

Thurston County Environmental Health

3000 Pacific Avenue SE, Suite 225 Olympia, WA 9850-8809 (360)867-2673 / (360)867-2660 (Fax) TDD Line (360) 754-2933 <u>permit@co.thurston.wa.us</u> www.thurstoncountybdc.com

## WINTER WATER STUDY

STAFF USE ONLY	DATE STAMP
LABEL	
PLEASE NOTE:	Reset Form
ALL APPLICATIONS MUST BE	
COMPLETED IN BLACK OR BLUE INK	
ONLY	
	Intake by:

<u>NOTE:</u> The Winter Water Study Application fee that is paid at the time this application is submitted, (referred to as the base fee) is a <u>down payment</u>. It allows for five hours of review time. Most Winter Water Studies are completed in <u>five to six hours</u>. When the study is completed, the applicant will be billed for any additional review time over five hours, at the standard hourly rate in effect at the time the review took place. The Winter Water Study report will be sent to the applicant after the review fees have been paid. If you do <u>NOT</u> wish to have the complete Winter Water Study review, please check the box below, indicating that you wish the review to be stopped after five hours and do not wish to incur any additional review fee. Please be aware that a five-hour review MAY result in a report that is not conclusive or may not have useful results.

## **YES, PLEASE STOP THIS WINTER WATER STUDY AFTER THE FIVE HOUR BASE FEE HAS** BEEN USED Applicant initials\_\_\_\_\_\_

Owner/Applicant	Applicant Only		
Name	Company Name_		
Mailing Address		_City	State_Zip
Telephone Number			
Signature		Da	ite
(As owner, or agent on owner's behalf, I hereby affirm access to the property and structures for review and in		ided is accurate,	and grant employees of Thurston County
Owner (if different than Applicant)			
Name	Company Name_		
Mailing Address		_City	StateZip
Telephone Number			
WATER SUPPLY: Existing Pro	posed		
□ Single Family well □ Two Par	rty Well		
Community Water System: Name:		ID#	Group A 🗆 B 🗖
□□ Other			I

## **PROPERTY INFO:**

Name of body of water:		
Has the property ever flooded?	□ No □ Do not know □ Yes, when?	_(If yes, show area on site plan)
Slopes greater than 20%?	No Yes	
Directions to property:		
Slopes greater than 20%?		_(If yes, show area on site plan)

Property access issues (locked gate, code required, etc):

**<u>SITE PLAN INFORMATION: Winter Water Study Application:</u>** A scaled site plan (11"X17" maximum size) must be submitted, showing the property boundaries, all existing and proposed development on the property, and the locations of all monitoring ports and/or test holes.

**APPEAL** Any person aggrieved by a decision, an inspection, or a notice made by the Health Officer shall have the right to appeal the matter as specified in Article 1 of the Thurston County Sanitary Code.

BILLING INVOICES
The base application fee charged at the time of application covers base hours listed on the fee schedule. When the base
hours by a Department are used, a monthly billing invoice will be generated for additional hours at the hourly rate listed on the fee schedule. Should review of the project exceed the base hours allotted, billing invoices shall be mailed to:
Owner Applicant Point of Contact