

ON-SITE INFORMATIONAL REVIEW

NOTICE

The review by the various departments as provided for herein is solely for the purpose of advising the Spokane County Health District of the subject property's compliance with various codes and regulations. **The issuance of a permit by the Spokane County Health District for the installation of an on-site sewage disposal system is not to be construed as a vesting of a right by the owner / representative to obtain a building permit for this property.** At the time that a building permit is applied for the subject property must comply with all applicable federal, state or local laws, ordinances or regulations with the exception of those relating to the issuance of a permit for the on-site sewage disposal system by the Spokane County Health District, pursuant to this form. Accordingly, although as of the date of this document the subject property may meet certain state or local laws, ordinances or regulations, in the event such items change between the date of this document and application for a building permit, the owner / representative will be responsible for meeting such regulations in effect on the date of the application for the building permit.

Parcel Number: _____ Legal Description: _____

Property Owner Signature: _____ Date: _____

Mailing Address: _____ Phone: _____

DEPARTMENT OF BUILDING AND PLANNING

LAND USE REVIEW:

- _____ Dedicatory language within plat
- _____ Subject property is legally divided
- _____ Certificate of exemption required CE#: _____
- _____ Recorded Access Easement
- _____ Use authorized under the Zoning Code
- _____ Setbacks meet Zoning Code requirements
- _____ Shorelines permit required
- _____ Critical Area Review required
- _____ Variance required for the following reason: _____
- _____ Other _____

Reviewed by: _____ Date: _____

TEMPORARY STREET ADDRESS:	
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*FINAL STREET ADDRESS TO BE ISSUED AT TIME OF BUILDING PERMIT APPLICATION

WATER AVAILABILITY/ADEQUACY REVIEW:

PROPERTY /STRUCTURS PROPOSED WATER PROVIDED BY:

- _____ Private Permit-exempt Well _____ Group A Water System
- _____ Shared Private Well (two-party) _____ Municipal Water Purveyor
- _____ Group B Water System _____ Other _____

BUILDING AND PLANNING HAS ADVISED THE PROPERTY OWNER/REPRESENTATIVE THAT AN IN-DEPTH REVIEW WILL BE NECESSARY WHEN A FORMAL BUILDING PERMIT APPLICATION IS SUBMITTED, AND THAT PRIOR TO THE ISSUANCE OF A BUILDING PERMIT, IT WILL BE NECESSARY FOR THE PROPERTY OWNER/PERMIT APPLICANT TO PROVIDE PROOF OF THE LEGAL, ADEQUATE, AND PHYSICAL AVAILABILITY TO WITHDRAW WATER FROM PRIVATE PERMIT-EXEMPT WELLS IN ACCORDANCE WITH ALL FEDERAL, STATE, OR LOCAL LAWS, ORDINANCES OR REGULATIONS IN AFFECT AT THE TIME OF BUILDING PERMIT APPLICATION, AND THAT REVIEW BY BUILDING AND PLANNING OF THIS DOCUMENT ON THIS DATE DOES NOT CONSTRUE A VESTIN OF A RIGHT, OR GUARANTEE WATER AVAILAB ILITY, OR THE ISSUANCE OF A BUILDING PERMIT.

Reviewed by: _____ Date: _____

ENGINEERING AND ROADS DEPARTMENT

_____ Site drainage review required

_____ Maintained county road

_____ Private Road Review

_____ Approach permit required

_____ Flood zone permit required/Known Flood Elevation

_____ Flood zone permit required/Unknown Flood Elevation

_____ Variance requirements Other

Reviewed by: _____

Date: _____