



WINTER GREEN TH
PM 51836

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](#).

Property Owner(s)

Site Address

Parcel Numbers

VWA-BI-LOTS-LLC WINTER GREEN LN, COBI
PARCEL NUMBERS - 232-502-3-094-2009 AND 232502-3-092-2001

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 WINTER GREEN Townhomes

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

THE WINTER GREEN 74 TH. PROJECT IS PROPOSED FOR THE LAST 2 LOTS WITH 2.93A. LAND AREA. ADDING THE 74 TOWNHOMES TO THE WINTER GREEN CENTER THAT HAS KEYBANK, WALGREENS AND VIRGINIA MASON WITH CREATE A "MIXED USE" CENTER. THE PROJECT ALSO NEED THE BMC AFFORDABLE HOME REQUIREMENTS.

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



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 (Visconti)
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, POUKOA WA 98370
Email:	SMITHHOUSE@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

SEE DESIGNATED AGENT FORM ON FILE
Owner Name - Signature

Date

Owner Name - Print

Owner Name - Signature

Date

CENTRAL HIGHLANDS INC
Agent Name and Business Name - Print

DAVID SMITH, PRES
Agent Name - Signature

Date

EFFECTIVE DATE
2-18-2021
~~2-25-2021~~

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