



# PRE-APPLICATION CONFERENCE FORM

City of Airway Heights  
1149 S Garfield Rd Suite A  
Airway Heights, WA 99001  
Phone (509) 244-5514  
Fax (509) 413-1382  
www.cawh.org

## PURPOSE

Proponents of a land use activity or commercial development within the City of Airway Heights must schedule a Pre-Application Conference. The purpose is to allow City staff to discuss and guide you through the regulations and possible impacts to your development proposal and provide such information to assist in preparing for formal submittal.

Possible impacts include, but are not limited to: zoning, environmental, building and fire, stormwater drainage, frontage improvements, site access, sewer and water connections, and other additional requirements including fees associated with your project.

The following City departments are typically represented to give the proponent written comments applicable to their proposed project:

- Planning
- Building
- Public Works
- Fire

Commercial

Land Use Action

Site Address: \_\_\_\_\_

Parcel Number(s): \_\_\_\_\_

Project Lot Size(s) (Acreage or SQ FT): \_\_\_\_\_

Existing Use of Site: \_\_\_\_\_

Proposed Use of Site: \_\_\_\_\_

Proposed Number of Lots: \_\_\_\_\_

Existing:  Sewer     Septic    Proposed:  Sewer     Septic

## PROPERTY OWNER

Check Box If Primary Contact

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Email: \_\_\_\_\_

## OWNERS REPRESENTATIVE

Contractor     Architect     Engineer     Other

Check Box If Primary Contact

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Email: \_\_\_\_\_

**I CERTIFY THAT THE ABOVE INFORMATION FURNISHED BY ME IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.**

Owner/Applicant

Date

**FOR COMMERCIAL STRUCTURES ONLY:**

Occupancy Group:  A  B  E  F  H  I  M  R  S  U

Construction Type:      Type I                      Type II                      Type III                      Type IV                      Type V  
 A  B                       A  B                       A  B                       A  B                       A  B

Square Footage: \_\_\_\_\_                      Number of Stories: \_\_\_\_\_

Automatic Fire Suppression System:  YES  NO      Building Waste Disposal:  YES  NO  
Fire Alarm System:  YES  NO                      Proposed Food Service Facility:  YES  NO

**FOR COMMERCIAL STRUCTURES AND LAND USE:**

Proposed Name of Project, (if available): \_\_\_\_\_

**Proposal:** Provide a detailed description of the proposed project including, but not limited to, the changes to the site, landscaping, number of lots and uses proposed.

**SPECIFIC ISSUES/QUESTIONS YOU HAVE ABOUT YOUR PROJECT:**

**\$500 Application Fee.** Fee will be credited towards formal land use or commercial building permit application fee as identified in pre-application conference, if filed within one (1) year of pre-application conference date.

**REQUIRED PLANS**

**Site Plan showing all of the following: 1 digital copy (PDF) to be provided**

- Plans to drawn to scale (minimum 1"=20').
- North Arrow (plans oriented north).
- Vicinity map, parcel number(s) and address (if known or TBD).
- Property lines/site boundary dimensions, any known and proposed easements.
- Nearest cross streets.
- Proposed street access location(s).
- Parking layout with number of stalls, including ADA Accessible parking/aisleways.
- All utility locations.
- Existing and proposed fire hydrant locations.
- Property Owner name(s), address, phone number, and email.
- Location and type of proposed landscaping.
- Existing and proposed impervious surfaces.
- Existing and proposed stormwater drainage, type(s) and locations(s).
- On-site circulation including loading areas, fire access lanes, pedestrian walkways.
- Existing and proposed building location(s), dimensions, total area Use or occupancy classification of structure(s).
- Setback distances from all property lines for existing and proposed structures. Setbacks between structures on site.
- Trash and recycling storage areas.
- Location of utility poles, street lights, proposed on site lighting.
- Primary contact person's name, address, phone number, and email.

**Proposed building plan(s) showing all of the following: 1 digital copy (PDF) to be provided**

- Building use/occupancy – current and/or proposed.
- Building layout (note area use and sq. ft. example: 1,000 sq. ft. office, 5,000 sq. ft. storage).
- Type of construction (wood frame, steel, cmu).
- Height of building to peak of roof.
- Number of stories, basement (if applicable).
- Exiting (stairs, doors, travel distance to exits).
- Fire barriers and type(s), if known.
- Number of restrooms.
- Type of heating, i.e. gas, electric.
- If an existing building, is the proposal a Change of Use, Addition, or Remodel?
- Locations of fire protection equipment (sprinkler systems, standpipes, alarm systems).

**HOW DO I SCHEDULE A PRE-APPLICATION CONFERENCE**

Upon completion of required plans and application, contact the Building Department to schedule an appointment for submittal.

**The application will not be accepted if the required materials are not provided or without payment of application fee.**

**WHEN WILL MY PRE-APPLICATION CONFERENCE BE SCHEDULED**

Pre-Application conferences are typically scheduled 2 - 4 weeks from the date of complete submittal. Scheduling allows staff adequate time to review your proposed project prior to meeting with the project proponent. Pre-Application Conferences are scheduled for Wednesday mornings at 10:30 am.

**ADDITIONAL INFORMATION**

For additional information please contact the City of Airway Heights at the following numbers:

- Building Department .....(509) 244-5514
- Planning Department .....(509) 244-2552
- Public Works Department .....(509) 244-5429
- Fire Department .....(509) 244-3322 Ext #3