

Building Development Center

3000 Pacific Ave SE, Suite 100 Olympia, WA 98501 (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
2023103076 23-107931 XI Area: Site: 7505 LITTLE STONE LN SW OLYM N(13610130108 IN Sub Type: Priority Species	THURSTON COUNTY BECEIVED JUL 9-3-2023 BUILDING DEVELOPMENT CENTER
Gopher Soils 🗆 YES 🗆 NO Prairie Soils 🗆 YES 🗆 NO	Intake By:
PROJECT DESCRIPTION PUE Application for Steel building.	
PROPERTY INFORMATION	
1. Tax Parcel Number(s) 13610130108 ;;	
2. Subdivision Name N/A Lot #N/A	
3. Property Address 7505 Little Stone Ln SW City Olympia Zip Code 98512	
4. Directions to Property (from Thurston County Courthouse) TO STOP SIGN IN LITTCE FOCK. GO STRAIGHT THE SOUTH FXIT TO CITTLE ROCK. FOCKOW ROAD TO STOP SIGN IN LITTCE FOCK. GO STRAIGHT THEOLEH STOP SIGN. BO STRAIGHT PAST CHEVROND LITTLE ROCK TAVER NAROUT YAM ILE IS A STOP SIGN AT THE TIN THE ROAD, TURN LEFT GO STWICE, TURN LIT ON LITTLES TOLLE CINSW,	
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	
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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 WALTERSCHEIDT, JAMES L & LOIS J	
Mailing Address 7505 Little Stone Ln SW City Olympia State WA Zip Code 98512	
Phone () Cell (360) 301-3334 Fax ()	
EMAIL starion@comcast.net	
Communication from staff proyided by Email? VES NO	
Property Owner Signature Multi Author Date 3-/7-2023	
APPLICANT	
Applicant Name WALTERSCHEIDT, JAMES L	
Mailing Address 7505 Little Stone Ln SW City Olympia State WA Zip Code 98512	
Phone (
EMAIL starion@comcast.net	
Communication from staff provided by Email? VES NO	
Signature MM/M/NA/M/S Date 3-17-2023	
POINT OF CONTACT (Person receiving all County correspondence)	
Name JAMES L WALTERSCHEIDT	
Mailing Address 7505 Little Stone Ln SW City Olympia State WA Zip Code 98512	
Phone (
EMAIL starion@comcast.net	
Communication from staff provided by Email? VES NO	
Signature* / / / / / / / Date 3-77-2023	

*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.