



TOWN OF LA CONNER

CHANGE OF USE PERMIT APPLICATION

CLASS I

Date of Application _____

File # _____

Site Address _____

Tax Parcel # _____

PROPERTY OWNER:

NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____ EMAIL _____

Legal Description of Property _____

Business Location Area (*in square feet*) _____

Zoning Classification:

- ☐ Residential
- ☐ Commercial
- ☐ Historic

- ☐ Industrial
- ☐ Public

Current Use and Occupancy Rating (*see Uniform Building Code*): _____

Proposed Change of Use and Occupancy _____

Adjacent Land Use _____

Will there be any structural changes? _____ (*if yes, a Building Permit is required*)

Approximate Project Cost _____

An incomplete application may delay the processing time for your permit

Property Owner Signature _____

Date _____

OFFICE USE ONLY

Permit fee paid _____ Date _____

☐ Approved

☐ Denied Reason for denial _____

Planning Director _____ Date _____