



## SUBDIVISION ALTERATION INFORMATION

### What is a Subdivision Alteration?

A subdivision alteration is when a person wishes to alter any portion of an approved final plat. Plat alterations may consist of a change in designation on a plat or a change in location or size of a parcel or easement or other feature of a plat. *The elimination of land from a plat, the elimination of an easement granted by the plat, or the elimination of an area dedicated for public use from the plat requires a Subdivision Vacation Permit.*

### The Process

Once a completed subdivision application is submitted, it is reviewed by Planning staff for completeness. After which, a copy of the application will be sent out for review to local and State agencies as well as property owners 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 Board of County Commissioners and the public will have an opportunity to comment.

During the public hearing, the Board of County Commissioners shall determine whether the public use or benefit is served by the alteration. After which time, the Planning Department will send a letter to the applicant informing them of the Commissioners decision and outlining the recording process.

### Appeals

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



## SUBDIVISION ALTERATION CHECKLIST

ALL DOCUMENTS SUBMITTED MUST BE COMPLETED IN BLACK INK

Applicant   Staff

- |                          |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|--------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/>            | <b>Completed Subdivision Alteration Application</b> – must include signatures of all parties with ownership interest in a majority of the lots within the subdivision. Incomplete applications will not be accepted.                                                                                                                                                                                                                                                                                                                                                             |
| <input type="checkbox"/> | <input type="checkbox"/>            | <b>Preliminary Plat Map</b> –Ten (10) full sized copies and one (1) reduced copy measuring no larger than 11” x 17” are required with application submission. The following information shall be included on the plat map: <ul style="list-style-type: none"><li>• All information on the existing recorded plat</li><li>• Proposed alterations clearly identified and shown on the plat</li><li>• The map scale shall be at the same scale as the existing record plat.</li></ul> <i>*The above information can be drafted upon a copy of the existing plat.</i>                |
| <input type="checkbox"/> | <input type="checkbox"/>            | <b>\$500.00 Subdivision Alteration Fee</b> – The fee must be paid at the time of application submittal, cash or checks accepted. Checks made payable to the <b>Benton County Treasurer</b> . All application fees are non-refundable.                                                                                                                                                                                                                                                                                                                                            |
| <input type="checkbox"/> | <input type="checkbox"/>            | <b>Names, Signatures, and Addresses</b> of a majority of parties with ownership interest in a majority of the lots in the subject subdivision or phases hereof to be altered.                                                                                                                                                                                                                                                                                                                                                                                                    |
|                          | <input checked="" type="checkbox"/> | If the subdivision is subject to <b>restrictive covenants</b> which were filed at the time of approval of the subdivision and the application will result in the violation(s) of a covenant, the application shall contain an agreement signed by all parties subject to the covenants providing that the parties agree to terminate or alter the relative covenants to accomplish the purpose of the subdivision or portion thereof.                                                                                                                                            |
|                          | <input checked="" type="checkbox"/> | Applications may be submitted between the hours of 8am-12pm and 1pm-5pm Monday through Friday to the Planning Department at 102206 E Wiser Parkway, Kennewick, WA 99338.                                                                                                                                                                                                                                                                                                                                                                                                         |
|                          | <input checked="" type="checkbox"/> | Please contact the following departments/agencies to ensure your proposal will be in compliance with their regulations: <ul style="list-style-type: none"><li>• <b>Benton-Franklin Health District</b><br/>7102 W. Okanogan Place, Kennewick, WA 99336<br/>Phone: 460-4205</li><li>• <b>Benton County Building Department</b><br/>102206 E Wiser Parkway, Kennewick, WA 99338<br/>Prosser: 786-5622 • Tri-Cities: 735-3500</li><li>• <b>Benton County Road Department</b><br/>102206 E Wiser Parkway, Kennewick, WA 99338<br/>Prosser: 786-5611 • Tri-Cities: 735-3084</li></ul> |



## SUBDIVISION ALTERATION 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*

☐ **Land Surveyor/Engineer:** \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Phone: \_\_\_\_\_ Work: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**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.

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PARCEL INFORMATION

1. **Name of plat to be revised:** \_\_\_\_\_

2. **Year of preliminary plat approval:** \_\_\_\_\_

3. **Subject property address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

4. **List revisions being requested**, please be specific. Include maps showing the preliminary plat as it is now and what it will look like with the revisions in place: \_\_\_\_\_

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5. **Explain the reason for the requested alteration:** \_\_\_\_\_

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6. **Additional comments or information:** \_\_\_\_\_

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*(For Staff Use Only)*      Access:    Y            N

Application Complete:    Y            N

Critical Areas:    N    Y: \_\_\_\_\_

Zoning: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

Date: \_\_\_\_\_

### PROPERTY OWNERS SIGNATURES

**WE HEREBY STATE THAT WE HAVE OWNERSHIP INTEREST IN THE PROPERTY WITHIN THE SUBDIVISION, HAVE READ THE VACATION APPLICATION, AND HEREBY APPROVE THE APPLICATION REQUEST.**

[illegible]

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