

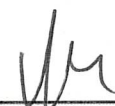
**Building Development Center**

2000 Lakeridge Dr. SW, Olympia, WA 98502

(360)786-5490 / (360)754-2939 (Fax)

TDD Line (360) 754-2933

Email: permit@co.thurston.wa.uswww.thurstoncountybdc.com*Creating Solutions for Our Future***MASTER APPLICATION****This application must accompany a project specific supplemental application.**

STAFF USE ONLY		DATE STAMP
NOTE: ALL IN BLACK	2020104385 20-111036 XB Area: Site: 4849 JOHNSON POINT RD NE OLY 11928320500 Sub Type: Class 4 General	Intake By: <u></u>
	Gopher Soils <input type="checkbox"/> YES <input type="checkbox"/> NO Prairie Soils <input type="checkbox"/> YES <input type="checkbox"/> NO	

PROJECT DESCRIPTION Natural area preserve for public use purposes focusing on youth education**PROPERTY INFORMATION**

1. Tax Parcel Number(s) 11928230100 ; 11928230200 ; See continued below.
2. Subdivision Name Not a subdivision Lot # Not applicable
3. Property Address 4849 Johnson Point Rd NE City Olympia Zip Code 98516
4. Directions to Property (from Thurston County Courthouse)
See attached. 1.) Tax Parcel Numbers continued: 11928320500; 11929110500;
11928220800; 1192914000; 11929440200; 11928320000

PROPERTY ACCESS

5. Property Access ☐ Existing ☒ Proposed
6. Access Type ☒ Private Driveway ☐ Shared Driveway ☐ Private Road ☐ Public Road
7. Property Access Issues (locked gate, gate code, dogs or other animals) ☒ No ☐ Yes
Point of contact will be contacted for gate code prior to site visit. Gate codes written on this form are public information. Property owner is responsible for providing gate code and securing animals prior to site visit.

WATER/SEPTIC

8. Water Supply ☐ Existing ☒ Proposed
9. Water Supply Type ☐ Single Family ☐ Two Party Well ☐ Group A ☒ Group B
WATER SYSTEM NAME Private on-site well
10. Waste Water Sewage Disposal ☐ Existing ☒ Proposed
11. Sewage Disposal System Type ☒ Individual Septic System ☐ Community System ☐ Sewer
NAME OF PUBLIC SYSTEM Not public - on-site private septic system

BILLING OF INVOICES

The fee charged at the time of application covers base hours listed on the fee schedule. When base hours by a Department are used, a monthly billing invoice is generated 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

PROPERTY OWNER (additional property owner sheet can be obtained online at www.thurstoncountybdc.com)

Property Owner Name Capitol Land Trust

Mailing Address 4405 7th Ave. SE Suite 306 City Lacey State WA Zip Code 98503

Phone 360.943.3012 Cell () Fax ()

EMAIL Quita Terrell <quita@capitolandtrust.org>

Communication from staff provided by Email? ☒ YES ☐ NO

Property Owner Signature* David Winter

Digitally signed by David Winter
Date: 2020.09.02 13:54:59 -07'00'

Date 9/2/2020

APPLICANT

Applicant Name Capitol Land Trust

Mailing Address 4405 7th Ave. SE Suite 306 City Lacey State WA Zip Code 98503

Phone (360.943.3012) Cell () Fax ()

EMAIL Quita Terrell <quita@capitolandtrust.org>

Communication from staff provided by Email? ☒ YES ☐ NO

Signature* David Winter

Digitally signed by David Winter
Date: 2020.09.02 13:56:27 -07'00'

Date 9/2/2020

POINT OF CONTACT (Person receiving all County correspondence)


Name Robert W. Droll

Mailing Address 4405 7th Ave. SE Suite 203 City Lacey State WA Zip Code 98503

Phone (360) 456-3813 Cell (360.481).6479 Fax ()

EMAIL bob@rwdroll.com

Communication from staff provided by Email? ☒ YES ☐ NO

Signature* 

Date 9/16/2020

*DISCLAIMER

Application is hereby made for a permit(s) to authorize the activities described herein. I certify that I am familiar with the information contained in the application package and that to the best of my knowledge and belief, such information is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activities. I hereby grant to the agencies to which this application is made or forwarded, the right to enter the above-described location to inspect the proposed, in-progress or completed work. I agree to start work only after all necessary permits/approvals have been received.



Community Planning & Economic Development
 2000 Lakeridge Dr. S.W., Olympia, WA 98502
 (360)786-5490 / (360)754-2939 (Fax)
 TTY/TDD Line 711 or 1-800- 833-6388
 Email: permit@co.thurston.wa.us
www.thurstoncountybdc.com

Supplemental Application
FOREST LAND CONVERSION
 Class IV General – Requires Environmental Checklist

STAFF USE ONLY	DATE STAMP
<p align="center" style="font-size: 2em; opacity: 0.5;">T A R E T</p> <p>2020104385 20-111036 XB Area: Site: 4849 JOHNSON POINT RD NE OLY 11928320500 Sub Type: Class 4 General</p> <p align="center" style="font-size: 1.2em;">BLUE INK <u>ONLY</u></p>	<p>Intake by: <u></u></p>

This application form cannot be submitted alone. In addition to this form, a complete application package includes:

Applicant Use	SUBMITTAL CHECKLIST	Staff Use Only
<input checked="" type="checkbox"/>	Master Application.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Applicable Application Fee.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Logging Site Map/Abbreviated Drainage Plan and Supplemental Checklist.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Environmental Checklist (SEPA).	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Special reports (may include wetland delineation, geotechnical report, mitigation plan, or other). <i>Submittal of special reports must include original paper documents and electronic .pdf files.</i>	<input type="checkbox"/>
	Flag Packet – Provided by Permit Center and will be given to applicant at the time of application.	<input type="checkbox"/>

1. TYPE OF APPLICATION ☒ Forest Land Conversion ☐ Conversion Option Harvest Plan

2. ZONING JURISDICTION

ZONING RRR 1/5

☒ Rural County ☐ Lacey UGA ☐ Tumwater UGA ☐ Olympia UGA

3. PARCEL INFORMATION

Parcel Acreage 108 (include cumulative acreage for all contiguous parcels in same ownership)

Acres to be Harvested 1.7

4. **OPERATOR INFORMATION**

Full Legal Name and/or Company/ Division of Operator Capitol Land Trust

Business Address 4405 7th Ave SE, Ste 306 City Lacey STATE WA ZIP 98503

Phone (360) 943-3012 FAX(

EMAIL info@capitolandtrust.org

5. **ACCESS** (Name of road or street for which access is or will be gained)

Existing Access Private driveway exiting west off of Johnson Pt Rd. across from Puget Rd.

Proposed Access Private driveway directly off of Johnson Pt Rd. 1,300' north of existing access

Special Directions, if any:

6. **FOREST TAX REPORTING ACCOUNT NUMBER** 800 064 653

(For tax reporting information or tax numbers call 1-800-548-8829)

7. **TIMBER HARVEST** (Complete all blocks that apply and LABEL EACH TYPE SEPARATELY ON THE SITE MAP)

UNIT # (Note on site map)	TYPE OF HARVEST (Even-aged, Uneven-aged, Salvage and/or Right of Way)	TREES PER ACRE REMAINING AFTER HARVEST ACRES OUTSIDE OF CLEARING LIMITS <i>Approximate</i>	METHOD OF HARVEST (Ground Cable, Highlead, Skyline, Shovel, Rubber Tired Skidder, Tracked Skidder, Animal, Helicopter or Balloon)	ACRES (per type of harvest)	PERCENT OF VOLUME TO BE CUT (ACRES CLEARED) <i>Approximate</i>	ESTIMATED VOLUME TO BE HARVESTED (in MBF) <i>Estimated volume to be harvested in thousand board feet (MBF)</i>
1	even-aged ROW	400	shovel	1.7	100%	31

8. **ROAD** (Complete all blocks that apply and LABEL EACH TYPE SEPARATELY ON THE SITE MAP)

TYPE OF ACTIVITY	TOTAL LENGTH IN FEET	TOTAL LENGTH OF ENDHAUL/OVERHAUL (no sidecast) CONSTRUCTION Show All Locations On Map	STEEPEST SIDE SLOPE ROAD CROSSES (in percent)
New road construction	600	200 feet	2%

Forest Land Conversion Supplemental Site Plan/Abbreviated Drainage Plan Checklist

This site plan/abbreviated drainage plan shall contain and/or address the following in a clear, accurate and intelligible form. Submit this checklist with your application. Check the box for each item addressed.

Applicant Use		Staff Use Only
<input checked="" type="checkbox"/>	1. Vicinity Map. Locate the property on a large scale map or the appropriate page of a county map.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	2. Logging Site Plan/Abbreviated Drainage Plan drawn to a standard interval engineer scale on an 11 X 17 or smaller sheet and no larger than fifty (50) feet to the inch and not less than two hundred (200) feet to the inch, which contains the following:	<input type="checkbox"/>
<input checked="" type="checkbox"/>	a. All property boundaries and dimensions.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	b. North arrow and map scale.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	c. Topographic information showing two-foot contours for the entire subject parcel or parcels and a minimum of fifty feet into adjacent parcels, based on available county information. The topographic information may be generalized to the smallest, even-numbered, contour interval that is legible in areas of steep slopes where two-foot contour lines would otherwise be illegible to read.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	d. Existing forested areas, areas to be cut and those to be retained.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	e. Areas to be stumped and graded.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	f. Existing and proposed roads, driveways, and landings.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	g. Location of all existing structures, septic tanks, drainfields, wells, underground storage tanks, etc.).	<input type="checkbox"/>
<input checked="" type="checkbox"/>	h. Location of any critical areas (wetlands, ponds, streams, steep slopes, seasonal drainages, marine bluffs, special habitat, canyons, ravines, water bodies, etc).	<input type="checkbox"/>
<input checked="" type="checkbox"/>	i. Shoreline areas within Shoreline Management Act jurisdiction.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	j. Note areas of the site in acres and area of harvesting in acres.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	k. Legend if symbols are used.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	l. Note areas of the site in acres and area of harvesting in acres.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	m. Adjoining street names.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	n. All easements encroaching onto the property (utility, road, railroad, natural vegetation, significant tree, etc.).	<input type="checkbox"/>
<input checked="" type="checkbox"/>	o. Areas to be graded, filled, excavated or otherwise disturbed.	<input type="checkbox"/>
<input checked="" type="checkbox"/>	p. Location and type of erosion control and sediment control measures.	<input type="checkbox"/>