



## Community Development Department

Director: Lauren Prentice

310 W. Poplar Street, Suite 200 | Walla Walla, WA 99362

Submit to: [planning@co.walla-walla.wa.us](mailto:planning@co.walla-walla.wa.us) 509-524-2610

[https://www.co.walla-walla.wa.us/residents/community\\_development/index.php](https://www.co.walla-walla.wa.us/residents/community_development/index.php)

# REZONE APPLICATION

## AREA-WIDE REZONING OF GENERAL APPLICABILITY

### NOTES FOR 2024:

Rezoning applications that do not correspond with proposed land use amendments will not be considered as Comprehensive Plan Amendment applications but will be considered as development regulation amendments subject to applicable requirements of Walla Walla County Code Title 14. Site-specific rezonings can be considered outside of the annual docketing process. There is a separate application for this process.

Prior to application submittal, you are required to schedule a virtual preapplication meeting, which is an opportunity to meet with staff to informally discuss the proposal, application requirements, fees, the review process and schedule, and applicable development standards, plans, policies, and laws.

If you are submitting more than one amendment request, fill out a separate application for each request.

This application is required to be accompanied by application(s) for a Comprehensive Plan amendment.

### Applicant

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Applicant's Representative (optional)

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**\*Note: Signatures from the applicant and *each* property owner required on Page 4.**

<b>Summary of Amendments</b>		
<b>Site address and/or general description of the area</b>		
<b>12-digit Assessor's parcel numbers</b> (site-specific amendments only)	_____ _____	_____ _____
<b>Size of the of the property/area that would be affected</b>		
<b>Current Land Use Designation</b>		
<b>Proposed Land Use Designation</b> <i>*CPA application will also be required.</i>		
<b>Current Zoning</b>		
<b>Proposed Zoning</b>		
Is the subject property within an Urban Growth Area (UGA)? <input type="checkbox"/> Yes <input type="checkbox"/> No  If yes, specify which UGA: <input type="checkbox"/> Walla Walla <input type="checkbox"/> College Place <input type="checkbox"/> Waitsburg <input type="checkbox"/> Prescott <input type="checkbox"/> Burbank <input type="checkbox"/> Attalia Industrial UGA		

**Property Owner Information** (site specific map amendments only)

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**The signature of each applicant or the applicant's representative, and each property owner if different than the applicant(s), is required.**

*By signing, (we) (I) certify that the information furnished within this application, including all submittals and attachments, is true and correct to the best of (my) (our) knowledge. Attach additional page if needed.*

_____	/	_____	/	_____	<input type="checkbox"/> Owner
Printed Name		Signature		Date	<input type="checkbox"/> Applicant

_____	/	_____	/	_____	<input type="checkbox"/> Owner
Printed Name		Signature		Date	<input type="checkbox"/> Applicant

_____	/	_____	/	_____	<input type="checkbox"/> Owner
Printed Name		Signature		Date	<input type="checkbox"/> Applicant

_____	/	_____	/	_____	<input type="checkbox"/> Owner
Printed Name		Signature		Date	<input type="checkbox"/> Applicant

### COMPLETE SUBMITTAL CHECKLIST

Application Deadline: April 1, 2024 at 5:00 pm

The following must be submitted with this completed form for the application to be complete. Applications that are incomplete (i.e., that do not include all the information required below) will not be accepted.

- An electronic copy**
- Application fee: \$3,500, plus 3% application fee, \$3,605** payable to Walla Walla County
- [SEPA Environmental Checklist](#) (only **Section A:** Background, **Section C:** Signature and **Section D:** Supplemental Sheet for Non-project Actions must be completed)
- SEPA Review fee: \$1,900, plus 3% application fee, \$1,957** payable to Walla Walla County.
- Exhibit A:** detailed written summary of proposed amendments. Must be labeled as “Exhibit A” and attached to application form.
- Exhibit B:** an explanation of how the proposal meets the criteria in the following sections of the Walla Walla County Code. The written statement must address each of these criteria and should specifically respond to each item in these sections as required by the type of amendment. Must be labeled as “Exhibit B” and attached to application form.
  - [WWCC 14.15.060C](#) (rezones of general applicability only)
  - [WWCC 14.15.070B.3](#) (rezones of general applicability only)
- Exhibit C:** vicinity map depicting the location of the property. Must be dated and signed by the applicant and labeled as “Exhibit C” and attached to application form.
- Exhibit D:** legal description and notarized signature of one or more property owners. Must be labeled as “Exhibit D” and attached to application form.

**I hereby state that the checked items are included in my application packet. I understand that errors or omissions may result in delay of application review. If all items are not submitted together, in a complete application packet, by April 1, 2024, the application will not be considered on the 2024 docket.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_