

Department of Public Services

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GRAYS HARBOR COUNTY

STATE OF WASHINGTON

SUBDIVISION APPLICATION

Official Use Only

Case Number:

Proposal Type:

Intake By:

PreDevelopment Review Case Number:

Approved Site Plan Attached

PARCEL (s) #:

SITE ADDRESS:

LANDOWNER (print):

PHONE:

ADDRESS:

EMAIL:

SIGNATURE:

DATE:

Note: This form must be signed and dated by the landowner of record

APPLICANT'S REPRESENTATIVE (print):

COMPANY:

PHONE:

ADDRESS:

EMAIL:

SIGNATURE:

DATE:

Contractor

Leasee

Consultant

Proposal: Short Subdivision Large Lot Long Plat Special Use/Cluster

Number of Lots Proposed:

Size of Smallest Lot:

Proposed Water Source:

Proposed Sewage Disposal:

Environmental Checklist Included

Special Study Included

Describe Existing Improvements: (example: residence, garage, well, septic system)

(Continue on 8 1/2" x 11" sheet)

Note: attach approved Site Plan, Preliminary Plat or sketch and all supporting documents