

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					
NOTE: ALL APPLICATIONS AND SITE PLANS MUST BE COMPLETED IN BLACK OR BLUE INK ONLY						
Gopher Soils ☐ YES ☐ NO Prairie Soils ☐ YES ☐ NO	Intake By:					
PROJECT DESCRIPTION Subdivision of 11.284 acres into single-family ne	ighborhood.					
PROPERTY INFORMATION						
1. Tax Parcel Number(s) _09750029001 ;	;;					
Subdivision Name West Olympia 24th Ave.	Lot #					
3. Property Address 2000 24th Ave. NW City Olym	pia Zip Code 98502					
4. Directions to Property (from Thurston County Courthouse) Turn N onto Lakeridge Dr. SW; Turn left onto Deschutes Pkwy SW; Turn left of Take first exit at roundabout; Take first exit at roundabout; Veer left onto Sch						
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) \square No	$ ule{V}_{Yes}$ _Gate and fence protecting livestock					
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						
WATER SYSTEM NAME single-family well						
10. Waste Water Sewage Disposal Existing Proposed						
11. Sewage Disposal System Type Individual Septic System Community System Sewer						
NAME OF PUBLIC SYSTEM City of Olympia						
10. Waste Water Sewage Disposal ✓ Existing ☐ Proposed 11. Sewage Disposal System Type ☐ Individual Septic System ☐ Commun						

DigiSign Verified: 907FBC93-7396-47D4-BA59-BE9D9E2449F3

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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 Tamara M. Brathovde and Jeffrey C. Schwab					
Mailing Address 2000 24th Ave. NW City Olympia State WA Zip Code 98502					
Phone ()Fax ()					
EMAIL					
Communication from staff provided by Email? VES NO					
Property Owner Signature* Tamara Brathovde Jeffroy Schwib Date 02-09-2023					
Troperty Owner Signature					
APPLICANT					
Applicant Name RJ Development - Caleb Perkins					
Mailing Address 401 Central St. SE City Olympia State WA Zip Code 98501					
Phone <u>360 810 8356</u> Cell ()Fax ()					
EMAIL caleb@rjdevelopment.com					
Communication from staff provided by Email? VES NO					
Signature* Caleb Perkins District Caleb Perkins District Search Brighten logoment, LLC*; CN=Caleb Perkins District Company Signature* Date: 2023.02.08 10.28:33-08:00*					
POINT OF CONTACT (Person receiving all County correspondence)					
Name Caleb Perkins					
Mailing Address 401 Central St. SE City Olympia State WA Zip Code 98501					
Phone <u>360 819 8356</u> Cell ()Fax ()					
EMAIL caleb@rjdevelopment.com					
Communication from staff provided by Email? VES NO					
Signature* Caleb Perkins Dix C-US, E-caleb @fidevelopment, LLC*, CN=Caleb Perkins Date: 2023.02.08 10:27:13-08:00* Date: 2023.02.08 10:27:13-08:00* Date: 2023.02.08 10:27:13-08:00* Date: 2023.02.08 10:27:13-08:00*					

*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.