



# Planning Department

420 Howanut Road., P.O. Box 536., Oakville WA 98568  
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<b>STAFF USE ONLY</b>	
Permit #	_____
Intake by:	_____
Date:	_____
Fee Paid:	_____
Receipt #:	_____

## Demolition Project Application & Checklist

**\$50 Fee**

**Non Refundable fees are due upon submitting application**  
**Make checks payable to Chehalis Tribe or pay via PayPal at**  
<https://www.chehalistribe.org/products/business-license>

Applicant Name: \_\_\_\_\_ Business Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Property Allotment/parcel number or legal description: \_\_\_\_\_  
 \_\_\_\_\_

Property Address: \_\_\_\_\_

### **Contractor:**

Contact: \_\_\_\_\_ Business Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
 License # \_\_\_\_\_ Expire Date: \_\_\_\_\_  
 Method of Disposal? Please Describe: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### **Construction:**

Main Floor sq ft. \_\_\_\_\_ # of Bedrooms: \_\_\_\_\_  
 2<sup>nd</sup> Floor sq. ft.: \_\_\_\_\_ Outbuildings: \_\_\_\_\_  
 Garage sq. ft.: \_\_\_\_\_ Total sq. ft.: \_\_\_\_\_  
 Is this a mobile home?  Yes  No Year, Make, Model: \_\_\_\_\_  
 Dimensions: \_\_\_\_\_ ft. x \_\_\_\_\_ ft.

**Incomplete applications will not be processed.**

Mobile home serial number: \_\_\_\_\_ Mobile home transporter: \_\_\_\_\_

**Project Information:**

**Project start date:** \_\_\_\_\_

Brief description of project:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Property Information</b>	
<b>Water Supply</b>	<input type="checkbox"/> Existing <input type="checkbox"/> Proposed
<input type="checkbox"/> Single family well <input type="checkbox"/> Multi-family well <input type="checkbox"/> I.H.S. scattered site <input type="checkbox"/> Community water system	
<b>Sewage/Septic</b>	<input type="checkbox"/> Existing <input type="checkbox"/> Proposed <input type="checkbox"/> Septic System <input type="checkbox"/> I.H.S. scattered site
<b>Road Access</b>	<input type="checkbox"/> Existing <input type="checkbox"/> Proposed <input type="checkbox"/> Private driveway <input type="checkbox"/> Shared driveway
<input type="checkbox"/> Private Road (name) _____	
<input type="checkbox"/> Public Road (name) _____	
<b>Has property been surveyed for this project?</b> <input type="checkbox"/> yes <input type="checkbox"/> no	
<b>Are property corners and lines marked on site?</b> <input type="checkbox"/> yes <input type="checkbox"/> no	
<b>Is the project located within a floodplain or prone to flooding?</b> <input type="checkbox"/> yes <input type="checkbox"/> no The Chehalis Flood Damage Prevention Ordinance requires that a project located within a floodplain must meet Flood Hazard Reduction standards, in compliance with the National Flood Plain Insurance Program.	
Is the property located within 300' of a: <input type="checkbox"/> river or creek <input type="checkbox"/> wetlands <input type="checkbox"/> none	
Name of river or creek _____	
Is the property located within 150' of a cemetery? <input type="checkbox"/> yes <input type="checkbox"/> no	
Has the property every flooded? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> don't know	

**(Required)**

Environmental Assessment/Abatement Attached:  Yes  No

Septic Tank Removal:  Yes  No

Well Decommissioning:  Yes  No

**Print Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

<b>Review:</b>	
Dept of Planning _____	Date: _____
Real Estate Officer: _____	Date: _____
Dept of Natural Resources: _____	Date: _____
Business Committee: _____	Date: _____
Approved: _____ Yes _____ No	

**Incomplete applications will not be processed.**