



City of Bremerton
Department of Community Development
345 - 6th Street, Suite 600
Bremerton, WA 98337-1873

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City of Bremerton
Application For Zoning Ordinance Text Amendment

TO THE CITY COUNCIL/PLANNING COMMISSION OF THE CITY OF BREMERTON:

APPLICANT: _____ CONTACT PHONE: _____

ADDRESS: _____ EMAIL: _____

REQUEST: TO AMEND THE TEXT OF THE ZONING ORDINANCE

Title, Chapter, Section

To read as follows: Per Attachment or:

BASIS FOR REQUEST: (State fully the reasons for and basis upon which the request is made). Attach additional sheets if needed. Per Attachment or:

ATTACHMENTS:

- Attachments indicated above
- Other information requested by the Zoning Administrator
- Filing Fee of \$740

I hereby state that I am the applicant listed above; and that the foregoing statements and answers herein made, and all information and evidence herewith submitted are in all respects and to the best of my knowledge and belief, true and complete. I understand that the filing fee accompanying this application does not constitute an approval for the action requested in this application.

APPLICATION FEE: \$ _____

Signature of Applicant Date

Type or Print Name

IMPORTANT: PLEASE CHECK APPLICATION AND ATTACHMENTS WITH THE PLANNING DEPARTMENT BEFORE FILING.