



## CRITICAL AREA IDENTIFICATION FORM

This identification form is to be submitted in advance or concurrently with a project application if the proposed project is subject to the requirements found in the City's critical area code PMC 21.06. The purpose of this form is to determine if a critical area report is required due to the development site being on or near any critical areas. Please fill out this form completely where applicable.

### APPLICATION INFORMATION

<b>OWNER INFORMATION</b>			
NAME: CRP/VDC FREEMAN LOGISTICS OWNER LLC			
<b>APPLICANT INFORMATION</b>			
NAME: CRP/VDC FREEMAN LOGISTICS OWNER LLC			
STREET ADDRESS: 11411 NE 124TH ST STE 190			
CITY: Kirkland		STATE: WA	ZIP CODE: 98034
PHONE:		EMAIL:	
<b>CONTACT INFORMATION (IF DIFFERENT FROM ABOVE)</b>			
NAME: Anchor QEA, LLC ( Jakob Rowny)			
STREET ADDRESS: 1201 3rd Ave #2600			
CITY: . Seattle		STATE: . WA	ZIP CODE: 98101
PHONE: 503-867-1010		EMAIL: jrowny@anchorqea.com	
FAX:			

Project Name			
Parcel Number (s)	0420174075, 0420201040, 0420201039, 0420201045, 0420201066, 0420201101, 0420205003, 0420205017, 0420201027, 0420201052, 0420201034, 0420201036, 0420201042, 0420205004, 0420205016		
Address (s)	North Freeman Road, Puyallup, WA 98371		
Applicant Information			
Name	CRP/VDC FREEMAN LOGISTICS OWNER LLC		
Address	11411 NE 124TH ST STE 190		
City	Kirkland	State WA	Zip 98101
Email			Phone

**Briefly describe the proposed development project:**

The overall purpose of the Project is to provide +/- 490,000 square feet of high cube transload facility.

<b>Based on the applicant's knowledge and research of the project site, please select any of the critical areas listed below that are located on or within 300 feet of the property boundaries</b>		
<input checked="" type="checkbox"/> Wetlands	<input type="checkbox"/> Lakes/Ponds	<input checked="" type="checkbox"/> Streams/Creeks
<input checked="" type="checkbox"/> Slopes 0% - 15%	<input type="checkbox"/> Slopes 16% - 39%	<input type="checkbox"/> Slopes 40% or Greater
<input checked="" type="checkbox"/> Puyallup River Shoreline	<input type="checkbox"/> Clarks Creek Shoreline	<input type="checkbox"/> Volcanic Hazard Areas
<input checked="" type="checkbox"/> Shoreline Classification	<input type="checkbox"/> Wellhead Protection Area	<input type="checkbox"/> Habitat Conservation Area
<input type="checkbox"/> Conservancy	<input checked="" type="checkbox"/> Flood Zones	<input type="checkbox"/> Habitat Corridor
<input type="checkbox"/> Rural	Flood Classification: Zone X	<input type="checkbox"/> Aquifer Recharge Area
<input checked="" type="checkbox"/> Urban		

Please describe the critical areas checked above and their location in relation to the proposed development. Please show their location on any plans to be submitted

Please see Anchor QEA November 2023 Freeman Road Logistics Critical Areas Report.


**Do you know of any present or past critical area studies that have been conducted for critical areas on-site or adjacent to the site? Please describe below; including their date, scope, conclusions, and parcels they included**

Please see Anchor QEA November 2023 Freeman Road Logistics Critical Areas Report.

**Do you know if any critical areas have been placed inside a tract or a protection easement that is recorded on the title or plat for this site or any adjacent site? Please describe below, including name of tract or easement, location, and Puyallup permit number or recording number**

Please see Anchor QEA November 2023 Freeman Road Logistics Critical Areas Report.

**AUTHORIZATION:**  
I, the undersigned hereby certify that this application has been made with the consent of the lawful property owner(s) and that all information submitted on or with this application is complete and correct. I understand that false statements, errors, and/or omissions may be sufficient cause for denial of any related applications. I acknowledge that if the City needs to obtain the services of an expert third party to review any technical information regarding my proposal, that I shall be responsible for any financial costs of said third party review.

 11/28/23

**AUTHORIZED SIGNATURE** **DATE**



THIS BOX FOR STAFF USE ONLY				
<b>CRITICAL AREA REPORT REQUIRED:</b>	<input type="checkbox"/>	<b>YES</b>	<input type="checkbox"/>	<b>NO</b>
<b>EXEMPT FROM CRITICAL AREA ORDINANCE:</b>	<input type="checkbox"/>	<b>YES</b>	<input type="checkbox"/>	<b>NO</b>
<b>EXCEPTION FOR MINOR NEW DEVELOPMENT IN BUFFER:</b>	<input type="checkbox"/>	<b>YES</b>	<input type="checkbox"/>	<b>NO</b>
STAFF VERIFICATION	COMMENTS			
<input type="checkbox"/> <b>WETLAND</b>				
<input type="checkbox"/> <b>GEOLOGICAL HAZARD AREA</b>				
<input type="checkbox"/> <b>VOLCANIC HAZARD AREA</b>				
<input type="checkbox"/> <b>FLOOD ZONE</b>				
<input type="checkbox"/> <b>FISH AND WILDLIFE HABITAT</b>				
<input type="checkbox"/> <b>AQUIFER RECHARGE/WELLHEAD</b>				
<input type="checkbox"/> <b>STREAM/ShORELINE</b>				