



City of Yakima

Extension of Zoning and Subdivision Approvals Application Packet

About this Application:

ZONING APPROVALS: A valid zoning decision may be extended one time only for up to one additional year if approved by the Administrative Official. An extension shall be issued for good cause only and the burden of showing cause shall be upon the applicant. The Administrative Official may approve the extension, approve the extension with conditions to assure the work will be completed timely, or disapprove the extension.

SUBDIVISION APPROVALS: A subdivision approval may be extended one time for up to one additional year.

Short Plats (9 lots or fewer) may be extended by the Subdivision Administrator.

Long Plats (more than 9 lots) may be extended by City Council upon a showing that the applicant has attempted in good faith to submit the final plat within the submission timeline and on the basis of the past diligence and future plans of the subdivision applicant, as well as the original recommendation.

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

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EXTENSION OF ZONING AND SUBDIVISION APPROVALS

LAND USE APPLICATION FORM (YMC Ch. [15.12](#), [14.15](#), & [14.20](#))

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

APPLICATION INFORMATION

File/Application # for the Approval Sought to be Extended: _____

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.: _____		



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**EXTENSION OF ZONING AND SUBDIVISION APPROVALS
LAND USE APPLICATION FORM (CONT'D)**

DESCRIBE IN DETAIL THE REASON AN EXTENSION IS NEEDED AND EXPLAIN ANY EFFORTS TAKEN TO COMPLY WITH THE ORIGINAL TIMEFRAME: