## City of Winlock



## Community Development Department Application for Access Connection Permit WA State Highways Only

PO Box 777 • 323 N.E. First Street
Winlock, WA 98596-0777
360.785.3811 • fax 360.785.4378
winplan@cityofwinlock.com

	PROPERTY IN	IFORMATION
Address of Parcel(s) to be se	erved:	
City, State, Zip:		
State Route:	Mile Post: County:	Primary Tax Parcel No:
Additional Parcel No's (if ap)	plicable).	
Subdivision or Short Plat Na	me:	Lot #: Gov. Lot #:
Public Land Survey System (	PLSS): ¼ of the ¼	of Section Township N, Range $\square$ E $\square$ W
	ACCESS US	SE INFORMATION
Access will be used to serve	e (describe access use).	
Existing access? ☐ No ☐	Yes	If Yes, what year was access established?
Is access, or will access be	a joint use connection? ☐ No ☐ Yes	If Yes, how many parcels?
Does access meet intersect	tion Corner Clearance Critera*? □ Yes	□ No □ Unknown
If No, a Deviation or Design	Exception may be required.	
What is the estimated Avera	age Weekday Vehicle Trip Ends (AWDVT	E)** that will use this access?
*WAC458-52-040(6). ** a trip	end occurs each time a vehicle either enters	a state highway or leaves the state highway.
		NFORMATION
Category I minimum connection	☐ Field (agricultural), Forest Lands, U☐ Each Residential Dwelling Unit (up☐ Other, with 100 AWDVTE or less (S☐ Fee per additional connection poi	
Category II	☐ Less than 1,000 AWDVTE (\$1,000)	
minor connection	☐ 1,000 to 1,500 AWDVTE (\$1,500)	
	☐ Fee per additional connection poi	nt (\$250)
Category III	☐ 1,500 to 2,500 AWDVTE (\$2,500)	
major connection	☐ Over 2,500 AWDVTE (\$4,000)	
	☐ Fee per additional connection poi	nt (\$1,000)
Category IV	(4100)	
temporary connection	☐ Base fee connection (\$100)	
	R or LEGAL REPRESENTATIVE	APPLICANT (if different than property owner/legal representative)
		so be signed by the property owner or their legal representative. Please
	fies the legal representative may act on beha	1
Name:		Name:
Mailing Address: City/St/Zip:		Mailing Address: City/St/Zip:
		Phone:
Phone: Email:		Phone:
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application fees not paid will resul comply with all private conditions,	t in the rejection of the application and plan covenants and restrictions associated with	n must be submitted to obtain a permit. Incomplete applications and/or review will not begin. It is the responsibility of the applicant/property owner to this property. By signing below, I/we agree that the City of Winlock staff has ime to consider the merits of the application, take photographs and post public
Applicant/Property Owner Signature		Date

FOR OFFICIAL USE ONLY			
Fees	Amount	Rct #(s):	Date Received:
Application	\$		Received By:
Engineering	\$		Approval Date:
Category	\$		Approved By:
Other	\$		Notes/Comments: