



MINERAL EXTRACTION INFORMATION

What is Mineral Extraction?

The mining or extraction of rock, stone, gravel, sand, earth, or other minerals.

The Process

GMA Agriculture Zone

A Mineral Extraction Permit normally involves having a pre-application meeting with County Planning Staff to discuss the application, answer questions, and resolve any issues at the front end of the process. Next, a completed Mineral Extraction application is submitted, which will be sent out for review to local and State agencies as well as neighbors within 300 feet of the subject property. The Planning Administrator will then review all the information submitted and the application will either be approved or denied.

All Other Allowed Zones

Zoning districts other than GMA Agriculture require a Conditional Use Permit, which normally involves having a pre-application meeting with County Planning Staff to discuss the application, answer questions, and resolve any issues at the front end of the process. Next, a completed Conditional Use Permit **and** a Mineral Extraction application are submitted, which will be sent out for review to local and State agencies as well as neighbors within 300 feet of the subject property. The application is then advertised in the local newspaper and a public hearing is conducted at which time the application will be heard by the Benton County Hearings Examiner and the public will have opportunity to comment. The Hearings Examiner will review all the information submitted and the application will either be approved with conditions and the use will be allowed on the property or the application will be denied and the use will not be allowed.

Criteria for Approval

GMA Agriculture Zone

- The proposed use does not have an adverse effect on other uses permitted in the applicable zoning district.
- The proposed use conforms with all applicable ordinances and regulations of Benton County which also apply to other permitted uses in the applicable zoning district.
- The proposed use complies with all applicable requirements of the Benton Franklin District Health Department, Department of Ecology or any municipality providing water or sewer.

All Other Allowed Zones

A conditional use permit shall be granted only if it can be concluded that, as conditioned, the proposed use:

1. is compatible with other uses in the surrounding area or is no more incompatible than any other outright permitted uses in the applicable zoning district;
2. will not materially endanger the health, safety, and welfare of the surrounding community to an extent greater than that associated with any other permitted uses in the applicable zoning district;
3. would not cause the pedestrian and vehicular traffic associated with the use to conflict with existing and anticipated traffic in the neighborhood to an extent greater than that associated with any other permitted uses in the applicable zoning district;

4. will be supported by adequate service facilities and would not adversely affect public services to the surrounding area;
5. would not hinder or discourage the development of permitted uses on neighboring properties in the applicable zoning district as a result of the location, size or height of the buildings, structures, walls, or required fences or screening vegetation to a greater extent than other permitted uses in the applicable zoning district.

Appeals

GMA Agriculture Zone

The decision of the Planning Administrator may be appealed to the Benton County Hearings Examiner within fourteen (14) days of the decision.

All Other Allowed Zones

The decision by the Hearings Examiner is appealable under the terms and conditions as set forth in State law.

Expiration

GMA Agriculture Zone

Upon permanent abandonment, exhaustion of minerals/materials and/or after completion of site reclamation, the permit shall become void.

All Other Allowed Zones

The Conditional Use Permit will be valid as long as the conditions set forth by the Hearings Examiner are met.



MINERAL EXTRACTION PERMIT APPLICATION

Application No. _____

APPLICANT INFORMATION

Please check the box indicating primary contact person for this application

☐ **Applicant/Agent:** _____
Mailing Address: _____ City: _____
State: _____ ZIP: _____ Phone: _____ Work: _____
Email Address: _____
Signature: _____ Date: _____

☐ **Property Owner(s)** (if different): _____
Mailing Address: _____ City: _____
State: _____ ZIP: _____ Phone: _____ Work: _____
Email Address: _____
Signature: _____ Date: _____
Signature: _____ Date: _____

**If there are additional owners please copy this section, sign, and attach to the application*

If the property is owned by a corporation, trust, partnership or LLC please complete the entity signature block below showing that the person signing has the authority to sign on behalf of the company.

ENTITY SIGNATURE BLOCK

If the applicant or legal owner of the property is a corporation, partnership, trust or LLC please use the following signature block.

Applicant/Legal Owner: _____

Officer name: _____

Title: _____

Signature: _____ Date: _____

THE ABOVE SIGNED OFFICER OF _____ (name of entity) WARRANTS AND REPRESENTS THAT ALL NECESSARY LEGAL AND CORPORATE ACTIONS HAVE BEEN DULY UNDERTAKEN TO PERMIT _____ TO SUBMIT

THIS APPLICATION AND THAT THE ABOVE SIGNED OFFICER HAS BEEN DULY AUTHORIZED AND INSTRUCTED TO EXECUTE THIS APPLICATION.

REQUEST DESCRIPTION

1. **Subject property address:** _____ **City:** _____

State: _____ **ZIP:** _____ **Total acreage:** _____

2. **Parcel number(s) where mineral extraction/use will occur:**

Parcel 1: __ ☐ __ __ __ __ ☐ __ __ __ __ ☐ __ __ __ __ ☐ __ __ __ __

Parcel 2: __ ☐ __ __ __ __ ☐ __ __ __ __ ☐ __ __ __ __ ☐ __ __ __ __

3. **Access:** ☐ County Road ☐ State Road/Highway ☐ Private Road

4. **Utilities:** *Power:* ☐ Benton PUD ☐ Benton REA

Sewer: ☐ Septic Tank ☐ City Sewer: (Provider) _____

Water: ☐ Individual Wells ☐ One well serving 2-4 lots ☐ One well serving 5 or more lots

☐ Private System (Provider & Address) _____

☐ City System (Provider) _____

Gas: ☐ No ☐ Yes: (Provider) _____

Cable: ☐ No ☐ Yes: (Provider) _____

Phone: ☐ No ☐ Yes: (Provider) _____

Irrigation: ☐ No ☐ Private ☐ District: (Provider) _____

5. **What type of mineral resource (i.e. gravel, sand)?** _____

6. **Current status of commercial site:** ☐ Active ☐ Inactive ☐ New

7. **Currently used a private resource:** ☐ Yes ☐ No

8. **Surface Mining Permit Number issued by the Department of Natural Resources (if any):**

_____ **Date issued:** _____

9. **Estimate the amount of mineral resources that exist on the subject property (cubic yards):**

10. **If the site is an active mineral resource area, estimate the amount of mineral resource that existed prior to extraction and provide the amount extracted to date:** _____

Signature: _____ Date: _____

11. **Describe all existing improvements and uses currently on the subject property:**

12. Describe existing land uses on properties adjacent to and within 500 feet of the subject property:

IF FURTHER EXPLANATION IS NEEDED FOR ANY OF THE QUESTIONS PLEASE ATTACH ADDITIONAL PAGES.

(For Staff Use Only)

Access: Y N

Application Complete: Y N

Critical Areas: N

Y: _____

Zoning: _____

Reviewed by: _____

Date: _____