



**CITY OF STANWOOD  
CRITICAL AREA REPORT**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Associated Permit #** \_\_\_\_\_ **Parcel No.** \_\_\_\_\_

**Site Address:** \_\_\_\_\_

**Proposed Activity: (attach site plan)** \_\_\_\_\_

**Comments:**

**CITY USE ONLY**

- No critical areas present.**
- Critical areas present, but no impact.**
- Critical may be affected by proposal.**

Reviewed by:

\_\_\_\_\_  
Community Development Director or Representative

\_\_\_\_\_  
Date