



City of Yakima

Traffic Concurrency

Review

Application Packet

About this Application:

The Washington State Growth Management Act (RCW 36.70A.70) requires all new development to be consistent with the existing or planned street system capacities. The City of Yakima adopted [YMC Ch. 12.08](#) to implement this local requirement. The information you provide with this application will be used to estimate the impact of your development upon the PM Peak Hour traffic on the City of Yakima arterial streets.

City of Yakima, Planning Division
129 North 2nd Street, 2nd Floor, Yakima, WA 98901
Phone#: (509) 575-6183 Email: ask.planning@yakimawa.gov

Check <https://www.yakimawa.gov/services/planning/land-use-application-forms/> for the most current version of this application form.

**COMMUNITY DEVELOPMENT DEPARTMENT****Planning Division****129 N. 2nd St., Yakima, WA 98901****Phone: (509) 575-6183 Email: Ask.Planning@yakimawa.gov****TRAFFIC CONCURRENCY REVIEW**
LAND USE APPLICATION FORM ([YMC CH. 12.08](#))

Please complete this page and the attached forms. If you have any questions about this form or the application process, please ask to speak with a planner. All necessary attachments and the filing fee are required upon submittal. Filing fees are non-refundable.

APPLICANT INFORMATION:

Name: _____ Company (if applicable): _____

Phone Number: _____ Email Address: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Interest in Property: Property Owner Agent Purchaser Other: _____**PROPERTY OWNER INFORMATION (check if same as applicant**

Name: _____

Phone Number: _____ Email Address: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

SUBJECT PROPERTY INFORMATION

Address: _____

Parcel Number(s) (if lengthy, attach on separate document): _____

Legal Description (if lengthy, attach on separate document): _____

Current Zoning Designation:

 SR R-1 R-2 R-3 B-1 B-2 HB SCC LCC CBD GC AS RD M-1 M-2**CERTIFICATION**

I certify that the information on this application and the required attachments are true and correct to the best of my knowledge.

Property Owner's Signature

Print Name

Date

Applicant's Signature

Print Name

Date

STAFF USE ONLY:

File/Application #: _____

Date Paid: _____ Received By: _____ Amount Paid: _____

Receipt No.: _____



TRAFFIC CONCURRENCY REVIEW

LAND USE APPLICATION FORM (CONT'D)

APPLICATION QUESTIONS:

1. Type of Use (check one):

Residential Commercial Industrial

2. Use Information (complete the appropriate column in accordance with the category checked above):

| RESIDENTIAL USES: | COMMERCIAL USES: | INDUSTRIAL USES: |
|---|--|--|
| Housing Type*: <i>(Single-family, Two-Family (Duplex), etc.)</i> | Describe Use*: _____ _____ _____ | Describe Use*: _____ _____ _____ |
| Special Population*: <i>(e.g. Nursing Home)</i> | Gross Floor Area: _____ _____ _____ | Gross Floor Area: _____ _____ _____ |
| Other*: <i>(Group Home, Daycare, etc.)</i> | Parking Spaces Required: _____ Provided: _____ | Parking Spaces Required: _____ Provided: _____ |
| Number of Units: _____ | Number of Employees: _____ | Number of Employees: _____ |

****Use must come from the Table of Permitted Land Uses (YMC 15.04.030)***

3. Project Description:

Submit this form with a site plan, the application fee, and any other attachments to the City of Yakima Planning Division. It will be reviewed by the City's Traffic Engineer and you will receive a Notice of Decision explaining the Findings of the resulting analysis. Please review the Decision when it is sent to you, as you only have 14 days to file a Request for Reconsideration or an Appeal.

Questions? Contact the City of Yakima Planning Division at ask.planning@yakimawa.gov or (509) 575-6183.