

Development Review Committee is represented by the City of Chehalis:
Building and Planning | Engineering | Public Works | Fire Department | Police Department | Airport

Development Review Committee Agenda

Chehalis Building and Planning Department

June 5, 2024, at 9 A.M.

Meeting Location: Chehalis Airport Conference Room

9:00 AM AC-24-018; 153 NW State Ave

Applicant proposes to rebuild a 24'9" carport that was damaged in a windstorm. Lewis County parcel 003717001000 is zoned Commercial General.

9:30 AM SE-24-014; Special Event Permit I-5 Cars Family Fun Run/Walk

Proposed date of event August 24th, 2024 from 1950 NW Louisiana Ave to Airport Road/Riverside Golf Course

10:00 Interdepartmental staff meeting.

Join Zoom Meeting

<https://us06web.zoom.us/j/83910241095?pwd=dUI1Ym0rTkt6SHZCZjkxUTRlVDBUUT09>

Directions to Development Review Committee

Chehalis Airport Conference Room



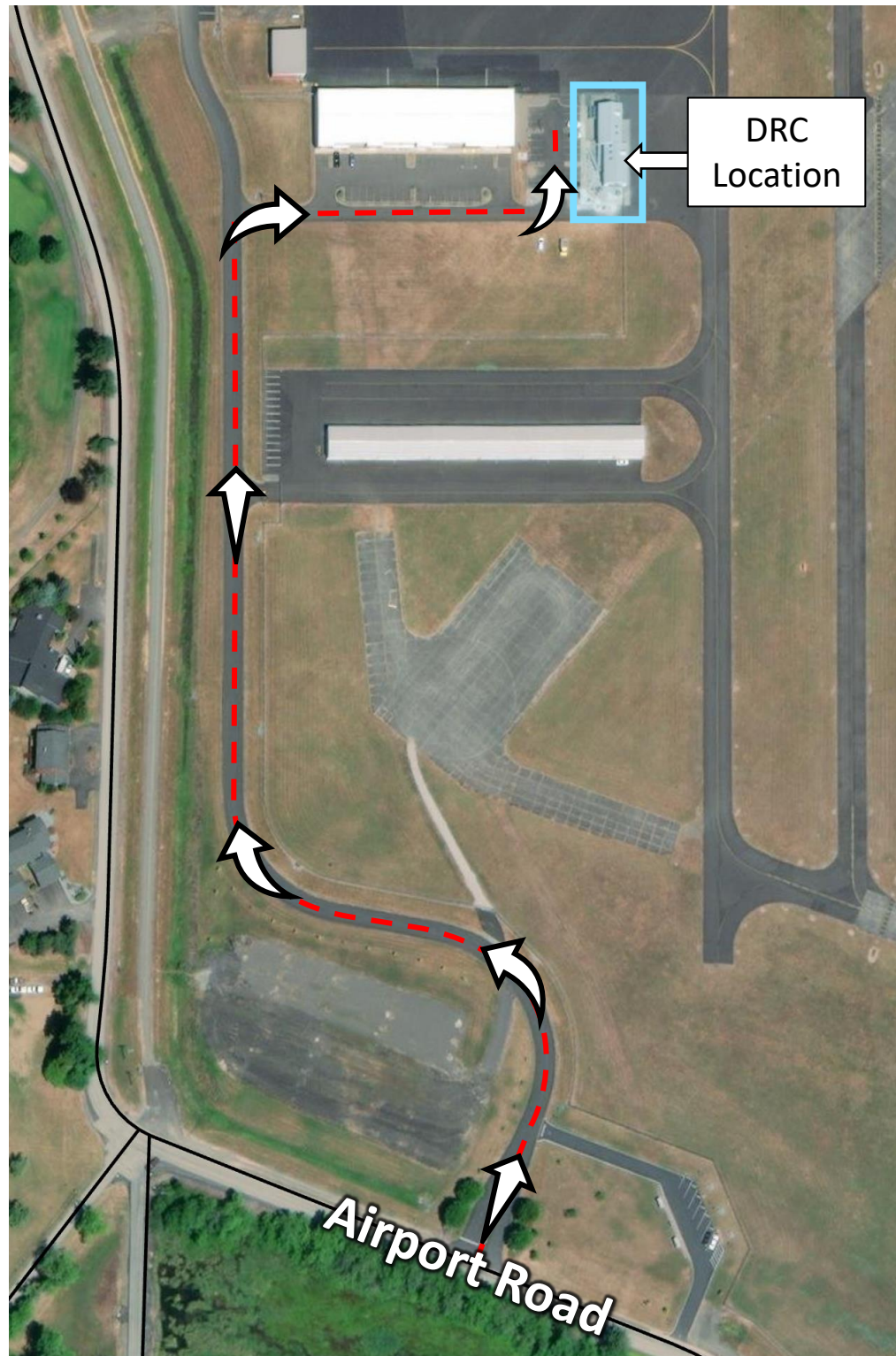
Coordinates:

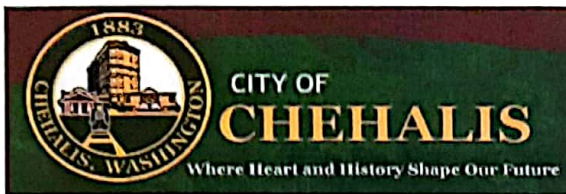
(46.672787, -122.984924)

or

46° 40' 22.0332" N

122° 59' 5.7264" W





Return your conference application to Community Development Department
 1321 S Market Blvd. Chehalis, WA 98532
 (360) 345-2229
www.ci.chehalis.wa.us email: comdev@ci.chehalis.wa.us

JOB SITE ADDRESS: 153 NW State Ave PARCEL #: 003717001000

APPLICANT / CONTACT PERSON:

NAME: Michael Scheetz
 ADDRESS: 1006 Fryar Ave Building D Suite B1
 CITY/ST/ZIP: Sumner WA 98390
 PHONE#: 253-318-1488
 EMAIL: Michael.Scheetz@chsinc.com

CONTRACTOR / ENGINEER / SURVEYOR:

COMPANY NAME: _____
 CONTACT NAME: _____
 ADDRESS: _____
 PHONE #: _____
 EMAIL: _____
 CONTRACTORS L&I #: _____

Is the property owner the same as the contact person? Yes No

DETAILED PROJECT DESCRIPTION:

Rebuilding 24' 9" x 22' carport that was damaged in wind storm.
located at Northwest corner of lot

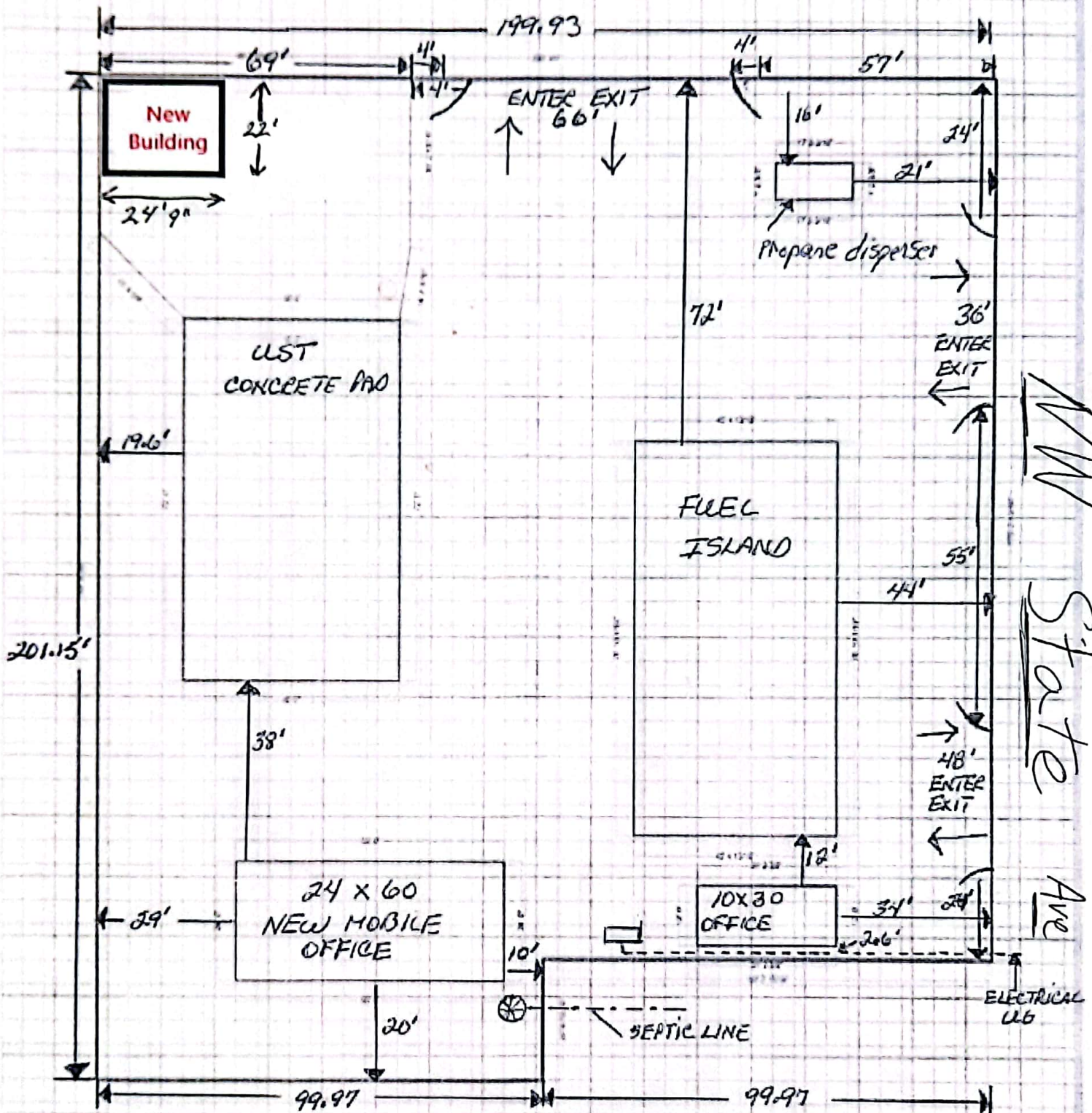
Verbal comments made during discovery are not binding. Only the plan(s) submitted will be reviewed for compliance with applicable codes. By signing below, I grant permission for City of Chehalis employees to enter and remain on the property for the purpose of review and approval of this proposal and to conduct inspections related to this proposal.

Signature: 	Date: <u>4-19-24</u>
Name (print): Michael Scheetz	Telephone #: 253-318-1488

Office use only	
Received by:	Date Received:
Parcel #:	
Permit #:	
Zoning:	
Flood Zone: Yes No	
Zone Classification:	

N ↑

NW Center St



NA



Buildings
to be Rebuilt



CHS Northwest Chehalis

NW State Ave

NW State Ave

NW Center St

NW Center St

NW C

153

Google

Question:

From the current survey that was done when we added the new Office. The property corner was identified as the Northwest corner of the building that we are wanting to rebuild. That would mean it was built with 1' setback from property line on the north and west walls. Could we rebuild the building with 1' set back, if not what would set back requirements be?

The building would have 13ft eaves and be close to 18ft at the peak. Is there a height restriction with proximity to the power lines on the North face of the proposed building?



CITY OF CHEHALIS

Where Heart and History Shape Our Future

Return your permit application to Community Development
Department

1321 S Market Blvd. Chehalis, WA 98532

(360) 345-2229

www.ci.chehalis.wa.us email: comdev@ci.chehalis.wa.us

Job address: 1950 NW Louisiana Ave Parcel #: _____

Applicant/Contact person

Name: I-S Toyota / Melissa Ryan

Mailing address: 1950 NW Louisiana Ave

City, State, and Zip: Chehalis, WA 98532

Phone #: 360-740-9300 Email: (required) melissaryan@i-scars.com

Contractor/Engineer/Surveyor

Contact Name: _____

Company/Firm Name: _____

Mailing address: _____

City, State, and Zip: _____

Phone #: _____ Email: (required) _____

Contractor's L&I #: _____

Project Description: (Create a project narrative on a separate page if there is not enough room to completely describe your project below.)

I-S cars family fun run/walk

Current market value of proposed work:
(Fair market labor and materials) _____

Only the plan(s) submitted will be reviewed for compliance with applicable codes. By signing below, you grant permission for any City of Chehalis employee the right to access and remain on the property for the purpose of review and approval of this proposal and to conduct inspections related to this proposal.

Signature: Macie Benson Date: 5/10/2024

Print Name: Macie Benson

Office use only

Received by:	Date Received:
Parcel #:	
Permit #:	
Zoning:	
Flood Zone: yes no Zone Classification:	



CITY OF CHEHALIS
Where Heart and History Shape Our Future

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 or in the street?

No **Yes** if yes, insurance is required to be submitted along with the application. (See page 3)

*****Please note: Incomplete applications are not accepted *****

Please check the event type:

- Athletic Event**
- Noise Permit**
- Car Show**
- Other** _____

- Street Event**
- Park Event**
- Parade**

Name of Applicant/Organization: I-5 Toyota

Location of event: I-5 Toyota

Person in Charge: _____ Address: 1950 NW LOUISIANA AVE

Phone Number: Daytime: 360-740-9300 Work: _____ Email: (required) _____

Additional Authorized Individuals: Melissa Ryan

Phone Number: Daytime: 360-740-9300 Work: x1125 Email: (required) melissaryan@i-5cars.com

Emergency Contact: Melissa Ryan

Phone Number: Daytime: _____ Work: _____ Email: (required) _____

Type of Activity Planned (describe event): I-5 cars Family fun run/walk

Will participants pay a fee or donate? (Please circle) **(YES)** NO

Are you a non-profit organization? (Please circle) YES **(NO)** If yes, please provide your EIN (tax) number.

Will City of Chehalis services be requested for:

- Street Closure**
- Security**
- Garbage Collection**
- EMS**

- Sidewalk Closure**
- Equipment**
- Parking Restrictions**
- Other** _____

Date(s) of Proposed Event: August 24th, 2024
Hours of Operation: 9:00 am - 11:00 am
Set-up Date/Time: August 24th, 2024 8:30am
Dismantling Date/Time: August 24th, 2024 11:30am
Number of Staff/Volunteers: 20 +/-
Estimated Number of Participants: 125 +/-

LOCATION/STREET(S) INVOLVED (describe area involved in event, attach map/route plan):
1950 NW Louisiana Ave to Airport Rd /
Riverside Golf course (route map attached)

Special Considerations - (Additional permits and/or licenses may be required) - Will there be:

Amplified sound? (Please circle) YES NO
Alcohol? (Please circle) YES YES NO
Animals? (Please circle) YES YES NO number animals _____
Types of animals listed here.

Booths/Commercial Vendors: (Please circle) YES YES NO If yes, be sure to show them on your site plan.
Each vendor is required to have a current City of Chehalis business license.

Cooking/Food Service: (Please circle) YES YES NO

Fire/Fireworks/Pyrotechnics: (Please circle) YES YES NO

Inflatables or Amusement Rides: (Please circle) YES YES NO

Mechanical Rides: (Please circle) YES YES NO

Portable Restrooms: (Please circle) YES YES NO If yes, be sure to show them on your site plan.
A portion of the restroom facilities must meet ADA requirements.

Dumpsters: (Please circle) YES YES NO If yes, be sure to show them on your site plan.

Signs: (Please circle) YES NO If yes, be sure to show them on our site plan.

Stage: (Please circle) YES YES NO If yes, be sure to show it on your site plan.

Other special considerations: _____

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.

↳ Barricades (2)

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 zones, noise, etc.)

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 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 or on City streets, you are required to provide proof of insurance. Insurance coverage shall be at a minimum of \$1,000,000 per occurrence and \$2,000,000 general aggregate.

HOLD HARMLESS –Applicant/Permittee/User shall defend, indemnify and hold harmless the City of Chehalis, its 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.

Have you included: a site plan or route plan?

A traffic control plan?

Brochures, posters, flyers, or other advertising for this event?

A copy of your insurance naming the City as co-covered, if applicable?

By signing below, the applicant certifies that they are at least 21 years old and an authorized representative of the event. Signer also verifies that they have read and understand all information contained within the application and understands that the event may not take place until authorized by the City.

Signature of Applicant: Marcus D Date: 5/10/2021

Organization/Title: I-5 cars / Guest Experience If nonprofit, EIN number: _____
Manager

SPONSORED BY

I-5 TOYOTA

**16th
ANNUAL**

BACK TO SCHOOL DASH



5K RUN-WALK

(Approx. 3.1 Miles)

SAT. AUGUST 24TH, 2024 @ 9 AM

Register at least one week prior to guarantee a t-shirt

**All proceeds help local
school scholarships.**

Register at:

I-5 Toyota, 1950 NW Louisiana Ave, Chehalis
or online at I-5CARS.com

Registration fee (includes a t-shirt)

Family - \$50 • Individual - \$25 • Student - \$15

Registration is allowed until 15 minutes before
the event. However, to guarantee a t-shirt,
you must register at least one week prior.

**GET
READY
FOR FUN!**

BE BOLD. BE KIND. BE AWESOME.™

360-740-9300 | I-5CARS.COM |



**X - Road Closed
Flagger**

START/FINISH
I-5 Toyota
1950 NW Louisiana Ave
Chehalis WA 98531

**⊗ - Road Closed
Flagger**

**WATER STATION
CHECKPOINT
TURN AROUND**
Riverside Golf Club
1451 NW Airport Rd
Chehalis WA
98532

Chehalis River

Chehalis River

NW Airport Way

NW Airport Way

Chehalis-Centralia Airport

NW Louisiana Ave

I-5

NW Maryland Ave

MN

NW Geary St

NW State Av

NW State Ave

N National Ave

N National /

79

NW River St

7a Ave

da Ave

NW Airport Way