



CITY OF ROSLYN

201 S. First, PO Box 451 Roslyn, WA. 98941

Office (509) 649-3105

Fax (509) 649-3174

PRELIMINARY SITE ANALYSIS

The PSA provides general information about a parcel and must be completed prior to applying for a building permit. Please provide a scaled Site Plan and conceptual drawing with this application if project specific.

FEE: \$75.00

1. REQUESTER INFORMATION

Name: _____

Phone Number: _____

Mailing Address: _____

Email: _____

2. ADDITIONAL CONTACT INFORMATION:

Name: _____

Phone Number: _____

Mailing Address: _____

Email: _____

Name: _____

Phone Number: _____

Mailing Address: _____

Email: _____

3. PROPERTY ADDRESS: _____

4. MAP OR PARCEL NUMBER: _____

5. PROJECT DESCRIPTION (Site Plan and conceptual drawings required if proposing a project) :

6. ARE THERE OTHER BUILDINGS ON THE PROPERTY? Yes No

IF YES, PLEASE LIST THE TYPE OF BUILDINGS: _____

7. DOES THE PROPOSED PROJECT INCLUDE PLUMBING? Yes No

IS THERE AN EXISTING POTABLE WATER SOURCE? Yes No

IF YES, PLEASE SELECT ONE OF THE FOLLOWING: Other Public Water System

AUTHORIZATION

I hereby acknowledge that I have read this application and certify under penalty of perjury under the laws of the State of Washington that the above answers are true and complete to the best of my knowledge. I agree to comply with all current codes, laws, regulations and permit requirements related to this project. I hereby certify that I will pay all fees as required by law. All permit fees are non-refundable.

Signature of Applicant: _____

Date: _____

Application Received By (Staff Signature): _____

Date: _____

Receipt #: _____

DATE STAMP

NOTE: City of Roslyn cannot guarantee eligibility for development until a complete and accurate application is submitted. **PSA applications expire after 365 days from the application date**