



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

Land Use Application

Check all permits you are applying for in the boxes provided. Submit this application form, the applicable materials listed in the corresponding permit application packet(s) and application fee payment.

Grid of checkboxes for permit types: Accessory Dwelling Unit, Binding Site Plan, Clearing Permit, etc. Includes 'Office Use Only' section with fields for Date Rcvd, Case #, Process Type, etc.

Project Information

Project Address 3236-3300 Northwest Ave Zip Code 98225
Tax Assessor Parcel Number (s) 380213307008, 380213316017, 380213263025, 380213309029
Project Description Proposal to remove all four (4) properties from an existing Planned Contract #93-09 (AF 940428147) and establish a new Planned Development Permit to govern the properties consistent with underlying zoning and current development regulations.

Applicant / Agent

Primary Contact for Applicant

Name A.C. Griffith
Mailing Address 1100 Dupont St
City Bellingham State WA Zip Code 98225
Phone 360-685-4077 Email a.c.griffith@northcoastcu.com

Owner (s)

Applicant Primary Contact for Applicant

Name Pacific Northwest Credit Union
Mailing Address 1100 Dupont St
City Bellingham State WA Zip Code 98225
Phone 360-685-4077 Email a.c.griffith@northcoastcu.com

Property Owner(s)

I am the owner of the property described above or am authorized by the owner to sign and submit this application. I grant permission for the City staff and agents to enter onto the subject property at any reasonable time to consider the merits of the application and post public notice. I certify under penalty of perjury of the laws of the State of Washington that the information on this application and all information submitted herewith is true, complete and correct.

I also acknowledge that by signing this application I am the responsible party to receive all correspondence from the City regarding this project including, but not limited to, expiration notifications. If I, at any point during the review or inspection process, am no longer the Applicant for this project, it is my responsibility to update this information with the City in writing in a timely manner.

Signature by Owner/Applicant/Agent [Signature] Date 3.12.25
City and State where this application is signed: BELLINGHAM WA
City State



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PLANNED DEVELOPMENT PROCEDURE AND REQUIREMENTS
(Process Type II)

PLEASE TYPE OR PRINT CLEARLY IN BLUE OR BLACK INK

Project Data:

1. Legal Description of Property See attached page
2. Size of subject property is 111,259 square feet.

Land Use Classification:

1. Neighborhood Plan Name Birchwood Neighborhood Area 10
2. Subarea Number 10 General Use Type and Use Qualifier Planned
3. Have you had a pre-application meeting with Planning Staff regarding this project? _____
Staff Contact: _____
4. Description of the proposed project: _____
Proposal to remove all four (4) properties from an existing Planned Contract #93-09 (AF 940428147) and
establish a new Planned Development Permit to govern the properties consistent with underlying zoning and current development regulations.

SUBMITTAL CHECKLIST:

<input type="checkbox"/>	Pre-application neighborhood meeting notice	A pre-application neighborhood meeting must be completed unless a written waiver is obtained from the Planning & Community Development Department.
<input type="checkbox"/>	Pre-Application conference	A pre-application conference or written waiver is required.
<input type="checkbox"/>	Transportation Certificate of Concurrency	Submit if required. See Transportation Concurrency form.
<input checked="" type="checkbox"/>	Land Use application form	All requested information must be provided.
<input type="checkbox"/>	Filing fee	Applicable fee as calculated by Planning staff. See separate Fee Schedule.
<input checked="" type="checkbox"/>	Mailing list and labels	Complete the attached Names and Mailing Addresses of Surrounding Property Owners for property within 500 feet, including label format.
<input type="checkbox"/>	Environmental checklist (SEPA)	Submit if required.
<input checked="" type="checkbox"/>	Title Report	A current title report issued by a title company within 90 days on the subject property. Current shall mean within 90 days prior to the date of planned development application.
<input type="checkbox"/>	Vicinity map	Clearly show the location of the property.
<input type="checkbox"/>	Site Plan (6 copies)*	Provide all information required on the attached Site Plan Checklist.
<input type="checkbox"/>	Building Designs (6 copies)*	Provide building elevations and floor plans. * For minor alterations to existing developments, Planning staff may waive portions of submittal requirements not needed for project review.
<input type="checkbox"/>	Plan Reductions	Provide 8.5" x 11" reduction of site plan and building design.
<input type="checkbox"/>	Residential Plan Data Sheet	Complete the attached Multi-family Residential Plan Data Sheet for residential projects.
<input type="checkbox"/>	Associated Land Use Applications	All Type II land use applications required for the project must be submitted, unless separate submittal has been authorized.
<input type="checkbox"/>	TDR / PDR	Is the proposal utilizing Transfer of Development Rights (TDR) / Purchase of Development Rights (PDR)? _____ If yes, identify the number to be transferred or purchased. (Note: TDR / PDR may only be used within a City TDR / PDR receiving area.)

MAILING LIST INSTRUCTIONS:

As you get ready to prepare your labels keep the following checklist in mind:

- The information was acquired from the Assessor's office or database
- Addresses for the following members have been included on the label sheet
 - Property Owner Applicant / Contact for Proposal Bellingham Herald
 - All property owners within the required 500' radius (100' for Home Occupation Applications)
 - Applicable Mayor's Neighborhood Advisory Commission Representatives
 - Applicable Neighborhood Association Representatives (This information can be found at <http://www.cob.org/documents/planning/applications-forms/nbrhd-media-notification-list.pdf>)
- Mailing information has been printed on Avery 5160 labels (*see attached example*)
- All of the information **completely fits** on a single label
- Notarized **Address Information Verification form** has been completed

NOTE: Errors in mailing labels may result in process delays and re-notice fees.

Obtain Property Ownership Information from the Whatcom County Assessor's Office

- The Assessor's Office is located on the first floor of the Whatcom County Courthouse, 311 Grand Avenue, Bellingham, 360-676-6790.
- Bring enough information to identify all of the property in the project site, such as tax parcel numbers, legal descriptions, address(es) or boundary on a plat map. Assessor's Office staff can help you find the Assessor's map(s) containing the project parcel(s).
- Utilize the Assessor's map to measure the required ownership notice distance (listed on the application) and record the parcel number for each property within or partially within the required distance of 500 feet (*100 feet for Home Occupation*) from the boundary of the project parcel. If the owner of the project property owns other property within the notice distance but not included in the project site, contact the Planning Division to determine whether the notice radius must be increased.
- Record the property owner's name and mailing address by accessing each parcel number via the computer terminals at the Assessor's Office or through the Internet by accessing the database under "Real Property Search" at www.whatcomcounty.us/assessor/index.jsp. Click on the parcel number in the first data screen to bring up a screen with the owner's full address and zip code. The maps are also available at this site if you wish to check a parcel number.
- If the site is a condominium, include the owner of each unit.

Print addresses on Avery 5160 labels

- Labels **must** include the address and fit on one Avery 5160 label:
- Please **DO NOT**
 - o **Repeat names** on the mailing list. If someone is listed as owning more than one property, only list the owner's name and address once on the mailing list.
 - o **List** the tax parcel number on the labels

Address Information Verification form:

Form must be notarized and include a copy of the parcel numbers and property owner's name and mailing address information attached.



Address Information Verification

I / We _____, being duly sworn on oath, hereby certify that I have familiarized myself with the rules and regulations with respect to preparing and filing this application, that the foregoing statements and the statements contained in any papers or plans submitted herewith are true to the best of my knowledge and belief, and that the list of names and addresses of property owners within 500' of the subject is complete and correct according to the records of the Whatcom Assessor's Office as of _____, 20 __. I understand that if this list does not contain accurate information as listed in the Assessor's Office, this application may be successfully challenged and result in the necessity to reapply.

Signature: _____

Date: _____

Signature: _____

Date: _____

STATE OF WASHINGTON)

) SS

COUNTY OF WHATCOM)

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____
_____, 20 ____.

Signature of Notary Public:

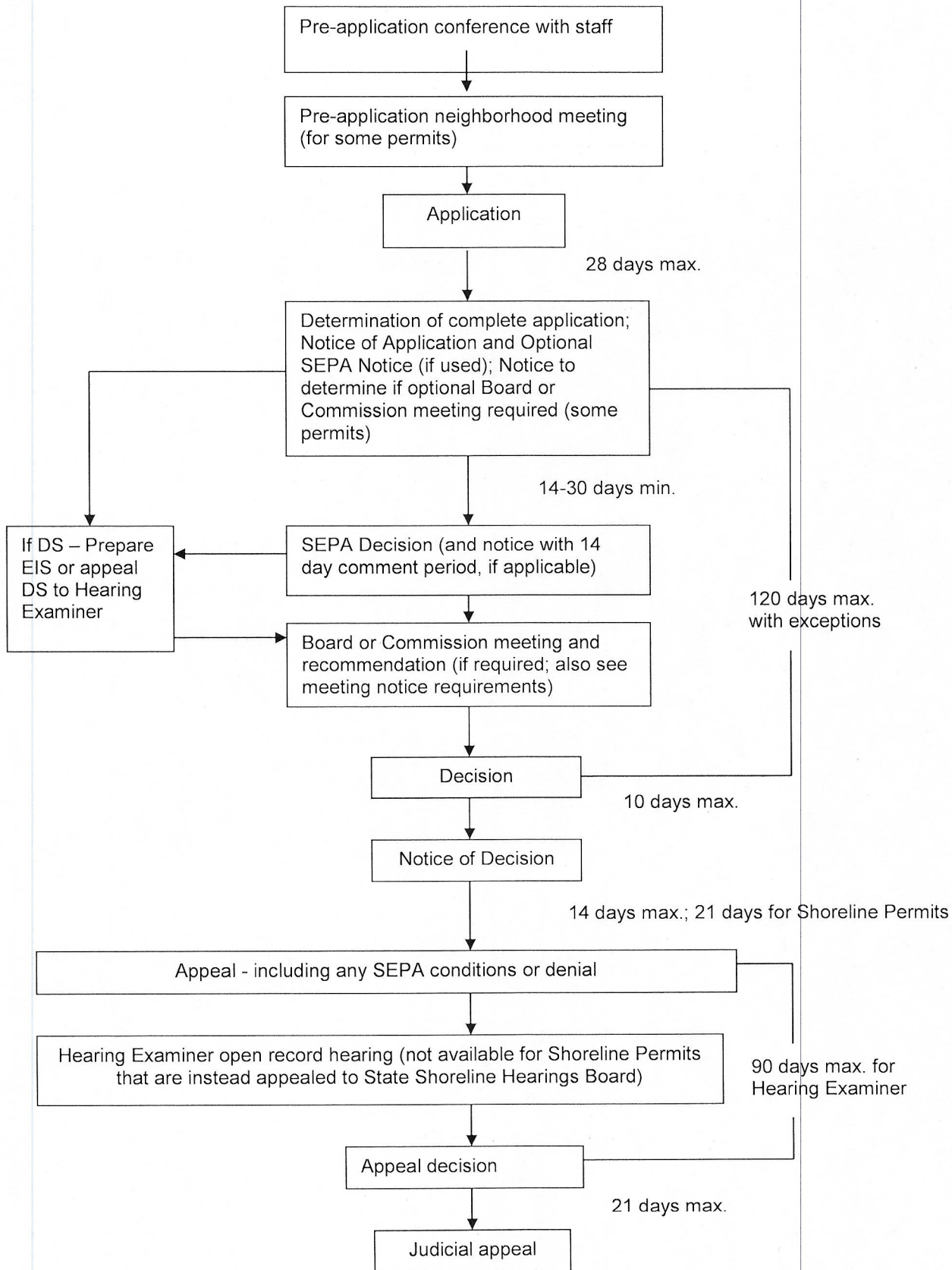
Name Printed

My appointment expires

<p><i>Avery 5160 labels or in Avery 5160 label format</i></p>	<p>Font – Arial, 11</p>		
<p>Property Owner Address City, State, Zip</p>	<p>Applicant Address City, State, Zip</p>	<p>MNAC Representative Address City, State, Zip</p>	
<p>Neighborhood Association Rep Address City, State, Zip</p>	<p>Bellingham Herald Community News Department 1155 N. State St. Bellingham, WA 98225</p>	<p>All Property Owners within the specified radius:</p>	
<p>First name Last name Address City, State, Zip</p>	<p>First name Last name Address City, State, Zip</p>	<p>First name Last name Address City, State, Zip</p>	

TYPE II PROCESS

(Administrative Decisions)





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Applicant / Agent

Primary Contact for Applicant

Name Tara Sundin
Mailing Address 210 Lottie St
City Bellingham State WA Zip Code 98225
Phone 360-778-8392 Email tsundin@cob.org

Owner (s)

Applicant Primary Contact for Applicant

Name City of Bellingham
Mailing Address 210 Lottie St
City Bellingham State WA Zip Code 98225
Phone 360-778-8392 Email tsundin@cob.org

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Signature by Owner/Applicant/Agent Date 2.26.25
City and State where this application is signed: Bellingham WA
City State



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(Process Type II)

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Address Information Verification form:

Form must be notarized and include a copy of the parcel numbers and property owner's name and mailing address information attached.



Address Information Verification

I / We Tara Sundin, being duly sworn on oath, hereby certify that I have familiarized myself with the rules and regulations with respect to preparing and filing this application, that the foregoing statements and the statements contained in any papers or plans submitted herewith are true to the best of my knowledge and belief, and that the list of names and addresses of property owners within 500' of the subject is complete and correct according to the records of the Whatcom Assessor's Office as of February 26, 2026. I understand that if this list does not contain accurate information as listed in the Assessor's Office, this application may be successfully challenged and result in the necessity to reapply.

Signature: [Handwritten Signature]
Date: 2.26.25
Signature: _____
Date: _____

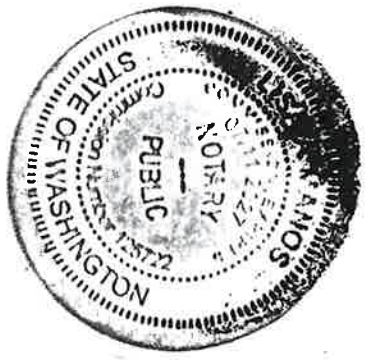
STATE OF WASHINGTON)
) SS
COUNTY OF WHATCOM)

SUBSCRIBED AND SWORN TO BEFORE ME THIS 26 DAY OF February, 2025

[Handwritten Signature]
Signature of Notary Public:

Lisa A Manos
Name Printed

7/11/2027
My appointment expires



<p>Avery 5160 labels or in Avery 5160 label format</p>	<p>Font – Arial, 11</p>	
<p>Property Owner Address City, State, Zip</p>	<p>Applicant Address City, State, Zip</p>	<p>MNAC Representative Address City, State, Zip</p>
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Parcel Number

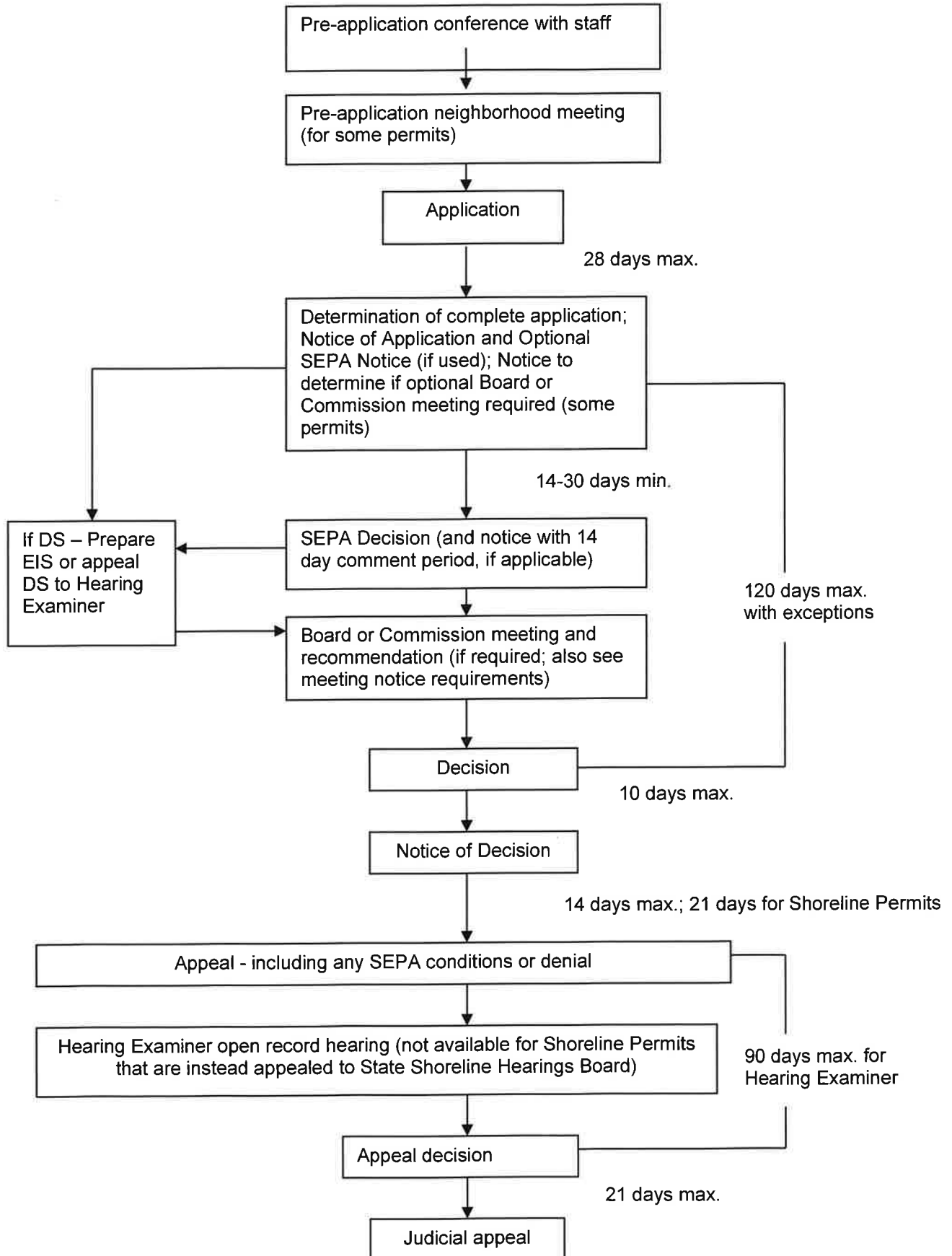
Site Address

Property Owner

Mailing Address

TYPE II PROCESS

(Administrative Decisions)





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Applicant / Agent Primary Contact for Applicant

Name Steve Rohrbacher

Mailing Address 1120 Raymond St

City Bellingham State WA Zip Code 98229

Phone _____ Email nwsteve70@gmail.com

Owner (s) Applicant Primary Contact for Applicant

Name NW Avenue LLC

Mailing Address 1120 Raymond St

City Bellingham State WA Zip Code 98229

Phone _____ Email northwoodhall@gmail.com

Property Owner(s)

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Signature by Owner/Applicant/Agent *Stephen T. ...* Date 3/4/2025

City and State where this application is signed: BELLINGHAM City WA 98225 State



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<p>Avery 5160 labels or in Avery 5160 label format</p>	<p>Font – Arial, 11</p>	
<p>Property Owner Address City, State, Zip</p>	<p>Applicant Address City, State, Zip</p>	<p>MNAC Representative Address City, State, Zip</p>
<p>Neighborhood Association Rep Address City, State, Zip</p>	<p>Bellingham Herald Community News Department 1155 N. State St. Bellingham, WA 98225</p>	<p>All Property Owners within the specified radius:</p>
<p>First name Last name Address City, State, Zip</p>	<p>First name Last name Address City, State, Zip</p>	<p>First name Last name Address City, State, Zip</p>

Parcel Number

Site Address

Property Owner

Mailing Address

TYPE II PROCESS

(Administrative Decisions)

