



City of Mukilteo Land Use Permit Application

11930 Cyrus Way
Mukilteo, WA 98275
(425) 263-8000
www.mukilteowa.gov



Received by Email

04-23-2021

GENERAL INFORMATION

ADDRESS/LOCATION: 11338 Mukilteo Speedway PARCEL NO: 00441400001100

DESCRIPTION OF WORK: Binding site plan to separate parcel with existing buildings into 2 lots on existing easement line

COMP PLAN DESIGNATION: _____ ZONING: Incorporated City

DATE OF PREAPPLICATION MEETING (if held): _____

APPLICANT INFORMATION

NAME: Speedway Quad II, LLC PHONE: _____ EMAIL: _____

ADDRESS: 8625 Evergreen Way, Suite 200 CITY: Everett STATE: WA ZIP: 98208

PROPERTY OWNER INFORMATION Same as Above

NAME: _____ PHONE: _____ EMAIL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

CONTACT INFORMATION Same as Above

NAME: Ry McDuffy PHONE: 425-259-3400 EMAIL: ry@orcalsi.com

ADDRESS: 3605 Colby Avenue CITY: Everett STATE: WA ZIP: 98201

Project Type (check all that apply):

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Accessory Dwelling Unit* | <input type="checkbox"/> Lot Line Adjustment* | <input type="checkbox"/> Special Use* | <input type="checkbox"/> Variance* |
| <input checked="" type="checkbox"/> Binding Site Plan | <input type="checkbox"/> Reasonable Use* | <input type="checkbox"/> Subdivision*: | <input type="checkbox"/> Wireless Communication Facility |
| <input type="checkbox"/> Comprehensive Plan Amendment* | <input type="checkbox"/> Rezone* | <input type="checkbox"/> Preliminary Short | <input type="checkbox"/> Other*: _____ |
| <input type="checkbox"/> Conditional Use* | <input type="checkbox"/> SEPA | <input type="checkbox"/> Preliminary Long | _____ |
| <input type="checkbox"/> Floodplain* | <input type="checkbox"/> Shoreline: | <input type="checkbox"/> Final Short | _____ |
| <input type="checkbox"/> Development* | <input type="checkbox"/> Conditional Use* | <input type="checkbox"/> Final Long | _____ |
| <input type="checkbox"/> Letter* | <input type="checkbox"/> Exemption | <input type="checkbox"/> Amendment | _____ |
| <input type="checkbox"/> Programmatic* | <input type="checkbox"/> Substantial Development* | | |
| | <input type="checkbox"/> Variance* | | |

*Supplemental Application Required

SIGNATURE:

I/We certify that the information provided in this application, including all submittals and attachments, is true and correct under penalty of perjury by the laws of the State of Washington.

Applicant / Authorized Agent Signature

Date

manager

4/23/21

Owner Signature (required)

Date