



CITY OF SNOHOMISH

116 UNION AVENUE · SNOHOMISH, WASHINGTON 98290 · (360) 568-3115 · WWW.SNOHOMISHWA.GOV

CHANGE OF USE APPLICATION

Date:	File #:
Site Address:	
Zoning:	Property Tax #(s):
CHANGE OF USE FEE	

<input type="checkbox"/> \$50.00	Receipt #:	Staff Intake:
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BUSINESS OWNER

Name:
Address:
City/State/Zip:
Phone:
Cell Phone:
Alternate Phone:
E-mail:

PROPERTY OWNER

Name:
Address:
City/State/Zip:
Phone:
Cell Phone:
Alternate Phone:
E-mail:

QUESTIONS

Business Name:			
Size of tenant space (Sq ft):			
Previous use of building or tenant space (if applicable):			
Provide a detailed description of the proposed use:			
Is there an existing fire alarm system?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NOT SURE
Is there an existing fire sprinkler system?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NOT SURE

If manufacturing, storage and/or production of items are part of the proposed use, please state in detail:
(attach separate sheet if necessary)

The process used in the manufacturing and/or production:	<input type="checkbox"/> N/A
Items that are being manufactured, stored and/or produced and their commodity classification:	<input type="checkbox"/> N/A

Have you applied for a City of Snohomish Business License?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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PLEASE SIGN THE BACK SIDE OF THIS FORM



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BUSINESS OWNERS: By your signature below, you hereby certify under penalty of perjury of the laws of the State of Washington that the information submitted is true and correct and that you are authorized by the property owner(s) to act on their behalf

PROPERTY OWNERS: By your signature below, you hereby certify under penalty of perjury of the laws of the State of Washington that you have authorized the above business owner to make application and act on your behalf for this application

Signature of Business Owner

Printed Name

Date

Signature of Property Owner

Printed Name

Date

FOR CITY USE ONLY INSPECTIONS / APPROVALS

PLANNING:

Approved Not Approved N/A

Signature: _____ Date: _____

Comments: _____

BUILDING / FIRE:

Approved Not Approved N/A

Signature: _____ Date: _____

Comments: _____

ENGINEERING / PUBLIC WORKS:

Approved Not Approved N/A

Signature: _____ Date: _____

Comments: _____

OTHER _____:

Approved Not Approved N/A

Signature: _____ Date: _____

Comments: _____

Change of Use
Issue Date:

C of O
Issue Date: