



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.us

www.thurstoncountybdc.com

Creating Solutions for Our Future

MASTER APPLICATION

This application must accompany a project specific supplemental application.

STAFF USE ONLY	DATE STAMP
<p>NOTE: ALL APPLICATIONS AND SITE PLANS MUST BE COMPLETED IN BLACK OR BLUE INK <u>ONLY</u></p>	<p>THURSTON COUNTY RECEIVED</p> <p>NOV 08 2023</p> <p>BUILDING DEVELOPMENT CENTER</p>
<p>Gopher Soils <input type="checkbox"/> YES <input type="checkbox"/> NO Prairie Soils <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>Intake By: _____</p>

PROJECT DESCRIPTION Construction of adult salmon trap within the existing fish ladder at Centralia Diversion Dam

PROPERTY INFORMATION

1. Tax Parcel Number(s) 22601210100 ; _____ ; _____
2. Subdivision Name _____ Lot # _____
3. Property Address 20000 Cook Rd SE City Yelm Zip Code 98597
4. Directions to Property (from Thurston County Courthouse)
I-5 north from Lakeridge Dr SW and Deschutes Pkwy SW. Follow I-5 to exit 109. Continue on Martin Way E. Take Pacific Ave SE to WA-510 E. Follow WA-510 E and Yelm Hwy SE to Bald Hill Rd SE in Yelm. Follow Bald Hill Rd SE, _____

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 _____
10. Waste Water Sewage Disposal ☐ Existing ☐ Proposed
11. Sewage Disposal System Type ☐ Individual Septic System ☐ Community System ☐ Sewer
NAME OF PUBLIC SYSTEM _____

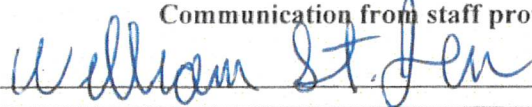
BILLING OF INVOICES

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 City of Centralia
Mailing Address 1100 N Tower Ave City Centralia State WA Zip Code 98531
Phone 360-330-7512 x4000 Cell 360-553-8679 Fax 360-458-2128
EMAIL MGoo@cityofcentralia.com
Communication from staff provided by Email? ☒ YES ☐ NO
Property Owner Signature*  Date 3-1-2021

APPLICANT

Applicant Name Nisqually Indian Tribe
Mailing Address 4820 She-Nah-Num Drive SE City Olympia State WA Zip Code 98513
Phone 3604565224 Cell (360) 784-5038 Fax ()
EMAIL stjean.william@nisqually-nsn.gov
Communication from staff provided by Email? ☒ YES ☐ NO
Signature*  Date 3-1-21

POINT OF CONTACT (Person receiving all County correspondence)

Name Chris Gourley (WDFW)
Mailing Address 600 Capitol Way North City Olympia State WA Zip Code 98501
Phone 360-902-8300 Cell 360-790-3118 Fax ()
EMAIL Chris.Gourley@dfw.wa.gov
Communication from staff provided by Email? ☒ YES ☐ NO
Signature* Christina L Gourley Date 02/25/21
Digitally signed by Christina L. Gourley
DN: cn=Chris Gourley, o=wa.gov, ou=Department of Fish and Wildlife, ou=Capitol and Asset
Management Program, cn=Christina L. Gourley
Date: 2021.02.25 08:34:52-0800

*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.