



5411 23rd St E, Fife, WA
(253) 922-9624

Development Review Committee (DRC) Meeting Request Form

City of Fife
Date
Stamp

Date and Time Requested: _____

Contact _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

Email _____

Applicant (if different) _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

Email _____

Name of Proposal _____

Site Address _____

Parcel Number(s) _____

Existing Land Use _____

Description of Project

ACKNOWLEDGEMENT

I certify that the information in this meeting request, including all submittals and attachments, is true and correct to the best of my knowledge. I also acknowledge the DRC meeting is for informational purposes only and does not “vest” an application. Information provided by City staff at DRC meetings is general, not binding and will not be construed as an approval of a concept or design.

Signature _____

For City staff use

Comprehensive Plan Designation _____ Existing Zoning _____

Critical Areas Onsite? Yes No If yes, type: _____

Floodplain? Yes No Occupancy: _____