



CITY OF LACEY
 Community & Economic Development Department
 420 College Street SE
 Lacey, WA 98503
 (360) 491-5642

OFFICIAL USE ONLY

Case Number: _____

Date Received: _____

By: _____

Related Case Numbers:

**TOP SOIL REMOVAL PERMIT
 APPLICATION**

OWNER NAME: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE: _____

_____ DATE: _____

_____ DATE: _____

_____ DATE: _____

_____ DATE: _____

SIGNATURE(S)

I (We), the above-signed, do hereby affirm and certify, under penalty of perjury, that I/we am/are one (or more) of the owner(s) under contract of the below described property and that the following statements and answers are in all respects, true and correct on my information and belief as to those matters.

APPLICANT NAME: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE: _____

SIGNATURE: _____ **DATE:** _____

ENGINEER/ARCHITECT NAME: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE: _____

SIGNATURE: _____ **DATE:** _____

AUTHORIZED REPRESENTATIVE: _____
MAILING ADDRESS: _____
CITY, STATE, ZIP: _____
TELEPHONE: _____
SIGNATURE: _____ **DATE:** _____

NAME OF PROJECT: _____

SUMMARY OF REQUEST (List Type of Uses): _____

PROPERTY LOCATION

[]North []South []East []West Side of _____ between _____
(ROAD NAME)
and _____
(ROAD NAME)
Property Address: _____
Section: _____ **Township:** _____ **Range:** _____ **Assessor's Parcel Number:** _____
Full legal description of subject property: _____
(ATTACH SEPARATE SHEET IF NECESSARY)

UTILITIES

Water Supply (Name Of Utility, If Applicable): _____
Existing: _____ **Proposed:** _____
Sewage Disposal (Name Of Utility, If Applicable): _____
Existing: _____ **Proposed:** _____
Access (Name Of Road Or Street From Which Access Is Or Will Be Gained): _____
Existing: _____ **Proposed:** _____

Total acreage in site: _____

Total square footage in paved or covered surfaces: _____

Estimated amount of topsoil to be removed each calendar year for the next five years: _____

Year #1: _____ Amount: _____ Year #2: _____ Amount: _____

Year #3: _____ Amount: _____ Year #4: _____ Amount: _____

Year #5: _____ Amount: _____

ALL APPLICANTS MUST SUBMIT THE FOLLOWING INFORMATION

NOTE: The site plan must be at a scale of not less than 20 feet to an inch and not more than 100 feet to an inch.

1. Twelve (12) copies of the site plan drawing and application shall be submitted which **must** include **ALL** of the following:
 - a. The boundaries of the property proposed for top soil removal.
 - b. All means of vehicular ingress and egress to and from the site and the size and location of access points.
 - c. An illustration of the areas of said property where top soil is proposed to be removed and the soil berm, fence or landscape screening to be used to screen the soil removal operation from adjoining properties or public facilities.
 - d. The location of all existing and proposed structures, including, but not limited to, buildings, fences, culverts, bridges, roads and streets. Include setbacks from property lines.
2. An engineering study showing the grade of the top soil both prior to and after the proposed removal, and engineering documentation and explanation of the effect of said top soil removal upon the future installation of sewerage or septic tank facilities, the effect upon future drainage, and the effect upon the water table located under said property.
3. Drawing and descriptive narrative showing the removal sequence and the means proposed to be taken to ensure the continuity of natural site drainage flow without undue or uncontrolled ponding in retention areas.
4. Proposed actions to control dust and noise during the removal operation.
5. A proposed plan, including time sequence, for restoration of the land area after the removal of top soil.
6. A listing of the names and addresses of all adjoining landowners.