



CITY OF SNOHOMISH

Founded 1859, Incorporated 1890

116 UNION AVENUE · SNOHOMISH, WASHINGTON 98290 · TEL (360) 568-3115 FAX (360) 568-1375

INSTRUCTIONS FOR COMPILING THE ADJACENT PROPERTY OWNERS LIST

The Snohomish Municipal Code 14.55.040 (C) requires that notification of a proposed action be mailed to property owners of record and all street addresses within 300 feet of any point of the subject property. It is the responsibility of the applicant to provide accurate ownership information for the properties that must be notified by the Planning and Development Services Department. Failure to provide an adequate list may result in an incomplete application or an additional notification and comment period.

When submitted to Planning and Development Services, the adjacent property owner names, tax parcel identification number(s), and mailing addresses **must** be given on Avery 5160 white mailing labels or a compatible label format. **Also include an address label for the applicant and any parties of record.** The attached affidavit of adjacent property owners list must be notarized and submitted together with your application.

HOW TO OBTAIN PROPERTY OWNERS AND TENANT INFORMATION:

The required information may be obtained from the Snohomish County Assessor at the Customer Services Center, on the 1st Floor of the Snohomish County Administration East Building, 3000 Rockefeller Avenue, Everett, WA. For directions, please call the Assessor's Office at (425) 388-3433. The Assessor's office will assist you in identifying the property owners' tax parcel identification numbers and appropriate mailing addresses, if different than the site address. Tax parcel identification numbers and mailing addresses may also be obtained from a title company.

If the property is not owner-occupied, a label must be provided with the name and mailing address of the property owner, as well as a separate label for the resident at the site address. If it is not clear whether the owner lives at the property address, the label should be addressed to "[property owner's name] or RESIDENT." The address mailing list shall not be more than six months old.

WHEN THE PROPERTIES INCLUDE CONDOMINIUMS AND/OR APARTMENTS:

When the properties within the notification area include condominiums, labels must be provided for the owner of each unit.

When the properties within the notification area include apartments, labels must be provided for the owner of the building, as well as a separate label for the resident of each unit.

WHEN THE PROPERTY IS VACANT:

If a lot is vacant, a label must be provided with the name and mailing address of the property owner.

MAILING LIST FORMAT:

Please provide the information in the following format:

Project Name:	Project Address:	
Applicant Name Address City, State Zip Code	Tax I.D. (Parcel) Number Owner/Resident's Name Property Address, Apt/Condo # City, State Zip Code	Tax I.D. (Parcel) Number Owner/Resident's Name Property Address, Apt/Condo # City, State Zip Code
Tax I.D. (Parcel) Number Owner/Resident's Name Property Address, Apt/Condo # City, State Zip Code	Tax I.D. (Parcel) Number Owner/Resident's Name Property Address, Apt/Condo # City, State Zip Code	Tax I.D. (Parcel) Number Owner/Resident's Name Property Address, Apt/Condo # City, State Zip Code

The affidavit must be notarized and submitted with your application. See the affidavit on the back side of this page.



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Attach this notarized declaration to the Adjacent Property Owners List.

AFFIDAVIT OF ADJACENT PROPERTY OWNERS LIST

STATE OF WASHINGTON)
) ss
COUNTY OF SNOHOMISH)

Address of Project Site: _____, Snohomish, Washington.

Project Site Tax Parcel Number(s): _____

On my oath, I certify that the names and addresses provided represent all properties located within 300 feet of the subject property.

Dated this _____ day of _____, 20____.

Applicant/Applicant's Representative Printed Name

Signature of Applicant/Applicant's Representative

SUBSCRIBED AND SWORN before me on this _____ day of _____, 20____

Sign Name: _____

Print Name: _____

NOTARY PUBLIC in and for the State of Washington,

Residing in: _____

My Commission expires: _____