



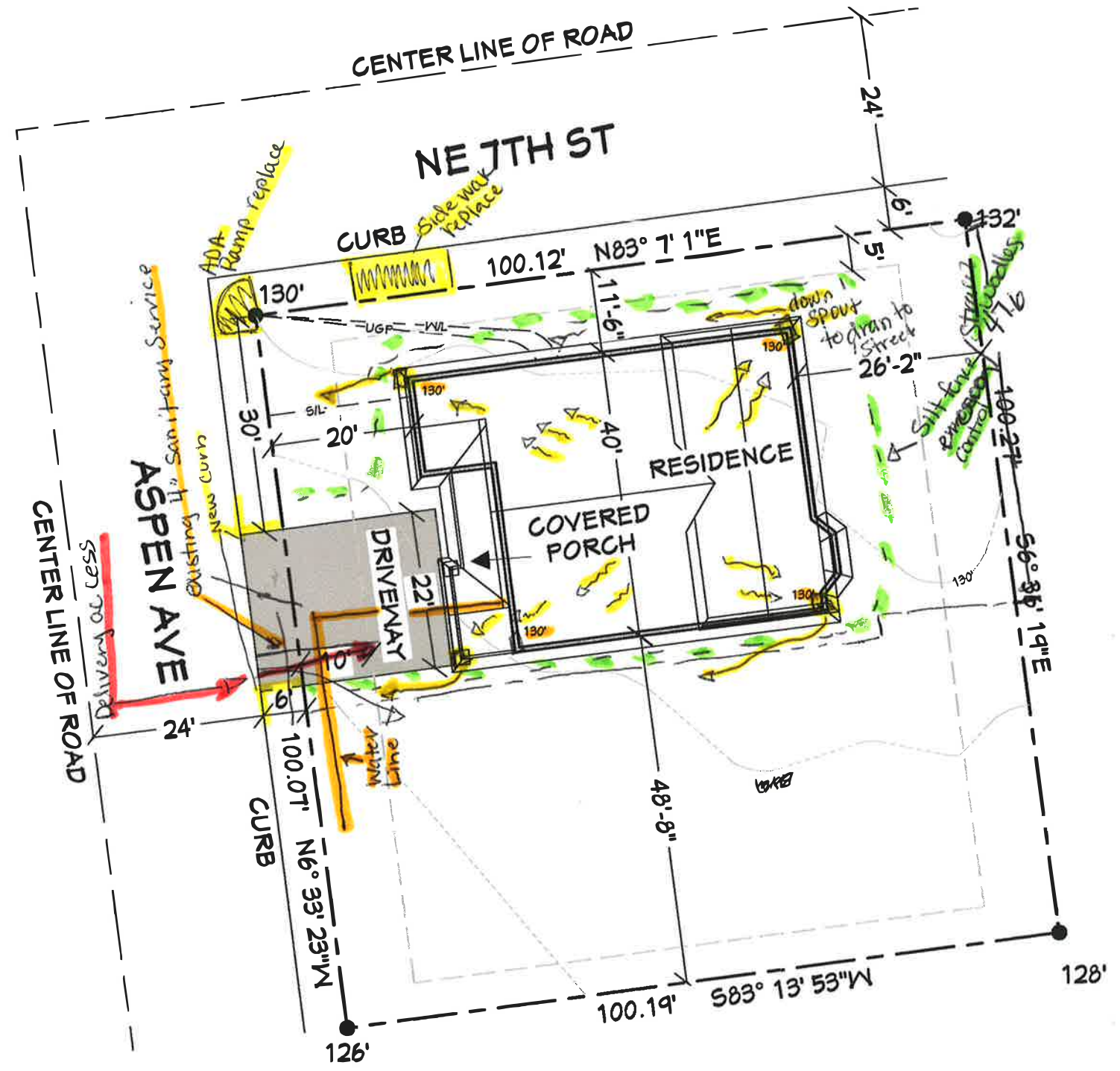
LEGEND

| | |
|------------------------|-----------|
| PROPERTY LINE | --- |
| SET BACK LINE | ---- |
| EASMENT | ---- |
| CONTOUR LINE | ---- |
| CURB | ---CU--- |
| CENTERLINE OF ROAD | ----- |
| ROOF LINE | ----- |
| SEWER/SEPTIC LINE | ---S/L--- |
| FENCE | ---F--- |
| WELL | ⊙ |
| WATER LINE | ---W/L--- |
| UG POWER | ---UGP--- |
| OH POWER | ---OHP--- |
| HEAVILY TREED AREA | ▨ |
| TREE | ✱ |
| PROPOSED TREE REMOVAL | ✱ |
| DECIDUOUS TREE | □ |
| DECIDUOUS TREE REMOVAL | Ⓚ |
| ELEVATIONS | ' |



SITE PLAN

| | |
|--------------------|-------------------|
| OWNER: | SCHWARZ RESIDENCE |
| CONTRACTOR: | |
| ADDRESS: | 625 ASPEN AVE |
| CITY, STATE: | LA CENTER, WA |
| SUBDIVISION/LOT #: | |
| TAX ID: | |
| SCALE: | 1"=20' |
| DATE: | 3/21/18 |



COWLITZ INDIAN TRIBE
INADVERTENT DISCOVERY LANGUAGE

In the event any archaeological or historic materials are encountered during project activity, work in the immediate area (initially allowing for a 100' buffer; this number may vary by circumstance) must stop and the following actions taken:

1. Implement reasonable measures to protect the discovery site, including any appropriate stabilization or covering; and
2. Take reasonable steps to ensure the confidentiality of the discovery site; and,
3. Take reasonable steps to restrict access to the site of discovery.

The project proponent will notify the concerned Tribes and all appropriate county, state, and federal agencies, including the Department of Archaeology and Historic Preservation. The agencies and Tribe(s) will discuss possible measures to remove or avoid cultural material, and will reach an agreement with the project proponent regarding actions to be taken and disposition of material.

If human remains are uncovered, appropriate law enforcement agencies shall be notified first, and the above steps followed. If the remains are determined to be Native, consultation with the affected Tribes will take place in order to mitigate the final disposition of said remains.

See the Revised Code of Washington, Chapter 27.53, "Archaeological Sites and Resources," for applicable state laws and statutes. See also Washington State Executive Order 05-05, "Archaeological and Cultural Resources." Additional state and federal law(s) may also apply.

It is strongly encouraged copies of inadvertent discovery language/plan are retained on-site while project activity is underway.

Contact information:

Nathan Reynolds
Interim Cultural Resources Manager
Cowlitz Indian Tribe
PO Box 2547
Longview, WA 98632
360-575-6226 Office
360-577-6207 Fax
nreynolds@cowlitz.org

Revised 19 September 2017



Master Residential Permit Application

City of La Center, Building Services
305 NW Pacific Hwy
La Center, WA 98629
Ph. 360-263-7665 Fax 360-263-7666
Inspection Line: 360-263-6702

Inspection Email: inspections@ci.lacenter.wa.us

| | | | |
|--|-------------------------------------|--|---|
| JOB SITE LOCATION | | Office Use Only | |
| Project Address or Tax ID: <u>625 Aspen Ave LaCenter</u> | | Permit #: | Date Submitted: |
| Subdivision: | Lot #: | Deferral: Yes No Received by: | |
| PROPERTY OWNER | | Fee Paid: | |
| Name: <u>Brenda Schwartz</u> | | PERMIT TYPE | |
| Address, City, State, Zip: <u>P.O Box 284 LaCenter WA 98629</u> | | <input checked="" type="checkbox"/> New Construction | <input type="checkbox"/> Addition/Remodel |
| Phone: <u>360.518.4457</u> | Email: | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Mechanical |
| CONTRACTOR | | <input type="checkbox"/> Deck | <input type="checkbox"/> Reroof/Reside |
| Business Name: | | <input type="checkbox"/> ROW | <input type="checkbox"/> Other (specify) |
| Address, City, State, Zip: | | NEW SQUARE FOOTAGE/VALUATION | |
| Phone: | Email: | 1 st Floor sq. ft. | <u>1924</u> |
| WA State Contractor's License #: | | 2 nd Floor sq. ft. | <u>645</u> |
| SUB-CONTRACTORS | | Total Building sq. ft. | <u>2569</u> |
| Plumbing: <u>EK Plumbing</u> | Mechanical: <u>Hendrickson HVAC</u> | Garage sq. ft. | <u>0</u> |
| Contractor's License #: | Contractor's License #: | Decks/Covd. patio sq. ft. | <u>180</u> |
| Phone: | Phone: | Unfinished sq. ft. | <u>0</u> |
| APPLICANT | | *Valuation | |
| Company Name: | | *Permit fees are based on materials and labor of work performed. | |
| Contact Name: <u>Kristin Tapani</u> | MECHANICAL INFORMATION | | |
| Address, City, State, Zip: <u>18114 NE 249th St B.G. WA 98629</u> | Fuel Type | <input type="checkbox"/> Gas | <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Other |
| Phone: <u>360.931.7838</u> | Number of gas piping outlets | | # <u>0</u> |
| Email: <u>ktapani@comcast.net</u> | System Type | <input type="checkbox"/> Forced Air <input type="checkbox"/> Ductless <input type="checkbox"/> Room Heater | |
| CATEGORY OF CONSTRUCTION | | <input checked="" type="checkbox"/> 1 & 2 Family Dwelling <input type="checkbox"/> Accessory Structure | |
| Other (specify): | | <input checked="" type="checkbox"/> Heat Pump <input type="checkbox"/> Other | |
| DESCRIPTION OF WORK | | Furnace | BTU Air Conditioner Tons |
| <u>Building a single family Home/Bed and Breakfast.</u> | | Fireplace (s) # | <u>1</u> Wood Stove # <u>1</u> |
| | | Mechanical Valuation \$ | |
| PLUMBING INFORMATION (please indicate the number of each fixture) | | | |
| Toilets <u>4</u> | Kitchen Sink <u>1</u> | Water Heater <u>1</u> | Roof Drain <u>4</u> Refrigerator Drain |
| Tub/Shower <u>4</u> | Dishwasher <u>1</u> | Washing Machine <u>1</u> | Hose Bibs <u>2</u> Irrigation (separate permit) <input type="checkbox"/> |
| Bathroom Sink <u>5</u> | Laundry Sink <u>1</u> | Garbage Disposal | Floor Drain <u>4</u> Other |

** This permit becomes null and void if work or construction authorized is not commenced within 180 days from submittal, or if construction of work is suspended or abandoned for a period of 180 days at any time after work has commenced. I also understand that any request for a refund must comply with the City of La Center refund procedures. I hereby certify that I read and examined this application and know the same to be true and correct and agree to comply with City ordinances and state laws regulating the performance of construction. I certify that I am either the property owner or Washington State licensed contractor or an authorized agent applying for the permit under the explicit permission of the property owner.

Signature: [Signature] Date: 6-16-2020



Erosion Control Permit Application

City of La Center, Building Services
305 NW Pacific Hwy
La Center, WA 98629
Ph. 360.263.7665 Fax 360.263.7666

Inspection Line: 360.263.6702
Inspection Email: insepctions@ci.lacenter.wa.us

Property Address: 625 Aspen Ave Permit Number _____

General Contractor Name: _____

Address: _____

Phone: _____

Applicant's Name: Kristin Tapani

Address: 18614 NE 249th St. Battle Ground WA 98604

Phone: 360 931-7838

Owner's Name: Brenda Schwartz

Address: P.O. Box 284 La Center WA 98629

Phone: 360-518-4457

Public Right of Way Private Property
Site Runoff Drains To: Creek Ditch Catch Basin Pipe

Excavation Contractor Name: Kamron Hedval License #: _____

Address: _____

Phone: 360-931-6334

24 Hour Emergency Contact: Kamron Hedval Phone: 360-931-6334

Erosion/Sedimentation Control (ESC) Measures

Minimum ESC Requirements During Construction

- Sedimentation Facilities
- Stabilized Construction Entrance
- Perimeter Runoff Control
- Clearing and Grading Restrictions
- Cover Practices
- Construction Sequence
- Other: _____

Minimum ESC Requirements After Construction

- Stabilized Exposure Surfaces
- Remove and Restore
- Temporary ESC Facilities
- Clean and Remove All Silt and Debris
- Ensure Operation of Permanent Facility
- Other: _____

Erosion Control Plan submittals shall be in compliance with all applicable City and State Erosion Control Guidelines. The required plan drawing must contain; construction notes, emergency contact numbers, installation schedule/staging, schedule for removal of EC measures and be reviewed and approved by the City.

I have read and will comply will all applicable Local and State regulations. I agree to construct, maintain and remove ESC measures as necessary to contain sediment on the construction site.

Brenda Schwartz
Owner Signature or Authorized Signer by Owner

6-14-2020
Date



Master Land Use Application

City of La Center, Planning Services
305 NW Pacific Highway
La Center, WA 98629
www.ci.lacenter.wa.us
Ph. 360.263.7665 Fax: 360.263.7666
www.ci.lacenter.wa.us

Property Information

Site Address 1025 Aspen Ave LaCenter WA 98629
Legal Description Lot 1, block 3 of Breezer's Addition
Assessor's Serial Number 1037500-000
Lot Size (square feet) 4,705.6 sqft
Zoning/Comprehensive Plan Designation _____
Existing Use of Site Vacant

Contact Information

APPLICANT:

Contact Name Kristin Tapani
Company _____
Phone 360-931-7338 Email ktapani@comcast.net
Complete Address 18104 NE 249th St Battle Ground WA 98004
Signature Kristin Tapani
(Original Signature Required)

APPLICANT'S REPRESENTATIVE:

Contact Name Same as
Company _____
Phone _____ Email _____
Complete Address _____
Signature _____
(Original Signature Required)

PROPERTY OWNER:

Contact Name Brenda Schwarz
Company _____
Phone 360-518-4457 Email _____
Complete Address P.O. Box 284 LaCenter WA 98629
Signature Brenda Schwarz
(Original Signature Required)

Development Proposal

Project Name _____
Type(s) of Application New Home/ Bed and breakfast

Previous Project Name and File Number(s), if known _____

Pre-Application Conference Date and File Number _____

Description of Proposal _____

Office Use Only

File # _____ Planner _____

Received By _____ Fees: \$ _____

Date Received: _____ Date Paid: _____

Procedure: Type I
 Type II
 Type III
 Type IV
Receipt # _____

Notes _____

Pre-Application Conference Application



City of La Center, Planning Services
305 NW Pacific Highway
La Center, WA 98629
www.ci.lacenter.wa.us
Ph. 360.263.7665 Fax: 360.263.7666
www.ci.lacenter.wa.us

Electronic Requirements

- Provide all materials on a CD or Flash Drive with all application materials as a **PDF** and a **word** version of the narrative.

Written Requirements

- Master Permit Application:** Provide one copy of the Master Land Use Application with original signatures.
- Checklist:** Provide one copy of this completed checklist.
- Written Narrative:** Provide a detailed description of the proposed project including but not limited to the changes to the site, structures, landscaping, lighting, parking and use. In addition, please also address utility, frontage and transportation needs.

Plans and Graphics Requirements Provide Five (5) Copies of Scaled Plans (1' = 200 Feet & 8.5x11) the Following:

- Dimensions & North Arrow
- Site Boundary
- Proposed Name of Project
- Vicinity Map
- Configuration & Dimension of all Proposed Lots & Tracts, Including Proposed Park/Open Space, Drainage
- Tracts or Easements, Topography, Grades Including the Maximum & Minimum Density Calculations
- Location of Existing and Proposed Buildings & Structures
- Proposed Uses of all Buildings
- Height and Conceptual Appearance of Building Facades for all Building Structures
- Location of Walls and Fences, Height and Construction Material
- General Location & Configuration of Proposed Landscaping
- Existing and Proposed Exterior Lighting
- Location and Layout of Off-Street Parking and Loading Facilities
- Name, Location & Width of Existing & Proposed On-Site Streets and Roadway Easements
- Location & Width of Existing & Proposed On-Site Pedestrian & Bicycle Facilities
- Location of Existing & Proposed Public & Private Utilitles
- Location, Types & Boundaries of Critical Areas, Buffers, Slopes & Archaeologically Significant Features

Questions:

Pre-Application conferences address issues related to landuse, building, engineering, fire and utilities. Please list specific questions or issues unique to your project that you would like to discuss at the conference.

Office Use Only

File # _____ Planner _____

Received By _____ Fees: \$ _____

Date Received: _____ Date Paid: _____

Procedure: Type I Receipt # _____

Type II

Type III

Type IV

Notes _____

Sewer Connection Application



City of La Center, Building Services
305 NW Pacific Highway
Phone 360-263-7665 Fax 360-263-7666
Inspection Line: 360-263-6702
Inspection@ci.lacenter.wa.us

Permit Number _____

Applicant(s) Information

Name: Kristin Tapani
Mailing Address: 18014 NE 249th St Battle Ground WA 98004
Phone: 360-931-7838 Email: ktapani@comcast.net

Property Information

Property Address or Cross Streets: 625 Aspen Ave Lot #: _____
Parcel # _____ Existing Home: Yes No Septic Failure: Yes No
Proposed Use: Single Family Multi-Family Commercial Industrial Other: _____
Property Size: Ac Building Square Footage (Commercial/Industrial): 2569 sqft
Living Units: 1 Preliminary Name of Project: Schwarz Residence

- * Sewer Connection SDC fee of \$7,800.00 per ERU (equivalent residential unit) must be collected upon approval.
- ** Sewer billing begins the date of application approval.
- *** Sewer one time connection inspection fee of \$65.00 residential/\$150.00 commercial

Applicant understands, represents and acknowledges as follows:

1. Sewage from the property will flow through La Center's collection system and be processed by the treatment plant owned and operated by the City of La Center.
2. Prior to obtaining sewer service for the property, or any part thereof, the applicant will need to obtain a building sewer permit from the City of La Center and otherwise comply with all City resolutions, code provisions and regulations.
3. This permit becomes null and void if work or construction authorized is not commenced within 180 days from submittal, or if construction work is suspended or abandoned for a period of 180 days at any time after work has commenced. I also understand that any request for a refund must comply with the City of La Center refund procedures. I hereby certify that I have read and examined this application and know the same to be true and correct and agree to comply with the City ordinances and State Laws regulating the performance of construction.
4. I certify that I am either the property owner or Washington State licensed contractor or an authorized agent applying for the permit under the explicit permission of the property owner.

I acknowledge that I have read and fully understand the terms and conditions stated above.

Signature: [Handwritten Signature] Date: 6-14-2020

Approved: _____ Date: _____