

Shaping
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together

CITY OF **LACEY**

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

OFFICIAL USE ONLY
Date: _____
Case #: _____
Received By: _____
Planner: _____
Related Cases: _____

GENERAL LAND USE APPLICATION

Please Identify Supplemental Forms Accompanying This Application:

- | | |
|---|---|
| <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"/> Environmental Checklist (SEPA) (must include thumbdrive containing .pdf copies of all submittal materials, including applications)
<input type="checkbox"/> Joint Aquatic Resources Permit Application (JARPA)
<input type="checkbox"/> Landclearing Permit/Class IV Forest Practices
<input type="checkbox"/> Limited Administrative Review (separate application form is <u>not</u> required) | <input 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 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 |
|---|---|

*Applicant/Property Owner Information

Owner: Kamela J. James

Mailing Address: 209 Quince Street NE, Olympia, WA 98506

Phone Number(s): 360-943-0555

E-mail Address: kamela@olyinjurlawyers.com

Signature:

** For projects with multiple owners, attach a separate sheet with above owner information and signatures.*

Applicant: Kamela J. James

Mailing Address: 209 Quince Street NE, Olympia, WA 98506

Phone Number(s): 360-943-0555

E-mail Address: kamela@olyinjurlawyers.com

*Authorized Representative: SCJ Alliance Consulting Services

Mailing Address: 8730 Tallon Lane NE, Suite 200, Lacey, WA 98516

Phone Number(s): 360-352-1465

E-mail Address: dan.penrose@scjalliance.com

**The authorized representative will be the primary staff contact for all project related questions and correspondence.*

Project Information

Project Name: Shady Lane Variance

Project Description: Front yard setback variance request from 16 feet to 5 feet.

Property Description

Site Address: 6417 Shady Lane SE, Lacey, WA 98503

Full Legal Description of Subject Property (attached):

Tract 35, Atchinson-Kemper plat, according to plat thereof recorded in Volume 11 of Plats, Page(s) 41, records of Thurston County, Washington; Together with all Shorelands as conveyed by the State of Washington lying in front of adjacent to and abutting on said Tract; Situate in the County of Thurston, State of Washington.

Section: 22 Township: 18 Range: 1W

Assessor Tax Parcel Number(s): 32400003500

Zoning District: low-density residential district (LD)

Shoreline Designation (if applicable): shoreline residential

Area of Project Site (in square feet if less than 1 acre; in acres if greater): 0.31 acres

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

- None
- Creek or stream (name): _____
- Lake or pond (name): Hicks Lake
- 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: 100-year floodplain

Utilities (Existing and Proposed)

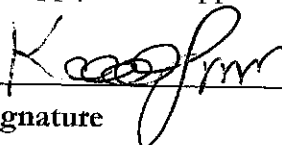
Water: Existing City of Lacey Proposed City of Lacey

Sewer: Existing City of Lacey Proposed City of Lacey

Access (name of street(s) from which access will be gained): Shady Lane 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.

Kamela James


Signature

1/23/24
Date

Print Name

Please attach all applicable supplemental forms