Development Review Committee Agenda

Chehalis Building and Planning Department
November 23, 2022, at 9 A.M.
Meeting Location: Chehalis Airport Conference Room

Have a Happy Thanksgiving!

Pre-application Conference:

9:00 AM BU-COM-22-030; 375 11th St SW

Zoning: EPF (I) / Essential Public Facility. Lewis County Parcel # 005871071121. Parcel size – approx. 66.3 acres, 2,888,028 sq ft.

Applicant proposes renovation of and addition to an existing juvenile detention facility.

9:30 AM AC-22-032; Northbound I-5 Exit 77 / 821 Main St SW

Zoning: CF / Freeway Commercial. Lewis County Parcel # 005533000000 and adjacent freeway land. Parcel size – approx. 66.3 acres, 2,888,028 sq ft.

Applicant proposes improvement project to Park & Ride located within WSDOT right of way exit.

Special Event Conference:

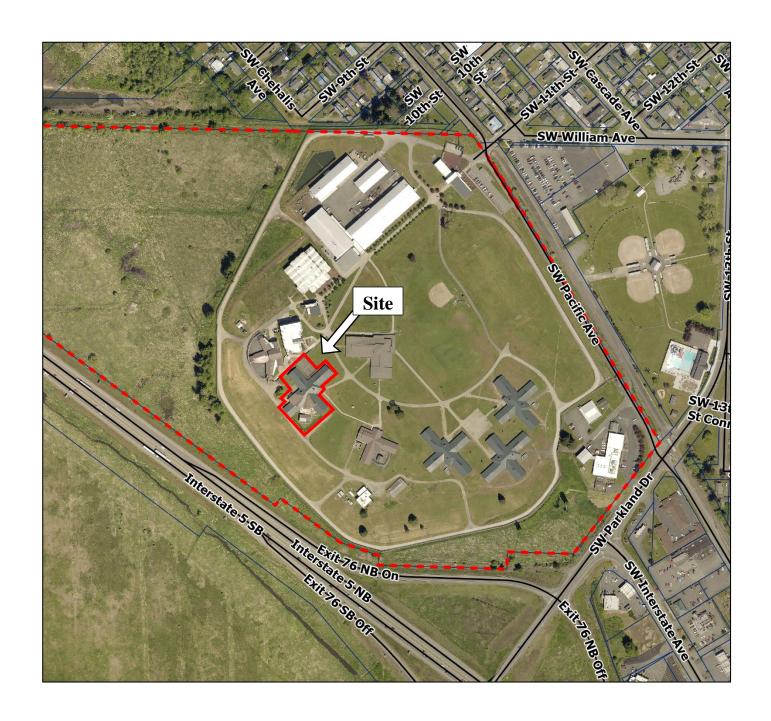
10:00 AM SE-22-018

Tree Lighting Ceremony – Lewis County Historical Museum. 599 NW Front Way, 5-7pm.

10:30 AM Interdepartmental meeting.

Join Zoom Meeting

https://us06web.zoom.us/j/88604981047?pwd=T1hvTXREK2c5V1RtaUJRMFNuNE5QQT09



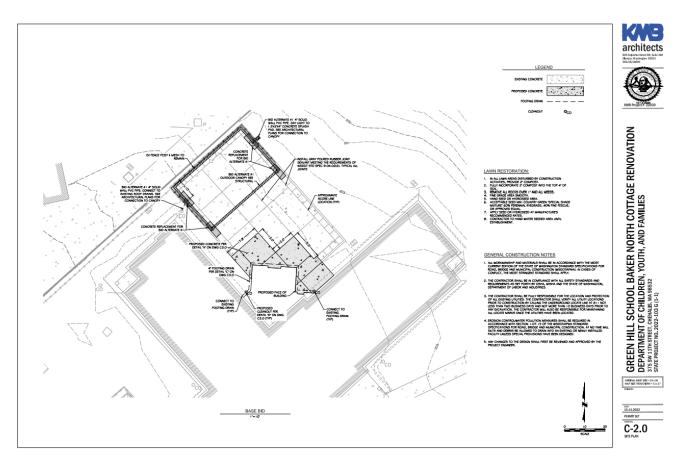


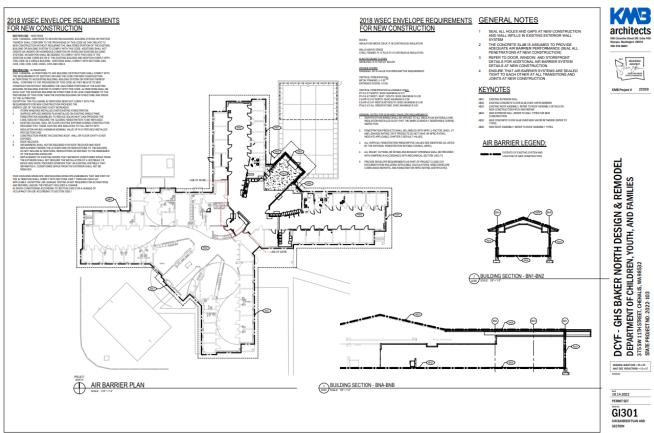
CITY OF CHEHALIS BU-COM-22-030

BU-COM-22-030, Juvenile Facility Improvement



BU-COM-22-030, Juvenile Facility Improvement







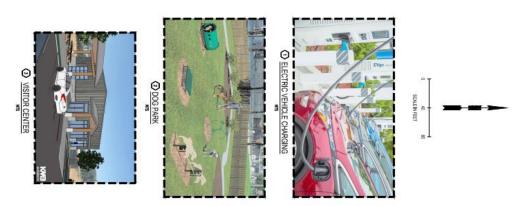


CITY OF CHEHALIS AC-22-032

AC-22-032, Twin City Transit Park and Ride

Form 1(5/24/2021) Return your conference application to Community **Development Department** CITY OF 1321 S Market Blvd. Chehalis, WA 98532 (360) 345-2229 www.ci.chehalis.wa.us email: comdev@ci.chehalis.wa.us JOB SITE ADDRESS: Northbound Exit 77 PARCEL #: 005533000000 CONTRACTOR ENGINEER SURVEYOR: APPLICANT / CONTACT PERSON: NAME: Joseph Clark, Executive Director - Twin Transit COMPANY NAME: JSA Civil, LLC ADDRESS: 212 E Locust Street CONTACT NAME: Charlie Severs, PE CITY/ST/ZIP: Centralia, WA 98531 ADDRESS: 111 Tumwater Blvd SE, Ste C210, Tumwater, WA 98501 PHONE#: (360) 330-2072 PHONE #: (360) 515-9600 EMAIL: joe@twintransit.org EMAIL: charlie.severs@jsa-civil.com CONTRACTORS L&I #: Is the property owner the same as the contact person? DETAILED PROJECT DESCRIPTION: Project proposes site improvements at the existing Exit 77 Park and Ride facility. Proposed improvements include construction of new electric vehicle (EV) charging stations, a dog park area, visitor center building, and bus pullouts for transit use. Verbal comments made during discovery are not binding. Only the plan(s) submitted will be reviewed for compliance with applicable codes. By signing below, I grant permission for City of Chehalis employees to enter and remain on the property for the purpose of review and approval of this proposal and to conduct inspections related to this proposal. Signature: Date: night L. Clark 11/14/2022 Name (print): Telephone #: Joseph Clark, Executive Director 360-330-2072 Office use only Date Received: 11/15/2022 Received by: LF Parcel #: 005533000000 Permit #: AC-22-032 Zoning: CF Flood Zone: Yes No Zone Classification: A \\gensrv\Shares\Building & Planning\Application Forms\updated application forms 2021\Applicant Conference as of 5-20-2021.doc

AC-22-032, Twin City Transit
Park and Ride







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SE-22-018, Tree Lighting Ceremony



Community Development Department
1321 S Market Blvd. Chehalis, WA 98532
(360) 345-2229 / Fax: (360) 345-1039
www.ci.chehalis.wa.us email: comdev@ci.chehalis.wa.us

SPECIAL EVENT APPLICATION
submit at least 28 days in advance of proposed event
Will your event take place on City owned property?

☑ No□ Yes if yes, insurance is required to be submitted along with the application.	submitted along with the application.
*****Please note: Incomplete applications not accepted *****	ons not accepted ******
INSURANCE - The City of Chehalis does not maintain insurance that will respond to claims against the	surance that will respond to claims against the
applicant in connection with the permitted event by the applicant, its members, or those attending the	applicant, its members, or those attending the
event. Depending on the type of event you are planning, and the activity and risk level of your group,	g, and the activity and risk level of your group
you may be required to obtain liability insurance in accordance with the City of Chehalis policy, name	ordance with the City of Chehalis policy, name
the City of Chehalis as an additional insured on the policy, and be responsible for providing proof of	olicy, and be responsible for providing proof o
such insurance. If your event will take place on City of Chehalis property, you are required to provide	Chehalis property, you are required to provide
proof of insurance. Insurance coverage shall be at a minimum of \$1,000,000 per occurrence and	minimum of \$1,000,000 per occurrence and
\$2,000,000 general aggregate. Acceptable form:	Acceptable forms: CG 20 26 or CG 20 12.

	circle) YES NO	donation?
nunication or	y intended primarily for the comm	Is this an event involving political or religious activity intended primarily for the communication or expression of ideas? (Please circle) YES $\left(\overline{\text{NO}} \right)$
— — Duan	tree lighting ceres	Type of Activity Planned (describe event): Fabilists free lighting ceremony
1	Email:	Phone Number: Daytime:Work:
1		Emergency Contact:
Juai 1.com	ME Email: plahmann@gmail.com	Phone Number: Daytime: 360-870-0706 Work: SAME
	MM	Additional Authorized Individuals: Peter Lanuaum
iscality museum org	8-0831 Email: director@lew	Phone Number: Daytime: 30 669-6372 work 360 748-0831 Email: directore lewiscounty wuseum or
	ss: 599 NW Front Way	Person in Charge: \\a550\ Mallson Kale Addre
	ical Museum	Location of event: Lewis County Historical Museum
	Historical Museum	Name of Applicant/Organization: Lewis County Historical Museum
		Other I wee lighting
	☐ Parade	
43	☐ Street Event ☐ Park Event	☐ Athletic Event ☐ Noise Permit
]	ease check the event type:
	Acceptable forms: CG 20 26 or CG 20 12.	\$2,000,000 general aggregate. Acceptable form
ed to provide currence and	f Chehalis property, you are require a minimum of \$1,000,000 per occ	such insurance. If your event will take place on City of Chehalis property, you are required to provide proof of insurance. Insurance coverage shall be at a minimum of \$1,000,000 per occurrence and
policy, name iding proof of	cordance with the City of Chehalis olicy, and be responsible for provi	you may be required to obtain liability insurance in accordance with the City of Chehalis policy, name the City of Chehalis as an additional insured on the policy, and be responsible for providing proof of
attending the of your group,	ng, and the activity and risk level o	applicant in connection with the permitted event by the applicant, its members, or those attending the event. Depending on the type of event you are planning, and the activity and risk level of your group,

Will City of Chehalis services be requested for: Street Closure Security Garbage Collection EMS Other Other	
Date(s) of Proposed Event: 12/3/22 Hours of Operation: Following the Santa Parade, ETA 12: Set-up Date/Time: 12/1/22 (approximately) Dismantling Date/Time: 1/3/23	12:30 @ the
ers:(ticipants	
Lowis County Historical Nuseum (Parking 10+/En-Museum)	map/route plan): /Ein-tracree/
Special Considerations - (Additional permits and/or licenses may be required) - Will there be:	be:
æ	
Animals? (Please circle) YES (NO) numberspecies	
Booths/Commercial Vendors: (Please circle) YES (NO) Each vendor is required to have a current City of Chehalis business license.	
Cooking/Food Service: (Please circle) YES (NO)	
Fire/Fireworks/Pyrotechnics: (Please circle) YES (NO)	
Inflatables or Amusement Rides: (Please circle) YES (NO)	
Mechanical Rides: (Please circle) YES (NO)	
Portable Restrooms: (Please circle) YES (NO) How many ?Some restrooms must meet ADA requirements.	must meet
Dumpsters: (Please circle) YES (NO) How many and where?	
Signs: (Please circle) YES (NO)	
Stage: (Please circle) YES (NO)	

Date Received: 11/02/2022 By: LF Date approved/denied DRC Reviewed: Reason for denial Parcel #: 039144001000 Permit #: SE-22-018
OFFICE USE ONLY:
dis) Exec
Signature of Applicant: of Malan Malan Malla Date: 11/2/22
officers, officials, employees and volunteers from and against any and all claims, suits, actions, or liabilities for injury or death of any person, or for loss or damage to property, which arises out of the acts or omissions of the Applicant/Permittee/User, its employees, volunteers, representatives or vendors, or from any activity, work or thing done, permitted, or suffered by Applicant/Permittee/User, related to the permitted activity, except only such injury or damage as shall have been occasioned by the sole negligence of the City of Chehalis.
HOLD HARMLESS -Applicant/Permittee/User shall defend, indemnify and hold harmless the City of Chehalis, its
the type of event you are planning, and the activity and risk level of your group, you may be required to obtain liability insurance in accordance with the City of Chehalis policy, name the City of Chehalis as an additional insured on the policy, and be responsible for providing proof of such insurance. If your event will take place on City of Chehalis property, you are required to provide proof of insurance. Acceptable forms: CG 20 26 or CG 20 12. Insurance coverage shall be at a minimum of \$1,000,000 per occurrence and \$2,000,000 general aggregate.
INSURANCE – The City of Chehalis does not maintain insurance that will respond to claims against the applicant in connection with the permitted event by the applicant, its members, or those attending the event. Depending on
ATTACH COPIES OF BROCHURES, POSTERS, FLYERS, OR MAILINGS ADVERTISING THIS EVENT
N/A
Public Relations : Please state what efforts, if any, have occurred, or you intend to make, to notify residents or businesses that will likely be affected by your event. If permit is granted it will be the responsibility of event organizers to alert those likely to be impacted. (i.e. street closures, no parking
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ATTACH COPY OF SAFETY PLAN TO THIS APPLICATION*
List any special signs/barricades/cones requested to be supplied by the City of Chehalis. There is no guarantee that the city will be able to provide.
Other special considerations: Not @ Histimet!

