



ORDINANCE AMENDMENT APPLICATION
File 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: _____

Requested Amendment:

Which section of the Benton County Code is requested amendment for?

What is the requested change/wording being proposed?

What are the unique characteristics/circumstances that necessitate the proposed changes?

List any hardships that may result in the event the ordinance amendment is not granted:

List the manner in which the proposed ordinance amendment conforms to the existing patterns in adjacent zones:

Explain how the proposed amendment would be in conformance with the intent of the Comprehensive Plan.

Identify the impacts on the environment and public safety:

If this is an amendment to BCC Title 11, explain how the change would represent a better use of the land

List any beneficial or adverse effects the proposed ordinance amendment would have on the adjacent or surrounding zones:

PLEASE NOTE THAT A NON-REFUNDABLE APPLICATION FEE OF \$700 MUST ACCOMPANY THE APPLICATION

ALSO NOTE THAT AN ENVIRONMENTAL CHECKLIST MUST BE SUBMITTED ALONG WITH THE ORDINANCE APPLICATION ALONG WITH THE NON-REFUNDABLE FEE OF \$800.00

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.