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OF **LACEY**

DEPARTMENT OF COMMUNITY & ECONOMIC DEVELOPMENT  
420 College Street SE, Lacey, WA 98503 (360) 491-5642

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Case #: _____
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Planner: _____
Related Cases: _____

## GENERAL LAND USE APPLICATION

<b>Please Identify Supplemental Forms Accompanying This Application:</b>	
<input type="checkbox"/> Binding Site Plan (Preliminary) <input type="checkbox"/> Binding Site Plan (Final) <input type="checkbox"/> Boundary Line Adjustment <input type="checkbox"/> Conditional Use Permit <input checked="" type="checkbox"/> <b>Environmental Checklist (SEPA) (must include thumbdrive containing .pdf copies of all submittal materials, including applications)</b> <input type="checkbox"/> Joint Aquatic Resources Permit Application (JARPA) <input checked="" type="checkbox"/> Landclearing Permit/Class IV Forest Practices <input type="checkbox"/> Limited Administrative Review (separate application form is <u>not</u> required)	<input checked="" type="checkbox"/> Planned Residential Development (Preliminary) <input type="checkbox"/> Planned Residential Development (Final) <input type="checkbox"/> Short Subdivision (Preliminary) <input type="checkbox"/> Short Subdivision (Final) <input type="checkbox"/> Site Plan Review <input type="checkbox"/> Street Merchant Supplemental <input checked="" type="checkbox"/> Subdivision (Preliminary) <input type="checkbox"/> Subdivision (Final) <input type="checkbox"/> Townhouse Development Permit <input type="checkbox"/> Wetland Development Permit <input type="checkbox"/> Woodland District Supplemental
<b>*Applicant/Property Owner Information</b>	
Owner: <u>OMF Legacy Parentco Inc.</u>	
Mailing Address: <u>PO BOX 1117, HEMPSTEAD, TX 77445</u>	
Phone Number(s): <u>512.924.1020</u>	
E-mail Address: <u>knudsenone@aol.com</u>	
Signature: <u><i>David Knudsen, President</i></u>	
<i>* For projects with multiple owners, attach a separate sheet with above owner information and signatures.</i>	
<b>Applicant: SSHI, LLC, dba DR Horton</b>	
Mailing Address: <u>11241 Slater Avenue NE, Suite 200, Kirkland, WA 98033</u>	
Phone Number(s): <u>(425) 825-3180</u>	
E-mail Address: <u>rhulquist@drhorton.com</u>	
<b>*Authorized Representative: Hatton Godat Pantier (Jeff Pantier, PLS)</b>	
Mailing Address: <u>3910 Martin Way E, Ste B, Olympia, WA 98</u>	
Phone Number(s): <u>(360) 943-1599</u>	
E-mail Address: <u>jeffp@hattonpantier.com</u>	
<i>*The authorized representative will be the primary staff contact for all project related questions and correspondence.</i>	

**Project Information**

Project Name: Morel Meadows

Project Description: Subdivide 32.08 acres into 179 single family lots

**Property Description**

Site Address: 8322 Steilacoom Rd SE

Full Legal Description of Subject Property (attached ):

Section: 14 Township: 18N Range: 1W

Assessor Tax Parcel Number(s): 11814140500, 11813220300

Zoning District: LD3-6

Shoreline Designation (if applicable): N/A

Area of Project Site (in square feet if less than 1 acre; in acres if greater): 32.08 acres

**Critical Areas on or near Site (show areas on site plan):**

- None
- Creek or stream (name): \_\_\_\_\_
- Lake or pond (name): \_\_\_\_\_
- Endangered or threatened species (identify): \_\_\_\_\_
- Encumbrances, such as wells with radius, and easements: \_\_\_\_\_

- Wetland
- Steep slopes/draw/gully/ravine
- Historic site or structure
- Flood hazard area, provide FEMA flood zone and map number: \_\_\_\_\_

**Utilities (Existing and Proposed)**

Water: Existing Lacey Proposed Lacey

Sewer: Existing Lacey Proposed Lacey

Access (name of street(s) from which access will be gained): Steilacoom Road SE

I affirm, under penalty of perjury, that all answers, statements, and information submitted with this application are correct and accurate to the best of my knowledge. I also affirm that I am the owner of the subject site or am duly authorized by the owner to act with respect to this application. Further, I grant permission from the owner to any and all employees and representatives of the City of Lacey and other governmental agencies to enter upon and inspect said property as reasonably necessary to process this application. I agree to pay all fees of the City that apply to this application.

Jeff Pantier, PLS

4/14/2023

**Print Name**

**Signature**

**Date**

Please attach all applicable supplemental forms