Community Development Deparment
102206 East Wiser Parkway
Kennewick, WA 99338

Planning Division
(509) 786-5612
Planning.Deparment@co.benton.wa.us

TEMPORARY DWELLING CHECKLIST

Applicant	Staff	
☐	☐	**Completed Temporary Dwelling Application** – must include signatures of all parties with ownership interest. Incomplete applications will not be accepted.
☐	☐	**Site Plan Map** – A detailed map drawn to scale showing: boundary lines and dimensions of the property; location and size of all existing and proposed structures; driveway and access easements that serve the property; adjacent roads; wells; septic systems; easements; and parking areas. *No site plans larger than 11" x 17" and only maps drawn in **black ink** will be accepted.*
☐	☐	**$200.00 Temporary Dwelling Permit Fee** – The fee must be paid at the time of application submittal, cash or checks accepted. Checks made payable to the ***Benton County Treasurer.*** All application fees are non-refundable.
☐	☐	**Doctor's Letter** *(If applicable)* – Verifying a medical need for continuous care.
☐	☐	**Written Approval** – Documentation of approval of proposed method of water supply and sewage disposal by the appropriate governmental agency.
☐	☐	**Benton-Franklin Health District -** Written approval to hook into existing septic system or permit for new septic system 7102 W. Okanogan Place, Kennewick, WA 99336 Phone: 460-4205

Applications may be submitted between the hours of 8am-12pm and 1pm-5pm Monday through Friday to the Planning Division at 102206 E Wiser Parkway, Kennewick, WA 99338.

Please contact the following departments/agencies to ensure your proposal will be in compliance with their regulations:

- **Benton County Road Department**
  620 Market Street, Prosser, WA 99350
  Prosser: 786-5611 • *Tri-Cities:* 735-3084
- **Benton County Building Division/ Fire Marshal**
  102206 E Wiser Parkway, Kennewick, WA 99338
  Phone: 735-3500

Any infrmation submitted to the Benton County Planning Division is subject to public records disclosure law fr the State of Washington (RCW Chapter 42.56) and all other applicable law that may require the release of the documents to the public.

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TEMPORARY DWELLING 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 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 _____ *(name of applicant)* TO SUBMIT THIS APPLICATION AND THAT THE ABOVE SIGNED OFFICER HAS BEEN DULY AUTHORIZED AND INSTRUCTED TO EXECUTE THIS APPLICATION.

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PARCEL INFORMATION

1. **Subject property address**: _____

   City: _____ **State:** _____ **ZIP:** _____

2. **Parcel number:** __ – __ __ __ __ – __ __ __ – __ __ __ __ – __ __ __

3. **A temporary dwelling permit is being requested for:**

   ☐ An owner in the process of building a permanent dwelling or placing a manufactured home on the parcel. Provide the Building Permit/FAS Permit number or date the application was submitted to the Building Division.

   Building permit number/Date submitted: _____

   ☐ A caretaker living on the parcel while the owner is on vacation or is working out of the area.
   Only a self-contained recreational vehicle (RV) may be used as a temporary dwelling under this category.

   ☐ A caretaker, hired hand or other employee working in connection with an agricultural use on the premises.

   ☐ An individual to receive or administer continuous care and assistance necessitated by advanced age, illness, or infirmity. **Attach documentation from a doctor verifying a need for continuous care.**

   Name of individual needing assistance: _____

   Relationship to applicant: _____

   Further explanation for selection above: _____

4. **Distance Temporary Dwelling will be from County or Private Road: _____**

5. **Name of person(s) living in the temporary dwelling?** _____

6. **Will the temporary dwelling be a:** ☐ Recreational Vehicle (RV) ☐ Manufactured Home

7. **What is the model/year of the proposed RV/manufactured home?** _____

8. **Size and dimensions of the temporary dwelling:** _____

9. **Are there any other temporary dwellings currently located on the parcel?** ☐ Yes ☐ No

10. **Is there an accessory dwelling unit (ADU) currently permitted on the parcel?** ☐ Yes ☐ No

11. **How many residences are currently on the property?** _____

12. **Is rent being charged for the location/occupancy of the temporary dwelling?** ☐ Yes ☐ No

13. **Have the following approvals/permits been obtained?**

    a) Benton-Franklin Health District: ☐ Yes ☐ No ☐ N/A

    b) Municipality (water/sewer): ☐ Yes ☐ No ☐ N/A

14. **Will the temporary dwelling be placed in one of the following zoning districts?** ☐ Yes ☐ No

    ☐ Community Center Residential ☐ Urban Growth Area Residential ☐ Rural Lands 1

    If yes, please answer the following regarding the characteristics of the manufactured home:

    a) The manufactured home is new and has not been previously titled or occupied; ☐ Yes ☐ No

    b) It has at least two fully enclosed parallel sections each not less than 12 x 36 ft; ☐ Yes ☐ No

    c) Is constructed with a composition, wood shake, shingle, coated metal or similar roof; ☐ Yes ☐ No

    d) Has exterior siding similar in appearance to materials used on conventional site-built homes; ☐ Yes ☐ No

    e) Has a permanent foundation and the bottom of the home is to be enclosed by concrete or an approved concrete product; ☐ Yes ☐ No

    f) The manufactured home is thermally equivalent to the state energy code. ☐ Yes ☐ No

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

(FOR STAFF USE ONLY) *Access: Y N* *Application Complete: Y N*

Critical Areas: N Y: _____ *Zoning:* _____

Reviewed by: _____ *Date:* _____