Master Land Use Application

Supporting documents are required for project review.
See the Administrative Manual for Planning Permits and Fee Schedule for permit submittal requirements and fees.

Please schedule an appointment at Planning and Building Submittal Appointments.

<table>
<thead>
<tr>
<th>Property Owner(s)</th>
<th>Site Address</th>
<th>Parcel Numbers</th>
</tr>
</thead>
</table>

Select Application Type  Site Plan and Design Review - Major
Select Application Type  Adjustments to Approved Land Use - Major
Consolidated Review Requested (BIMC2.16.070)  Yes

Project Description and Project Name  WINTERGREEN Townhomes

In addition to the above applications, we are also applying for a preliminary long subdivision.

THE WINTERGREEN 74 TH PROJECT IS PROPOSED FOR THE LAST 2 LOTS WITH 2.03R. LIMO FERA. ADDING THE 74 TOWNHOMES TO THE WINTERGREEN CENTER THAT HAS KEYBANK WINTERGREENS AND VIRGINIA MASON WILL CREATE A "NICE HOUSE" CENTER. THIS PROJECT ALSO MEETS THE BIMC AFFORDABLE HOME REQUIREMENTS.
Project Contacts

Applications must be submitted by the property owner or the owner’s designated agent. A notarized Owner/Agent Agreement must accompany this application if submitted by a designated agent.

Property Owner: VWA-BI-LOTS- LLC (WISCONSIN)
Mailing Address: 42000 BURTON TR
HUNTING VALLEY, OHIO 44022

Email: 
Phone: 216-464-5550

Name of Authorized Agent (Notarized Owner/Agent Agreement form required):
CENTRAL HIGHLANDS INC.
Mailing Address: PO BOX 2879, POULSBEO WIA 98370

Email: SMITH@COMCAST.NET
Phone: 360-779-7157 or CELL 360-440-0814

Statement of Affirmation REQUIRED

I affirm, under penalty of perjury, that all answers, statements, and information submitted with this application are correct and accurate to the best of my knowledge. I also affirm that I am the owner or designated agent of the subject site. Further, I grant permission to any and all employees and representatives of the City of Bainbridge Island and other governmental agencies to enter upon and inspect said property as reasonably necessary to process this application.

VWA-BI-LOTS- LLC
Owner Name - Print

[Signature]
Owner Name - Signature

[Date]

CENTRAL HIGHLANDS INC
Agent Name and Business Name - Print

[Signature]
Agent Name - Signature

[Date]

City of Bainbridge Island
Department of Planning & Community Development
280 Madison Ave N
Bainbridge Island, WA 98110
PermittingSubmittal@bainbridgewa.gov