<b>ED)</b>	

Page 1 of 3 Updated: 8/2021

PROPOSED LOTS:	<b>\\1</b> "	<b>\\2</b> "	v	<b>'3</b> "	<b>\\4''</b>
				3"	4
Zoning District					
Existing Use					
Proposed Use					
Proposed Lot					
PLAT DETAILS:					
Has the property bee	n proviously pl	atted or short	platted? $\Box$ Y	es □ No	
			•	es 🗆 NO	
If so, within the pas		☐ Yes ☐ No			
Do you own any cont	iguous lots? If	so, describe:			
Are you aware of any	property encre	pachments? I	f so, describe:		
How will access be p	rovided?	L	ength of Public	Le	ngth of Private
(Private, Public, or b			Street:		reet:
What is the steepest	slope on the pr	operty?			
Approximately how r	many 6" diamet	er or larger tr	ees on the prope	erty will be	e removed?
Indicate if any of the	following appl	y to the prope	rty. If so, descr	ibe:	
Wet areas?	Descr	ibe:			
Springs?	Descr	ibe:			
Creeks?	Descr	ibe:			
Within 200' of Shore	line? Descr	ibe:			
Within Wetland Buffe	er? Descr	ibe:			

Page 2 of 3 Updated: 8/2021

Describe:

**Describe:** 

Within Creek Buffer?

Flood Plain?

## **UTILITIES AND SERVICES PROVIDERS:**

<b></b>	<u> </u>		
SOURCE OF WATER	SOURCE OF POWER		
NAME:	NAME:		
ADDREGG:	ADDDECC:		
ADDRESS:	ADDRESS:		
CTW/ CT DIGDOGAL			
SEWAGE DISPOSAL	TELEPHONE		
NAME.	MANAP.		
NAME:	NAME:		
ADDRESS:	ADDRESS:		
ADDRESS.	ADDRESS.		
NATURAL GAS	CABLE TELEVISION		
ITATURAL GAS	CADLL ILLLVISION		
NAME:	NAME:		
MAPLE	NAPIE		
ADDRESS:	ADDRESS:		
	-		
FIRE	SCHOOL		
NAME:	NAME:		
ADDRESS:	ADDRESS:		
I hereby certify under penalty of perjury under the la			
	evidence herewith submitted are in all respects and to		
the best of my knowledge and belief, true and complete. I understand that the filing fee accompanying			
this application is not refundable, and is only for the	purposes of defraying the normal administrative		
this application is not refundable, and is only for the expenses of processing the application, and that the	purposes of defraying the normal administrative		
this application is not refundable, and is only for the	purposes of defraying the normal administrative		
this application is not refundable, and is only for the expenses of processing the application, and that the	purposes of defraying the normal administrative		
this application is not refundable, and is only for the expenses of processing the application, and that the issuance of the permit requested in this application.	purposes of defraying the normal administrative payment of said fees does not result in automatic		
this application is not refundable, and is only for the expenses of processing the application, and that the issuance of the permit requested in this application.	purposes of defraying the normal administrative payment of said fees does not result in automatic		

Page 3 of 3 Updated: 8/2021

# SHORT PLAT Owner Affidavit



3609 Market Place W, Suite 200 University Place, WA 98466-4488 PH: 253.566.5656

#### **DECLARATION:**

Know all men by these presents that we, the undersigned, owner(s) in fee simple and/or contract purchaser(s) of the land herein described do hereby make an application for a short subdivision thereof pursuant to RCW 58.17.060 and acknowledge that said subdivision shall not be further divided in any manner within a period of five years from date of record, without the filing of a final plat. The undersigned further declare that the attached map is the graphic representation of said short plat and the same is made with the free consent and in accordance with the desires of the owner(s). In witness whereof we have set with our hands and seals.

Name:	Signature:	
Name:	Signature:	
Name:	Signature:	
Name:	Signature:	
ACKNOWLEDGMENT:		
STATE OF WASHINGTON )		
COUNTY OF) ss		
On this day appeared before me		(owner), to me
known as the individual(s) described in	and who executed the w	vithin and foregoing instrument,
and acknowledge that(he/she) s	signed the same as	(his/her) free and
voluntary act and deed, for the uses and	d purposes therein ment	ioned.
GIVEN under my hand and official this _	day of	·
Notary Public in and for the State of W	/ashington	
Residing at		
My Commission Expires		

Page 1 of 1 Updated: 8/2021