

Pre-Application Meeting Request

Meeting date¹: _____

Proponent/Attendee: _____

Telephone Number: _____ Fax: _____

Email Address: _____

Property Address: _____

Tax Parcel Number: _____

Type of Development Application: _____

I will attend a City of Lynden Technical Review Committee meeting on the above date for the purpose of conducting a preliminary review of my proposed development. I understand that the members of the Technical Review Committee reviewed my project based on the information that I provided to them at this meeting. I further understand the information provided by the Technical Review Committee regarding this project is preliminary in nature and is not binding until such a time as a formal application has been made and the final review of the project has been completed. Consideration of a project by the Technical Review Committee does not constitute or guarantee project approval.

Signature

Date

¹ Pre-Application meetings are scheduled the 1st and 3rd Thursday of each month at 9:00 A.M. This information must be provided to the Lynden Planning Department by 5:00 P.M. on the Friday before the proposed meeting date.