

CAPE GEORGE COLONY CLUB
 61 CAPE GEORGE DRIVE
 PORT TOWNSEND, WA 98368

RECEIVED DEC 19 2016

PHONE: (360) 385-1177
 FAX: (360) 385-3038

**FILLS, EARTHWORK, PERC TEST HOLES, CULVERTS & DRAINAGE
 PERMIT APPLICATION**

Name: BOYD COCHRAN		Date: 12-5-16
Mailing Street Address: 19808 - 80TH AVE, SE	City: SNODGRASS	State & Zip WA 98296
Telephone No. (day): 425-483-3404	Telephone No. (evening): SAME	
Contractor:		
Legal Location: <input type="checkbox"/> Colony <input checked="" type="checkbox"/> Village <input type="checkbox"/> Highlands	Lot No. 18	Div No. 3 Blk No.: _____
Street Name and No.: BETWEEN 111 & 141 SPROUCE DR.		

Nature of work requested: (Please attach a rough sketch of project, showing approximate distance to nearest property corner.)

OPEN DEMONSTRATION CURTAIN DRAIN DITCH WITH TIGHTLINE TO ROADSIDE STORM WATER DITCH. IF THE PROPERTY CAN BE ADEQUATELY DE-WATERED THEN A CURTAIN DRAIN WITH ROCK & PERF PIPE WILL BE PROPOSED.

Please answer the following questions	Yes	No
Will this project lie within 25 feet of the Club right-of-way?	X	
Will this project lie within 5 feet of adjacent property line?	X	
Will this project require cutting into roadway or shoulder?		X
Will this project involve tightlines entering or crossing over Club property? (if yes, please answer questions on reverse.) (THROUGH ROAD RIGHT-OF-WAY)	X	
Contact Building or Road Committee Chair upon completion of your project		

Owner's Signature: *Boyd Cochran* Date: 12-11-16

----- CLUB USE ONLY -----

We have reviewed this application and recommend		Approval <input checked="" type="checkbox"/>	Disapproval <input type="checkbox"/>
• Reason for disapproval:			
Building Committee (signature): <u><i>[Signature]</i></u>	Date: <u>12/19/16</u>	Or	Road Committee (signature): Date:
We have inspected this project and certify it in compliance with Club Regulations.			
Building Committee (signature):	Date:	Or	Road Committee (signature): Date:

mailed 12/20

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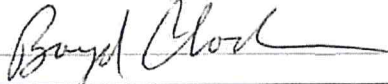
**FILLS, EARTHWORK, PERC TEST HOLES, CULVERTS & DRAINAGE
 PERMIT APPLICATION**

Name: BOYD COCHRAN		Date: 12-4-16
Mailing Street Address: 19800 - 80TH AVE. SE	City: SNOHOMISH	State & Zip WA 98296
Telephone No. (day): 425-403-3404	Telephone No. (evening): SAME	
Contractor:		
Legal Location: <input type="checkbox"/> Colony <input checked="" type="checkbox"/> Village <input type="checkbox"/> Highlands	Lot No. 10	Div No. 3 Blk No.: _____
Street Name and No.: BETWEEN 111 & 141 SPRUCE DR.		


Nature of work requested: (Please attach a rough sketch of project, showing approximate distance to nearest property corner.)

SOIL TEST PITS FOR SEPTIC SYSTEM DESIGN

Please answer the following questions	Yes	No
Will this project lie within 25 feet of the Club right-of-way?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Will this project lie within 5 feet of adjacent property line?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Will this project require cutting into roadway or shoulder?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Will this project involve tightlines entering or crossing over Club property? (if yes, please answer questions on reverse.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Contact Building or Road Committee Chair upon completion of your project	<input type="checkbox"/>	<input type="checkbox"/>

Owner's Signature:  Date: **12/7/16**

----- CLUB USE ONLY -----

We have reviewed this application and recommend		Approval <input checked="" type="checkbox"/>	Disapproval <input type="checkbox"/>
• Reason for disapproval:			
Building Committee (signature): 	Date: 12/15/16	Or	Road Committee (signature): Date:
We have Inspected this project and certify it in compliance with Club Regulations.			
Building Committee (signature):	Date:	Or	Road Committee (signature): Date:

mailed 12/20