Print Form

Critical Areas Identification Checklist

Pursuant to Woodland Municipal Code

Planning Department
P.O. Box 9, 230 Davidson Ave
Woodland, WA 98674
http://www.ci.woodland.wa.us
(360) 225-1048 / FAX (360) 225-7336

Applicant's Name:

Mailing Address:

Phone: Mobile: Fax:

Site Address: Parcel ID Number: (required)

Associated Land Use Application Number:

Proposed Use(s):

Section: Township: Range: Related Permits:

Please answer the following questions concerning Critical Area indicators located on or within 200 feet of the project area.

A. Are you aware of any environmental documentation that has been prepared related to critical areas that includes the subject area: (If yes, please attach a list of document titles.)
Yes_____ No_____ Unknown_____

B. Are there any surface waters (including year-round and seasonal streams, lakes, ponds, bogs, swamps)
Yes_____ No_____ Unknown_____

C. Is there vegetation that is associated with wetlands?
Yes_____ No_____ Unknown_____

D. Have any wetlands been identified?
Yes_____ No_____ Unknown_____

E. Are there area where the ground is consistently inundated or saturated with water?
Yes_____ No_____ Unknown_____

F. Are there any State or Federally listed sensitive, endangered or threatened species and habitats?
Yes_____ No_____ Unknown_____

G. Are thereslopes of 15% or greater?
Yes_____ No_____ Unknown_____

H. Is the project located within a Flood Hazard Zone?
Yes_____ No_____ Unknown_____

I. Do you know of any landslide hazard areas?
Yes_____ No_____ Unknown_____

I grant permission to the field inspector to enter the building site to determine the presence or absence of critical areas.

I understand that if the information on this form is later determined to be incorrect, the project or activity may be subject to conditions or denial as necessary to meet the requirements of WMC 15.08, the Woodland Municipal Critical Areas Ordinance.

Applicant's Signature Date