

Permit Center

210 Lottie Street, Bellingham, WA 98225

Phone: (360) 778-8300 Fax: (360) 778-8301 TTY: (360) 778-8382

Email: permits@cob.org Web: www.cob.org/permits

WAIVER REQUEST FORM FOR NEIGHBORHOOD MEETING OR PRE-APPLICATION CONFERENCE

Check requested waiver:		Office Use Only
☐ Neighborhood Meeting	■ Pre-Application Conferen	
	(Fee is \$107.00)	Date Novu
		Case #:
Project Address 830 Briar Road		Process Type:
		Neighborhood:
Tax Assessor Parcel Number(s): 3	70214 386450	Area Number:
\		Zone:
Brief Project Summary		
New house on vacant land		
Explain reason for waiver reques	: The project will not create more than 5000	osq.ft of new impervious surface
		
	Primary Contact for Application	
Name Brad Ingram/ Synthesis Design		Phone 604-980-2087
Address ²⁵⁸ East 1st street City/State/Zip_North Vancouver, V7L 1B3		FAX
City/State/Zip_North Vancouver, V/L 183		Email
Owner(s) Applicant [☐ Primary Contact for Application	
Name Heather and Steve Peck		Phone
Address 830 Briar Road		FAX
City/State/Zip Bellingham, WA		Email mrsheatherpeck@gmail.com
Property Owner(s)		
permission for the City staff and agents t	o enter onto the subject property at an	to sign and submit this application. I grant by reasonable time to consider the merits of the of the State of Washington that the information on
this application and all information submi		
Signature by Owner/Applicant/Agent	Blog	Date Sept 27, 23
City and State where this application is s		VER BC.
	City	State