



PLANNING DEPARTMENT

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Website: cityofcentralia.com

Large Lot Application

Date: _____
Applicant Name: _____
Parcel Number: _____
Legal Description: _____

AREA AND DISTANCE

Total amount of land in subdivision? _____ Total amount of existing street frontage? _____
Proposed number of lots _____
Smallest lot sizes _____ Largest lot size _____

LAND USE

What is the current Comprehensive Land Use Designation? _____

Indicate the proposed land use(s) of the subdivision.

- | | | |
|--------------------------|--------------------|--------|
| <input type="checkbox"/> | Commercial | |
| <input type="checkbox"/> | Single Family Home | |
| <input type="checkbox"/> | Manufactured Home | |
| <input type="checkbox"/> | Multi-Family | |
| <input type="checkbox"/> | Duplexes | #units |
| <input type="checkbox"/> | Multiple Family | #units |

Describe any proposed non-residential uses.

Describe any proposed residential uses.

For Official Use Only

LL# _____

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Utilities

Indicate any utilities now existing on the property.

- | | |
|---|--|
| <input type="checkbox"/> Streets – paved | <input type="checkbox"/> Streets – unpaved |
| <input type="checkbox"/> Sanitary Sewers | <input type="checkbox"/> Septic |
| <input type="checkbox"/> Storm Drains | <input type="checkbox"/> Power |
| <input type="checkbox"/> Irrigation Water | <input type="checkbox"/> City water |
| <input type="checkbox"/> Well | |

If using septic, has it been approved by Lewis County Environmental Health (LCEH)?

- ☐ No
☐ Yes (Include documentation from LCEH.)
☐ Not Applicable

If using a well, has it been approved as a Public Well by Lewis County Environmental Health (LCEH)?

- ☐ No
☐ Yes (Include documentation from LCEH.)
☐ Not Applicable

Indicate the method of extending the service of lots (structures).

- ☐ Underground Utility Easement
☐ Overhead Utility Easement
☐ Utilities in the Streets

IMPROVEMENTS

Do you plan to file the plat in its entirety as proposed, or will it be a multi-phase development?

- ☐ As proposed ☐ Multi-phased development

If multi-phased, please describe.

Will any special deed restrictions be included in the sale of the lots?

- ☐ No ☐ Yes

If yes, please describe.

What is the arterial designation of the street presently serving the property?

- ☐ Secondary
- ☐ Collector
- ☐ Access
- ☐ Other (please specify):

Applicant’s Signature

Date

Applicant’s Signature

Date