

Sammamish, WA 98075 425-295-0500 | www.sammamish.us

ABOUT ZONE RECLASSIFICATIONS

A property owner or their representative may request a zone reclassification, sometimes called a rezone, to change their zoning to a higher intensity zone within the zoning hierarchy allowed in the current Future Land Use category for their property.

For example, a property shown on the Future Land Use Map as Neighborhood Residential and shown on the Current Zoning Map as R-4 could submit a zone reclassification to change their zoning to an R-6. Zone reclassifications are subject to the criteria listed in SMC 21.09.100(G)(2).

Changes to the zoning designation on the Future Land Use Map and areawide rezones must follow Chapter 24A.10 of the Sammamish Municipal Code.

APPLICATION REQUIREMENTS AND APPROVAL

A Zone Reclassification is a Type 3 land use decision. This specific type of rezoning is a Type 3 action by the Hearing Examiner and is considered a quasi-judicial rezoning.

FEES

Applicants are responsible for providing an initial deposit (as well as additional deposits as needed) to cover all application review costs.

FEES APPLICABLE TO THIS PROJECT
Zone Reclassification
Environmental Checklist Review (if applicable)
Legal Review, Actual Cost
15% Technology Fee
See current fee schedule

Code Reference

Quasi-Judicial Rezoning SMC 21.09.100(G)

Resources

King County iMap
Sammamish Property Tool

Questions?

Submit Project Guidance Visit the Permit Center

> City of Sammamish 801 228th Ave SE Sammamish, WA 98075 www.sammamish.us

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OWNER INFORMATION				□ Owne	☐ Owner is organized as an LLC*			
Nam	e:		npany:					
Addr	2000		olicable)					
Phor	one: E-Mail:							
APPLICANT/REPRESENTATIVE INFORMATION ☐ Applicant is organized as an L						as an LLC*		
Nam	e: Company:							
		(if applicable)						
Addr	ess:							
Phor	one: E-Mail:							
*O2020-513 requires owners/applicants organized as a single-member or multiple-member LLC to provide the names and addresses of all members, including all individuals who hold transferable interests in the applicant or its members. Please provide this information using the supplemental form on www.MyBuildingPermit.com.								
PROPERTY INFORMATION								
Property Address:								
Parcel Number(s):								
Current Zoning: Proposed Zoning:								
Total	Lot Area(s): (Square Feet)	Total Cr	Total Critical Areas on Property: (Square Feet)					
Please complete the below for any critical areas on property:								
Туре		Total Area (Square Feet)	•	Туре		Total Area (Square Feet)		
	Frequently flooded area			Lake				
	Landslide area			Critical aquifer	recharge area			
	Seismic hazard area			Wetland				
	Erosion hazard area			Stream				
	Erosion hazard near sensitive water bodies overlay			Fish & wildlife I conservation a				
Do you control the property where the work is being proposed (lease, easement, or fee-ownership)? \Box Yes \Box No								

Property Information continued next page

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PROPERTY INFORMATION CONTINUED

Is the proposed project located on a parcel that abuts the King County Trail Corridor? $\hfill\Box$ Yes $\hfill\Box$ No
Does the proposal require the use of or crossing the King County East Lake Sammamish Regional Trail for access to the project site? □ Yes □ No
SUBMITTAL CHECKLIST
A PDF of each document is required at time of submittal. Please label files as follows: ProjectType_DocumentType (for example: ZRA_01ApplicationForm)
☐ 01. Signed Application Form
☐ 02. Project Narrative
 Describe the geographic setting of the property, including sensitive site features (wetlands, etc.).
 Provide an analysis of existing surrounding area zoning and a summary of supportive infrastructure.
 For applications related to a Site-Specific Land Use Map Amendment, provide a summary of the application process to date, including the Ordinance Number approving the Map Amendment.
☐ 03. Project Guidance Notes
☐ 04. Preapplication Conference Letter
□ 05. Acceptance of Financial Responsibility/Affidavit of Applicant Status
☐ 06. Title Report
 Must be less than 30 days old.
 Report must be for the parcel(s) related to this application.
□ 07. Legal Description
 Must be for the parcel(s) and zoning boundary/ boundaries related to this application.
 Must be a title-verified description by a Washington State licensed surveyor.
□ 08. Mailing List, Map, and Labels
 Include all property owners within 1,000 feet of the site (2,000 feet for properties within the Erosion Hazard Near Sensitive Water Bodies overlay)
 Utilize the Excel template provided and upload a PDF version with the map under "Mailing List, Map, and Labels" in MyBuildingPermit.com
 After submittal, the City will request the Excel version of the template via email
□ 09. SEPA Checklist

Submittal Checklist continued next page

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Application Type

Land Use



Activity Type

Rezone

SUBMITTAL CHECKLIST CONTINUED ☐ 10. Criterion Compliance Document - Detail how the application meets the criteria listed in SMC 21.09.100 and SMC 21.09.020(T). 11. Other Documents (as required) **CERTIFICATIONS & SIGNATURES** I have read this application in its entirety and certify that all information submitted, including any supplemental information, is true and complete to the best of my knowledge. I acknowledge that willful misrepresentation of information will terminate this permit application. I understand that my submittal will be reviewed for completeness and, if found to be complete, will be processed pursuant to SMC 21.09.010. Owner Signature: Applicant/Representative Signature (if applicable): Date: **ONLINE SUBMITTAL INSTRUCTIONS** Create an account on MyBuildingPermit.com. Select "Apply For Permit" and then select "Sammamish" as the jurisdiction. Select the following:

Complete & save this form before uploading it in the "File Upload" section along with the required submittal documents.

Project Type

Any Project Type

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