PLANNING DIVISION
CRITICAL AREA
IDENTIFICATION FORM

STAFF USE ONLY
CA REPORT REQUIRED
EXEMPT FROM CAO

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

OWNER INFORMATION		
NAME: BCC PUYALLUP LLC		
STREET ADDRESS: 3600 136TH PL. SE		
CITY: BELLEVUE	STATE: WA	ZIP CODE: 98006
PHONE: (425) 440-6725 FAX: (425) 440-6730	EMAIL: MARKJ@BENAROYA.COM	

CONTACT INFORMATION (IF DIFFERENT FROM ABOVE)		
NAME: KIMBERLY ANDERSON BARGHAUSEN CONSULTING ENGINEERS, INC.		
STREET ADDRESS: 18215 72ND AVE S		
CITY: KENT	STATE: WA	ZIP CODE: 98032
PHONE: (425) 656-7483 FAX: (425) 251-8782	EMAIL: KANDERSON@BARGHAUSEN.COM	

SITE INFORMATION	
PARCEL NUMBER(S): 041903-4036, -4037 & -4038	
ADDRESS: 1015-1023 39TH AVE. SE	
PROJECT NAME: SOUTH HILL BUSINESS AND TECHNOLOGY CENTER	
PARCEL SIZE: 3,775,188 SQ. FT.	ZONING DESIGNATION: MP-BUSINESS PARK
Briefly describe the proposed development project:	
BOUNDARY LINE ADJUSTMENT FROM 3 EXISTING PARCELS.	

Based on the proponent'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?

[X] **Wetlands**	[ ] **Lakes/Ponds**	[ ] **Streams/Creeks**
[ ] **Slopes 0% - 15%**	[ ] **Slopes 16% – 39%**	[ ] **Slopes 40% or Greater**
[ ] **Puyallup River Shoreline**	[ ] **Clarks Creek Shoreline**	[ ] **Volcanic Hazard Areas**
[ ] **Aquifer Recharge Area**	[ ] **Wellhead Protection Area**	[ ] **Habitat Conservation Area**
	[ ] **Flood Zones**	

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)

THERE ARE 5 SURVEYED WETLANDS ON SITE AND ARE DEPICTED ON SHEETS 3, 5, 6, AND 7.

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)

A WETLAND ASSESSMENT WAS CONDUTED BY SOUNDVIEW CONSULTANTS ON 4/26/18.

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)

NONE KNOWN

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.

AUTHORIZED SIGNATURE _(signature)_ **DATE** 10/20/21

THIS BOX FOR STAFF USE ONLY				
CRITICAL AREA REPORT REQUIRED:		☐ YES		☐ NO
EXEMPT FROM CRITICAL AREA ORDINANCE:		☐ YES		☐ NO
EXCEPTION FOR MINOR NEW DEVELOPMENT IN BUFFER:		☐ YES		☐ NO
STAFF VERIFICATION		**COMMENTS**		
☐ WETLAND ☐ GEOLOGICAL HAZARD AREA ☐ VOLCANIC HAZARD AREA ☐ FREQUENTLY FLOOD AREA ☐ FISH AND WILDLIFE HABITAT ☐ AQUIFER RECHARGE/WELLHEAD ☐ STREAM/SHORELINE				