

## City of Sumner SEPA

Application (Please fill out ALL fields unless otherwise noted)

SUMNER File Number:				(253)299-5530 www.sumnerwa.gov	
Site/Project Address (if available):		Parcel #:	Parcel #:		
Owner: Phone:		Email:	Email:		
Owner Address:		City:	State:	Zip:	
Surveyor/Engineer/Contractor:		Phone:	Contractor Lic	ense Number:	
Address:	Email:	City:	State:	Zip:	
Contact Person:	Phone:	Fax:			
Contact Address:	Email:	City:	State:	Zip:	
4 copies of the Required featured featu	cation Form and Checklist the completed SEPA Checklist e (Please consult the Permit Sprawing (To scale including Alstamped, and dated by a liceriptions of existing and proposed and site zoning e dimensions and square footage lic and private roads, driveway I proposed fire hydrant locations an-made features; drainage dited ding locations and setbacks fro	LL items below) nsed surveyor) d lots  ge of new lots access and all easements s or distance to the nearest ches, railroad tracks, etc. om property lines (if any) ed to each lot ng sanitary sewer, storm dra elineated (if any) such as we e-Application review comm	hydrants ainage, and water etlands, rivers, strea nents (Wetland rep	services ams, slopes oorts, etc)	
I, THE UNDERSIGNED, SWEAR UND BEST OF MY KNOWLEDGE. I ALSO OF FULL DISCLOSURE ON MY PAR' ISSUE IN RELIANCE UPON THIS CH	UNDERSTAND THAT, SHOULD T F, THE AGENCY MAY WITHDRA	THERE BE ANY WILLFUL M	ISREPRESENTATIO	N OR WILLFUL LACK	
**BY LEAVING THE CONTRACTOR SUBCONTRACTORS) WILL NOT BE					
SIGNATURE OF OWNER / AUTH	ORIZED AGENT	PRINTED N		ATE:/	