

CARLYON BEACH HOMEOWNERS ASSOCIATION
TYPE 1a APPLICATION
CLEARING, GRADING, TREE CUTTING AND RIGHT OF WAY WORK ON CBHA ROADS*

Owner's Name _____ Date _____

Property Address _____ Lot _____ Block _____ Division _____

Phone _____ Alternate Phone _____

Construction Manager/ Contractor _____ Phone _____

The Construction Manager/ Contractor and Owner are responsible to for construction to assure the work is done according to CBHA and Thurston County requirements and according to the approved plans.

Supporting Documents Needed

1. Site plan showing lot, trees to be removed & area of lot to be disturbed by wheeled or tracking equipment.
2. Survey – showing elevations on all 4 corners
3. Storm water Easement Agreement for the lot.
4. If for Right of Way Road work, an explanation and/or diagram to show what is being done and an explanation of how the road will be restored back for CBHA approval.
5. Ensure that the Lot #, address and owner's name is on all documents
6. If burning debris, you will need a **Burn Permit** from Thurston County **ORCAA** and follow their rules.
7. Erosion control measures need to be in place.
8. All clearing and grading to be started and completed during the period of April 1 thru October 15 unless approved by the Architecture Committee (tree cutting excluded).

DISCLOSURE: CBHA may disclose information from this application to adjacent or near-by property owners who may be affected by the proposed work. CBHA may consider information provided by these property owners when reviewing the application.

Disclosure of CBHA requirements (Applicant initial each item)

Proceed in compliance with CBHA and Thurston County and in accordance with the approved plans. This includes responsibility for items that will not be formally inspected.

() I have read and understood the By-Laws, Rules and Regulations, and Covenants of CBHA as they relate to building, clearing, grading, construction, tree cutting and work in the Right of Way and understand that these documents and this application preclude any other statements.

() Any damage to CBHA property by contractors, sub-contractors or suppliers is the responsibility of the owner. If repairs must be at CBHA expense, any and all costs incurred will be assessed to the owner.

() Any and all costs associated with legal enforcement of CBHA requirements or any other legal fees or fines associated with this permit will be assessed to and paid for by the owner.

\$ 30.00 – Non-refundable application fee.
 \$ 300.00 _ Non-interest-bearing damage deposit for CBHA property. This deposit will be
 or refunded upon verification if no damage done or damage fixed and reviewed
 by CBHA Site Inspector and signed off. This includes bio swales.
 \$ 1825.00 – Non-interest-bearing damage deposit for Right of Way work on CBHA roads.
 This deposit will roll over when a Permit Type 1 is applied for. This deposit is
 refundable after construction and all inspections are complete and the project has
 been signed off by the CBHA Site Inspector.

TOTAL \$330.00
 OR
\$ 1855.00 (For Right of Way road work)

AFFIDAVIT: I (we) with these requirements and accept the responsibilities

Owner Signature _____

Construction Manager/Contractor Signature _____

Architecture Trustee Approval _____ Date _____

Architecture Member Approval _____ Date _____

Road Trustee Approval _____ Date _____
 (If applicable)

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Office Use Only: Owner is a member in good standing _____, documents are complete and
 approved _____, and fees paid _____.

Permit Approved (date) _____ By _____

Permit Issued (date) _____ By _____

Permit issued (date) -Thurston County permit received – if applicable _____

Permit Expires (date) _____

CBHA OWNER/ BUILDER CHECKLIST

PERMIT TYPE 1a

OWNER _____

ADDRESS _____

OWNER & BUILDER RESPONSIBILITES	OWNER INITIALS	CALLED INSPECTED NOTES	DATE
1. Post Permit. . Call for all locates before any ground is disturbed. CBHA does water locates only			
2. Call the Office & CBHA Site Inspector when project is underway & erosion control is in place. If your project involves any Right of Way road work, meet with the CBHA Site Inspector and the Road Trustee before beginning any work			
3. Call the Office & CBHA Site Inspector when project is complete. Site Inspector will check for damage to Right of Way, Bioswales, Roads and neighbors' property.			

Name
Address
Address

DOCUMENT: STORM WATER EASEMENT AGREEMENT

GRANTOR (S)

GRANTEES: CARLYON BEACH HOMEOWNER'S ASSOCIATION

LEGAL:

PARCEL:

STORM WATER EASEMENT AGREEMENT

For A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, the undersigned Grantor(s) do(es) give and grant to Carlyon Beach Homeowner's Association, its heirs and assigns a 5' wide stormwater easement for the purpose of construction, repair, and maintenance of Storm Water Conveyance and/or Potable Water Pipelines and appurtenances.

PARCEL:

See Exhibit "A" attached hereto and by this reference is a part hereof.

PERMANENT EASEMENT

Said easement is described as follows, TO WIT:

Said easement shall include the right of ingress/egress to, upon and over said land at all times, to construct, maintain and operate, repair, and replace said stormwater and utility systems, provided the Carlyon Beach Homeowner's Association shall be given the right to utilize such additional width as may be available and necessary temporarily for the placing of excavated materials thereon and for the construction and maintenance operations.

Carlyon Beach Homeowner's Association, its heirs and assigns agree that in construction, maintenance, operation, repair or replacement of said stormwater and utility system on the above described property, that it will, at its expense, restore surface of said land to the same conditions which existed prior there to.

Dated at Olympia, Washington, this ____ day of _____

Owner(s) of Lot 1, Block 9 Division 1 Plat of Carlyon Beach Country Club _____

STATE OF WASHINGTON

COUNTY OF THURSTON

On this ____ day of _____ before me personally appeared _____ and _____ to me know to be the individual(s) described and who executed the foregoing instrument and acknowledge that said instrument to be free and voluntary act and deed of said private lot owner(s) for the use and purposes therein mentioned.

Given under my hand and official seal this ____ day of _____

Notary Public in and for the State of Washington

Residing in _____

My commission expires _____

Dated in Olympia, Washington this ____ day of _____

Carlyon Beach Homeowner's Association _____

STATE OF WASHINGTON

COUNTY OF THURSTON

On this day and year below personally appeared before me _____ as authorized agent for the Carlyon Beach Homeowner's Association, who acknowledged that the aforementioned instrument to be free and voluntary for the use and purposes therein mentioned, and oath states he/.she./they is authorized to execute said instrument.

Given under my hand and official seal this ____ day of _____

Notary Public in and for the State of Washington

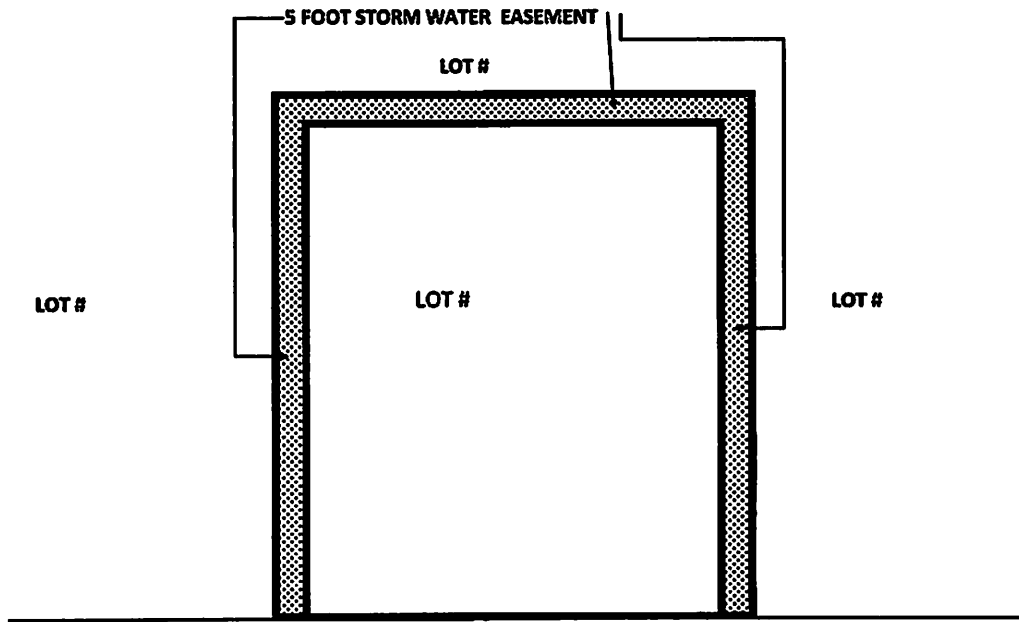
Residing in _____

My commission expires _____

STORM WATER EASEMENT EXHIBIT "A"

LOT ADDRESS _____
PLAT _____
LOT NUMBER _____
BLOCK NUMBER _____
DIVISION _____
OWNER(S) _____
STREET ADDRESS _____
CITY _____
STATE _____ ZIP _____
PHONE _____

NORTH ARROW



Who filled out this form?

Signature _____

Printed _____

Date _____