Print Form

AGREEMENT TO REIMBURSE PROFESSIONAL CONSULTING SERVICES EXPENSES RELATED TO LAND USE APPLICATION

P.O. Box 9, 230 Davidson Avenue
Woodland, WA 98674
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(360) 225-1048 / FAX # (360) 225-7336

City Ordinance #1157 (WMC 19.02.110) authorizes recovering the cost of professional consulting services related to all land use applications by outside professionals. Applicant is therefore responsible for reimbursing the City those fees and related expenses in addition to the normal permit and plan review fees.

Applicant recognizes that the City is obligated by state law and the Woodland Municipal Code to provide a complete review of land use applications, including all technical support documents, in order to ensure compliance with all applicable approval standards and that some of those support documents exceed the professional certifications and capabilities of City staff. In these instances, the City must contract with outside qualified professionals in order to perform its plan review responsibility.

Applicant hereby agrees and commits to reimburse the City the actual cost of professional consulting services for reviewing all development projects by outside professionals.

This Agreement to Reimburse the Professional Consulting Services Expenses Related to Reviewing

the Land Use Application ("Agreement") is entered into this _____ day of _____ by

and between_____, ("Applicant") and the City of Woodland, WA,

("City") as indicated by the below signed authorized representative of the parties.

Applicant is the Applicant for _____, which has been assigned

City Planning / Land Use Application No. _____ .

Applicant acknowledges that Applicant is liable for such costs, and these costs are due and payable to the City at the time of final plan approval.

Applicant further acknowledges that the City is authorized to require the applicant to deposit an amount with the City estimated at discretion of the Public Works Director.

IT IS SO AGREED:

Applicant / Authorized Representative

Name: _____ Date: _____

Title: _____

Mailing Address: _____