



## Planning Department

420 Howanut Road., P.O. Box 536., Oakville WA 98568

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### STAFF USE ONLY

Permit # \_\_\_\_\_

Intake by: \_\_\_\_\_

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

Fee Paid: \_\_\_\_\_

Receipt #: \_\_\_\_\_

## Project application & Permitting Checklist

### Commercial Building-Footings and Foundations

Applications must be completed in full.

Incomplete applications will not be processed.

Non Refundable fee is due upon submitting application

Make checks payable to Chehalis Tribe or pay via PayPal at

<https://www.chehalistribe.org/products/business-license>

**\$25 Fee**

Applicant Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### **Property Allotment Number, parcel number or legal description:**

\_\_\_\_\_

### **Property Address:**

\_\_\_\_\_

### **Contractor:**

Contact: \_\_\_\_\_ Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

License # \_\_\_\_\_ Expire Date: \_\_\_\_\_

### **Architect:**

Contact: \_\_\_\_\_ Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

License # \_\_\_\_\_ Expire Date: \_\_\_\_\_

### **Engineer:**

Contact: \_\_\_\_\_ Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

License # \_\_\_\_\_ Expire Date: \_\_\_\_\_

**Additional Engineer/Architect:**

Contact: \_\_\_\_\_ Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

License # \_\_\_\_\_ Expire Date: \_\_\_\_\_

**Additional Engineer/Architect:**

Contact: \_\_\_\_\_ Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

License # \_\_\_\_\_ Expire Date: \_\_\_\_\_

**Permits Associated with this Application:**

Type: \_\_\_\_\_ Permit #: \_\_\_\_\_

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Type: \_\_\_\_\_ Permit #: \_\_\_\_\_

Type: \_\_\_\_\_ Permit #: \_\_\_\_\_

**Work Type and Description:**

New: \_\_\_\_\_

Addition: \_\_\_\_\_

Remodel: \_\_\_\_\_

Repair: \_\_\_\_\_

Change of Occupancy: \_\_\_\_\_

Other: \_\_\_\_\_

**Construction:**

Building sq. ft. all floor levels: \_\_\_\_\_

Construction Type: \_\_\_\_\_ Heat Source: \_\_\_\_\_

**Property Information:**

**Water Supply:**  Existing  Proposed  Well  Community water system

**Sewage/Septic:**  Existing  Proposed  Well  Community water system

**Has the property been surveyed for this project?**  Yes  No

**Are property corners and lines marked on site?**  Yes  No

**Is the project located within a floodplain or prone to flooding?**  Yes  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**  river or creek  wetlands  none

**Name of river or creek:** \_\_\_\_\_

**Is the property located within 150' of a cemetery?**  Yes  No

**Has the property ever flooded?**  Yes  No

**Project Information:**

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

**Brief description of project:**

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**Are there plans for future additions to the project?**  Yes  No

**Describe:**

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**Environmental Checklist:**

- Will the project create a source of water runoff, including storm water?
- Will the project require surface or groundwater withdrawals?
- Does this project involve removal or import of fill?
- Is the project located in an area of historic, archaeological or cultural importance to the tribe?
- Will the project result in loss or alteration to natural habitat?

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

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