



ZONING TEXT AMENDMENT APPLICATION

OFFICE USE ONLY:

City of Ferndale Community Development Department
2095 Main Street/ PO Box 936
Ferndale, WA 98248 (360) 685-2359
www.cityofferndale.org

Submittal Requirements:

- Submit all application materials electronically here: www.cityofferndale.org/permits
- Upload all submittals listed in [FMC 14.07.050 Table 1: Land Use Submittal Requirements](#)
- Submittal questions: call (360) 685-2359

Applicant/Property Owner: _____

Mailing Address: _____

Phone: _____ FAX: _____

Email: _____

Authorized Agent (if applicable): _____

Relationship (architect, engineer, attorney, realtor, etc.): _____

Mailing Address: _____

Phone: _____ FAX: _____

Email: _____

Does the Proposed Zoning Text Amendment Include:

Text Addition

Text Deletion

Text Revision

Section of the Zoning Ordinance Proposed for Amendment: _____

Subject of the Proposed Zoning Text Amendment: _____

Describe text to be added, deleted or revised (preferably include complete text of section as you propose for it to appear in the Zoning Ordinance): _____

Reason for the proposed Zoning Text Amendment: _____

Justification for the proposed Zoning Text Amendment. Please refer to required findings, Section 18.12.270:

The accuracy of the information provided with this application is the responsibility of the applicant.

APPLICANT Signature: _____ Date: _____