



Lake Stevens Sewer District  
1106 Vernon Road, Suite A  
Lake Stevens, WA 98258  
(425)334-8588 Fax (425)335-5947

Gray & Osborne, Inc. (District Engineer)  
701 Dexter Avenue North, Suite 200  
Seattle, WA 98109  
(206) 284-0860 Fax (206) 283-3206

## APPLICATION FOR DEVELOPER EXTENSION TO SANITARY SEWER SYSTEM

Project Name: \_\_\_\_\_

1. The undersigned hereby makes application to Lake Stevens Sewer District, Snohomish County, Washington, for permission to construct and install an extension to the sewer system in public right-of-ways under the District's franchise, and/or on easements to connect to the District's sewer system and which are subject to the approval of the District.
2. **Attach a check for \$2,500 as a guarantee deposit.** The \$2,500 deposit shall be held by the District until all fees are paid to the District for the administration, review, design (where applicable), inspection, legal fees, the total of connection fees for all the units and any other services required by the District for the project to be accepted. If the contract is not executed by the applicant within six (6) months, the contractual deposit shall be forfeited. It is understood that the District is entitled to claim the deposit if the project is not completed and accepted within the time limits established in the contract with the District.
3. The proposed extension will be installed in roads and/or easements of the property hereinafter legally described as follows:

**Common Street Address** \_\_\_\_\_ **City** \_\_\_\_\_

**Legal Description of all Properties** (which owners warrant they are the legal owners thereof (attach full legal if necessary)).

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**All Property Tax Account Numbers:**

_____	_____
_____	_____
_____	_____

4. (A) **Describe the type of improvement planned for the above described property**, i.e. number of single family residences, other individual residential units or commercial usage (include number of units to be served).

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**B) Attached to the application shall be three copies of each of the following:**

1. Legal Description(s) of property if not able to fit in item 3 (above).
2. Title report shall be current within 30 days of application and concurrent with the signatories at time that DEA is executed.
3. A preliminary plan setting for the proposed development. The plan shall include property boundary, indication of type of development, if any, location of roads, building and/or other important features, type of building construction, including the number of units.
4. Final or preliminary plat map at a scale of 1 inch = 100 feet, where applicable.
5. A contour map of the area with a five foot contour interval or less at a scale of 1 inch = 100 feet. Datum to be based on NGVD 1929, or alternately, NAVD 1988 per the Lake Stevens Sewer District aerial topography. Locations of benchmarks are to be shown. Datum used must be explicitly stated.
6. Existing and proposed roadway profiles.

**C) Contact person and address for billing purposes:**

**Contact person:** \_\_\_\_\_ **Phone:** (    ) \_\_\_\_\_

**Company:** \_\_\_\_\_

**Address:** \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**5. Set forth the proposed date for construction for project and anticipate the completion date for the project:**

Start of Construction: \_\_\_\_\_ Complete Construction: \_\_\_\_\_

**6. Set forth all of the current property owner's names and common street address. Please also attach a title report 30 days current.**

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**7. (A) Have you made an application to Snohomish County or City of Lake Stevens for a building permit or for approval of a plat, a short plat, a rezone or a planned unit development? If yes, set forth the name of the agency and type of action required.**

Names of Agencies

Date Applied

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**(B) Has it ever been requested that you prepare an environmental checklist, negative declaration or an EIS?**

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, name of agency \_\_\_\_\_

Date of application: \_\_\_\_\_

If an EIS, negative declaration or checklist has been completed, include a copy with this application.

**(C) Have you been required to prepare a wetland delineation map?**

Yes \_\_\_\_\_ If yes, please enclose two copies No \_\_\_\_\_

**9. Please advise if there are any items on our Developer Extension Checklist with which you have a question or feel you cannot comply.**

\_\_\_\_\_

**10. Please provide contact information for the project (please print):**

**Project Manager:** \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_ Email \_\_\_\_\_

**Engineer:** \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_ Email \_\_\_\_\_

**Geotech. Engineer:** \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_ Email \_\_\_\_\_

**Surveyor:** \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_ Email \_\_\_\_\_

**Prepared by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name Printed:** \_\_\_\_\_