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**CRITICAL AREAS
REASONABLE USE EXCEPTION
APPLICATION**

Date: _____

Application #: _____

Lynnwood Link Extension in Mountlake Terrace, extending north along the Interstate 5 corridor for approximately

1. Site Address: 2.2 miles from the SR 104 Interchange. Includes a new light rail station at the MLT transit center.
2. Description of Exemption: Multiple reasonable use exceptions requested along the corridor in order to build an essential public facility. Sound Transit is requesting use of critical habitat and Class IV landslide areas as detailed in Section 10 of individual site narratives and Section 13 of Guideway narrative. See attached list of exceptions on respective CUP sites.

PROJECT SITE INFORMATION:

1. Size of subject site in: Square Feet see individual site narratives Acre(s) see individual site narratives

2. Critical area for which reasonable use exemption is requested: *Check all that apply; complete table.*

| ? | Type | Classification | Exemption request | Special study/report |
|---|-----------------------|-------------------------------------|--------------------------------|-----------------------|
| | Aquifer recharge area | | | |
| | Flood hazard | | | |
| x | Geologic hazard | Class IV landslide hazard area | see individual site narratives | Geotechnical report |
| | Stream | | | |
| | Wetland | | | |
| x | Wildlife habitat | Critical Habitat - Priority habitat | see individual site narratives | Critical areas report |

3. Existing Comprehensive Plan, Zoning designations and Land Use:

| | Comprehensive Plan | Zoning | Land Use |
|-------------------|--------------------|--------|--------------------------------|
| a. Subject site: | | | see individual site narratives |
| b. North of Site: | | | |
| c. East of Site: | | | |
| d. South of Site: | | | |
| d. West of Site: | | | |

4. Critical area type for which reasonable use exemption is requested:

| ? | Type | Classification | Exemption request | Special study/report |
|---|-----------------------|-------------------------------------|--------------------------------|-----------------------|
| | Aquifer recharge area | | | |
| | Flood hazard | | | |
| x | Geologic hazard | Class IV landslide hazard area | see individual site narratives | |
| | Stream | | | |
| | Wetland | | | |
| x | Wildlife habitat | Critical Habitat - Priority habitat | see individual site narratives | Critical areas report |

5. Are there any mapped or known wetlands, streams, floodplains, steep slopes, or potentially valuable habitats or species within the following distances of the site (consider City's inventory maps and other pertinent information)?

| MTMC 16.15.020 (E) Applicability | Yes | No | Unknown |
|---|-----|----|---------|
| 1. A distance equal to, or less than, the required critical area buffer width and any building setback; | x | | |
| 2. On a portion of a site with a critical area when the critical areas' buffer overlaps the subject site; | x | | |
| 3. A distance equal to, or less than, two hundred (200) feet upland from a stream, wetland, or water body, not otherwise regulated by Shoreline Management Chapter 16.10 MTMC; | x | | |
| 4. Within 100 feet of a priority habitat area; | x | | |
| 5. Within a floodway or floodplain; | | x | |
| 6. A distance equal to, or less than, 330 feet from a priority habitat point as mapped by the Washington State Department of Fish and Wildlife; or, within 50 feet of a critical slope. | x | | |


6. Has a critical area review, or other environmental review, been conducted for another project located on or adjacent to the site?
 ___ Yes (list and attach copies) _____
 ___ No x Don't know

7. Have any critical areas or protection easements been recorded on the title of the property or adjacent properties?
 ___ Yes (list recording number(s) and attach copies) _____, _____
 ___ No x Don't know

8. Have the submittal materials and filing requirements, including responses to the reasonable use exception criteria per MTMC 16.15.360, been prepared, and attached to this application?
 x Yes
 ___ No

SIGNATURE:

I certify to the best of my knowledge, the information provided on this application is true and correct.

Signature: Owner / Agent  Date 9/11/18
 Print: Owner / Agent Karin Ertl Date 9/11/2018

OFFICE USE ONLY

Received By _____ Date _____

Application Fee \$ _____ Date _____ Receipt # _____