



FRANKLIN COUNTY

PLANNING AND BUILDING DEPARTMENT

CONDITIONAL USE PERMIT (CUP) APPLICATION PACKET

FREQUENTLY ASKED QUESTIONS:

What is a Conditional Use Permit?

A Conditional Use Permit (also known as a special use permit) is a zoning exception, which allows the property owner use of his or her land in a way not otherwise approved within the particular zoning district.

The Conditional Use Permit process is designed to allow flexibility within the zoning laws. A zoning ordinance cannot account for every situation, and exceptions such as the conditional use permit gives the County discretion to allow uses otherwise prohibited in the specific district for the benefit of the neighborhood or area.

Who can apply for a Conditional Use Permit?

Anyone can apply for a Conditional Use Permit. However, a property owner should only apply for a Conditional Use Permit regarding to uses such as large-scale accessory buildings, accessory buildings in front yard areas, churches, schools, daycare centers, cell towers, large animal operations, and other non-permitted primary or accessory uses.

It is highly recommended that you call the Planning and Building Department at 509-545-3521, visit our office at 502 W. Boeing Street, Pasco, WA 99301 or view Title 17 (Zoning) of the Franklin County Code on our website (https://library.municode.com/wa/franklin_county/codes/code) to determine if what you are proposing requires a CUP.

How do I apply for a Conditional Use Permit?

A pre-application meeting with the Planning and Building Department staff is encouraged for all Conditional Use Permit applications. Applications are submitted to the Planning and Building Department. The following minimum requirements shall be submitted:

- 1) Completed Conditional Use Permit Application Form;
- 2) Completed General Land Use Development Application;
- 3) Completed & Signed SEPA Checklist;
- 4) Site Plan;
- 5) Detailed Narrative, including the following:
 - a. Written description explaining the present use of the land/structures,
 - b. Detailed description of the proposed conditional use,
 - c. Description of any zoning violations, including home occupation violations, and
 - d. Other pertinent information as deemed necessary by Staff.
- 6) Any recorded Covenants, Conditions, or Restriction (CC&R) or latecomers agreements attached to the property;



FRANKLIN COUNTY

PLANNING AND BUILDING DEPARTMENT

- 7) If directed by Staff, the following will need to be submitted:
 - a. Written approval letter from the Benton-Franklin Health District.
 - b. Building plans detailing the proposed structure(s).

What happens after I apply?

During the time prior to the public hearing, the Planning and Building Department staff will notify in writing (copy of public hearing notice) all the property owners of record within 500 feet of your property (if within an Urban Growth Boundary) or 1 mile of your property (if located outside an Urban Growth Boundary).

Additionally, the staff will conduct a review of your request and will do the following:

- 1) Establish a hearing date for the request;
- 2) Send notification of the hearing to local newspapers;
- 3) Send notification of the request to applicable local, state, and/or federal agencies, including affected Tribes for comments;
- 4) Send notification of the request to neighboring property owners for comments; and
- 5) Compile public and agency comments to help develop a Staff report for the hearing.

What happens at the public hearing?

The applicant or representative is strongly encouraged to be present to discuss and answer any questions the Planning Commission or public may have. Anyone who wants to testify for, against, or is neutral about the request will be allowed to do so.

When do I find out if my permit was approved or denied?

At conclusion of this public hearing, the Planning Commission will make a recommendation to the Board of County Commissioners to approve, approve with conditions, or deny the CUP request.

This recommendation can be appealed within ten (10) calendar days prior to the closed-record hearing before the Board of County Commissioners for a final decision.

For additional information regarding the timely filing of an appeal, closed record hearings, and Commissioner review and decision, please refer to Chapter 17.82 of the Franklin County Code or contact the Planning and Building Department for details and specifications.

*- Keep this section for your records -
- Return the following completed pages with your application -*



FRANKLIN COUNTY

PLANNING AND BUILDING DEPARTMENT

CONDITIONAL USE PERMIT (CUP) APPLICATION REQUIREMENTS

Submittal Checklist:

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Completed Conditional Use Permit Application Information Form |
| <input type="checkbox"/> | Completed General Land Use Development Application |
| <input type="checkbox"/> | Completed & Signed SEPA Checklist
Provided by the Planning Department or visit https://www.franklincountywa.gov/263/Application-Forms to download. <i>Part D does not need to be completed for this application.</i> |
| <input type="checkbox"/> | Detailed Narrative of Proposed Conditional Use
Please provide the following on a separate sheet(s) of paper: <ul style="list-style-type: none">• Written description explaining the present use of the land/structures.• Detailed description of the proposed use or request.• Description of any zoning violations, including violations of home occupations.• Other pertinent information as deemed necessary by Planning Staff. |
| <input type="checkbox"/> | Site Plan
Shall be drawn neatly and to scale, that includes: <ul style="list-style-type: none">• North arrow• Tax parcel number• Scale• Exterior property lines• Distance from existing and/or proposed use to the following:<ul style="list-style-type: none">○ Exterior property lines○ Existing structures○ Proposed structures○ Existing or proposed septic system• Any adjacent public street or alley rights-of-way• Existing easements, including utility and/or access• Existing and/or proposed buildings and other structures• Existing and/or proposed retaining walls or fences, please indicate:<ul style="list-style-type: none">○ Location of fence or retaining wall○ Type of material○ The height of the fence, including any barbed wire○ If the fencing provides visual screening• Existing and/or proposed points of ingress and egress, driveways, and circulation pattern.• The location of existing and/or proposed parking areas with each parking space shown and surface type indicated and lighting noted.• Existing and/or proposed open spaces and landscape areas.• Location of well or any public water systems within 100 feet of the subject property or within a 100-foot well protection zone. |



FRANKLIN COUNTY

PLANNING AND BUILDING DEPARTMENT

- The distance from any existing and/or proposed structures within the well protection zone and sewerage facilities.
- Location of any existing and/or proposed drain field area, reserve area, and septic tank area and distances to structures and property lines
- Existing or proposed storm water drainage system
- Existing or proposed sidewalks and streetlights
- Existing or proposed fire protection devices, with sufficient water storage and flows.
- Facilities or improvements to address compatibility with adjacent dissimilar land uses.
- Location of structures on the adjoining lots, which may cause compatibility issues.
- All major man-made and natural physical features on or adjacent to the site, such as:
 - Streets
 - Railroads
 - Irrigation canals and/or ponds
 - Buried irrigation lines
 - Streams, creeks, drainage ditches
 - Hills, depressions, steep slopes
 - Lakes, floodplains, floodways, the 100-year base flood elevations
 - Shoreline area
- Any proposed grading, and the new contours as they affect lot layout, streets, and drainage ways

Attach Property Information (*i.e. recorded deed*)
 If any recorded Covenants, Conditions and Restrictions (CC&R), latecomers agreements, or deed restrictions pertaining to or affecting the property.

If Directed by Staff
Obtain a written approval letter from the Benton-Franklin Health District
 Located at 7102 W. Okanogan Place, Kennewick, WA – (509) 460-4200

If Directed by Staff
One (1) set of building plans
 The construction/building plans can be a preliminary set and do not have to be official.

- Minor changes can be made to the plans after approval of the Conditional Use Permit.
- Major changes may require a new/amended Conditional Use Permit.

Application Fee: \$ 400.00

SEPA Checklist Fee: \$ 150.00

Variance Report Fee: \$ 80.00

Total Fees: \$ 630.00

All fees do not include a 3% processing fee if paying by debit or credit card.

Payment shall be made to the Franklin County Planning & Building Dept.

LAND USE – ZONING CODE – BUILDING CODE – FIRE CODE – CODE ENFORCEMENT – BUSINESS REGISTRATION

502 W. BOEING ST. - PASCO, WA 99301 - [509] 545-3521 - FAX [509] 546-3367 - BURN LINE [509] 545-3586 - BLDG. INSP. LINE [509] 545-3522

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FRANKLIN COUNTY

PLANNING AND BUILDING DEPARTMENT

Will the project be conducted entirely within a structure? Yes No

- 1) If no, describe the outdoor activities (i.e. outdoor eating, playground, park)

- 2) What is the approximate square footage, or seating capacity of your outdoor use area(s)?

- 3) What type of noises will the outdoor use generate? (i.e. music, machinery, vehicles)

Proposed hours of operation/days of the week: (indicate months, if seasonal)

Proposed measures to ensure compatibility with permitted uses in the surrounding zone?

(Ex. fences, landscape buffers, berms, etc.)

I, the undersigned, hereby authorize the filing of this application and certify under penalty of perjury that the information contained in this application is complete and correct to the best of my knowledge. Further, I hereby grant Franklin County staff or representatives to enter my property during the course of this review to inspect my property as needed.

- This authorizes the designated Applicant’s representative (if applicable) to act on behalf of the applicant for the processing of this request.**

Property Owner (Signature)

Applicant/Representative (Signature)

Property Owner (Print Name)

Applicant/Representative (Print Name)

Date signed

Date signed



FRANKLIN COUNTY

PLANNING AND BUILDING DEPARTMENT

GENERAL LAND USE DEVELOPMENT APPLICATION

FOR STAFF USE ONLY	FILE #: _____	<i>S T A M P H E R E :</i>
	Total Fees: _____	Date deemed complete: _____
	Receipt #: _____	Pre-App Meeting Date: _____
	Reviewed By: _____	Hearing Date: _____

CHECK ALL THAT APPLY AND ATTACH SUPPLEMENTAL FORM(S):	<input type="checkbox"/> Appeal (File # of item appealed: _____)	<input type="checkbox"/> SEPA – Environmental Checklist
	<input type="checkbox"/> Binding Site Plan (BSP)	<input type="checkbox"/> Shoreline (SH) – Conditional Use Permit
	<input type="checkbox"/> Boundary Line Adjustment (BLA)	<input type="checkbox"/> Shoreline (SH) – Exemption
	<input type="checkbox"/> Comprehensive Plan Amendment (CPA)	<input type="checkbox"/> Shoreline (SH) – Non-Conforming
	<input type="checkbox"/> Conditional Use Permit (CUP)	<input type="checkbox"/> Shoreline (SH) – Substantial Development
	<input type="checkbox"/> Determination – Administrative	<input type="checkbox"/> Shoreline (SH) – Variance
	<input type="checkbox"/> Determination – Critical Areas	<input type="checkbox"/> Short Plat (SP)
	<input type="checkbox"/> Determination – Non-Conforming Use	<input type="checkbox"/> Subdivision/Preliminary Long Plat (SUB)
	<input type="checkbox"/> Determination – Reasonable Use	<input type="checkbox"/> Tax Parcel Separation (TPS)
	<input type="checkbox"/> Determination – Zoning Interpretation	<input type="checkbox"/> Temporary Use Permit
	<input type="checkbox"/> Home Occupation	<input type="checkbox"/> Vacation of Easement (VOE) / Alteration
	<input type="checkbox"/> H2A Farm Worker Housing (Zoning Review)	<input type="checkbox"/> Variance
	<input type="checkbox"/> Planned Unit Development (PUD)	<input type="checkbox"/> Zone Change/Rezone (ZC)
	<input type="checkbox"/> Other: _____	

CONTACT INFORMATION (Please provide all necessary information and checkmark the primary contact)

<input type="checkbox"/>	<u>Property Owner</u>	Mailing Address: _____
	Name: _____	_____
	Phone Number: _____	_____
	E-mail Address: _____	
<input type="checkbox"/>	<u>Applicant/Agent/Contractor</u> (if different)	Phone Number: _____
	Business Name: _____	Mailing Address: _____
	Contact Name: _____	_____
	E-mail Address: _____	
<input type="checkbox"/>	<u>Surveyor / Engineer</u>	Phone Number: _____
	Business Name: _____	Mailing Address: _____
	Contact Name: _____	_____
	E-mail Address: _____	



FRANKLIN COUNTY

PLANNING AND BUILDING DEPARTMENT

PROPERTY INFORMATION

Parcel Number(s) (9-digit tax number):

Legal Description of Property:

Site Address: (describe location if no address is assigned)

BRIEF DESCRIPTION OF PROJECT OR REQUEST

[Empty box for project description]

- All appropriate fees must accompany this application. Fees are non-refundable and subject to change. Please contact the Planning Department for current pricing of fees.
- This application, including attachments, must be completed in its entirety for all items applicable to your project.
- Supplemental information is generally required for land use approvals. Please ensure that all required information is submitted along with this application form.
- If the property is owned by a trust, corporation, or LLC, please attach documentation showing that the person signing as the “owner” has the authority to sign on behalf of the trust, corporation, or LLC. If there are multiple owners, provide an attachment in the same format and with the same declarations.

I, the undersigned, hereby authorize the filing of this application and certify under penalty of perjury that the information contained in this application is complete and correct to the best of my knowledge. Further, I hereby grant Franklin County staff or representatives to enter my property during the course of this review to inspect my property as needed.

I understand that any information submitted to the Franklin County Planning and Building Department is subject to public records disclosure laws for the State of Washington (RCW Chapter 42.17) and all other applicable laws that may require the release of the documents to the public.

This authorizes the designated Applicant’s representative (if applicable) to act on behalf of the applicant for the processing of this request.

Property Owner (Signature)

Date

Applicant/Representative (Signature)

Date

Property Owner (Print Name)

Date

Applicant/Representative (Print Name)

Date