



HEALTH OFFICER DECISION

Application Type: Building Clearance Sewered -

Public Water

Memo #: 78453

Tax ID #: 5666-000-038-0000

RP ACCT ID: 2646073 Expiration: 09/05/2021

Property Information

2363 SE KELBY CIR Port Orchard WA 98366

Applicant

LA WILLIAMS CONST LTD PO BOX 111 FOX ISLAND WA 98333

Health Officer Decision for Water Supply

| Approved (See Conditions Below) | Name of Inspector: BETTY SUE JAMESON | Date: 08/06/2020 |
|---------------------------------|--------------------------------------|------------------|
| | | |

Final Decision: Approved

Health District workflow step can be approved for Building Permit final

kits appubliche alth.org

Sewered Building Clearance (Public Water)

Application Summary:

Submitted: 8/5/2020 7:53:08 PM Completed: 8/6/2020 12:19:00 PM Application No: 78453 Reviewer: Jameson, Betty Sue

Addresses

Applicant's Address

Tony Williams L.A. Williams Construction Limited P.O. Box 111

Fox Island, WA 98333

Contact Methods

Email: lawillconst@gmail.com Phone: 253-381-0252

Building Site Address

2363 S.E. Kelby Circle Port orchard , WA 98366

Assessor's Account Number: 5666-000-038-0000

Lot number: 38

Questions

General

Q: Will this project include either a Food Service Establishment or a School?

A: No

Q: Is there an existing septic system located on this property?

A: No

Q: Is there an existing well located on this property?

A: No

Acknowledgment

Q: I understand that all information presented on this form is true and accurate to my best knowledge. I also understand that if during the process of construction, if existing septic tanks and/or wells are found that the Health District is to be notified and that they will be decommissioned per applicable code and processes.

A: Yes

Service Summary

Application ID: 78453

| Service | Fee |
|--|---------|
| Sewered Building Clearance with public water | \$90.00 |

Total charges for application: \$90.00

Sewered Building Clearance (Public Water)

Applications powered by the SkipThePaper

Payment Log

| Date | Amount | Description | Bank Response |
|----------|---------|-----------------|-------------------------------------|
| 8/5/2020 | \$90.00 | Application Fee | This transaction has been approved. |

Total amount Paid: \$90.00



2924 SE Lund Avenue, Port Orchard, WA 98366 (360) 876-2545 • Fax (360) 874-5030

www.customerservice@wsud.us

APPLICATION FOR BINDING WATER AVAILABILITY COMMITMENT

In order to be binding, this Application must be completed, dated and signed by the General Manager of West Sound Utility District ("District") or his/her authorized designee.

For each water commitment sought for a water hook-up, please complete the section below. Verbal approval of this Application provided over the phone by a District representative or completion of this Application by a person other than the District's General Manager or his/her authorized designee will not be accepted by the District or deemed valid in any respect.

THIS SECTION TO BE COMPLETED BY APPLICANT:

| The Public Water Syste and will supply water to | m, West Sound Utility Distr | ict_, State ID No | o. <u>02600 W</u> , | is capable of supplying |
|--|--|-------------------|---------------------|----------------------------|
| Property owner L.A. Wi | Iliams Construction Limited | fo | r ONE | connection(s) located |
| | s Phase III ATN # 5666-000- ty Address <u>and</u> County Assess | | nhar) | |
| (Froper | ty Address <u>and</u> County Assess | sor s account nur | moer) | |
| ☑ This connect | tion is to be used for | ONE SINGLE F | AMILY RESI | DENCE |
| ☐ This connec | tion is for commercial or indus | strial purposes. | | |
| The Availability Letter is valid for three (3) years from the date appearing below. At the conclusion of this three-year period, the Water Commitment provided hereby shall automatically terminate and have no further legal force or effect. The "Terms and Conditions" found on the back-side of this Application shall expressly control the District's and Applicant's obligations and rights concerning the Water Commitment provided herein. Applicant must also sign, date and include his/her address on reverse side hereof. | | | | |
| THIS SECTION TO | BE COMPLETED BY D | ISTRICT: | | |
| WEST SOUND UTIL By: Print Name & Title: | Raymond Jehnie Raymond | DATE: | mer S | -2020 ervice |
| Mailing Address: | 2924 SE Lund Avenue Port Orchard WA 98366 | | | 60-876-2545 60-874-5030 |

West Sound Utility District recommends that you retain a copy of this completed form for your personal records.

"TERMS AND CONDITIONS OF WATER COMMITMENT"

- 1. This Water Commitment is valid only for the real property referenced herein for the sole purpose of submission by Applicant to the Kitsap County Department of Community Development and/or the Bremerton/Kitsap County Health Department. It is entered into between District and Applicant only, and shall not be assigned or transferred by Applicant to any other person or entity. Further, no third person or entity shall have any rights hereunder, whether by agency, as a third party beneficiary, or under any other circumstances whatsoever.
- 2. District makes no representations, express or implied, that Applicant will be successful in obtaining the necessary permits, approvals, and/or authorizations from Kitsap County or any other governmental agency that is necessary before Applicant may utilize the utility service which is the subject of this Water Commitment.
- 3. The binding water availability commitment does not release the applicant from making those water system improvements necessary for applicant's project and approved by West Sound Utility District.

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West Sound Utility District recommends that you retain a copy of this completed form for your personal records.



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www.customerservice@wsud.us

APPLICATION FOR BINDING SEWER AVAILABILITY COMMITMENT

In order to be binding, this Application must be completed, dated and signed by the General Manager of West Sound Utility District ("District") or his/her authorized designee.

For each sanitary sewer commitment sought for a sewer hook-up, please complete the section below. Verbal approval of this Application provided over the phone by a District representative or completion of this Application by a person other than the District's General Manager or his/her authorized designee will not be accepted by the District or deemed valid in any respect.

| THIS SECTION TO BE COMPLETED BY APPLICANT: |
|--|
| The District is capable of providing sanitary sewer collection and treatment services to the following property |
| Property Owner: L.A. Williams Construction Limited |
| Property Address: Lot 38 Willey Estates Phase III , Port Orchard, WA |
| Tax Account Number(s): 5666-000-038-0000 |
| Tax Account Number(s): |
| Number of Connections: ONE Residential Multi-Family Commercial (Circle the applicable category) |
| Description of Project: |
| Connect one single family residence to sewer line. |
| APPROVAL OF SEWER COMMITMENT The Availability Letter is valid for three (3) years from the date appearing below. At the conclusion of this three-year period, the Sewer Commitment provided hereby shall automatically terminate and have no further legal force or effect. The "Terms and Conditions" found on the back-side of this Application shall expressly control the District's and Applicant's obligations and rights concerning the Sewer Commitment provided herein. Applicant must also sign, date and include his/her address on reverse side hereof. |
| THIS SECTION TO BE COMPLETED BY DISTRICT: |
| By: Della Raymond - Customer Service |

West Sound Utility District recommends that you retain a copy of this completed form for your personal records.

"TERMS AND CONDITIONS OF SEWER COMMITMENT"

- 1. This Sewer Commitment is valid only for the real property referenced herein for the sole purpose of submission by Applicant to the Kitsap County Department of Community Development and/or Kitsap County Health Department. It is entered into between District and Applicant only and shall not be assigned or transferred by Applicant to any other person or entity. Further, no third person or entity shall have any rights hereunder, whether by agency as a third party beneficiary or under any other circumstances whatsoever.
- 2. This Sewer Commitment is valid for such property that is located within an Urban Growth Area of Kitsap County, property that has a vested site plan with sewer service approved by the County, or property that is otherwise permitted by the County to receive sewer service.
- 3. District makes no representations, express or implied, that Applicant will be successful in obtaining the necessary permits, approvals and/or authorizations from Kitsap County or any other governmental agency that is necessary before Applicant may utilize the utility service which is the subject of this Sewer Commitment.
- 4. The binding sewer availability commitment does not release the applicant from making those sanitary sewer system improvements necessary for applicant's project and approved by West Sound Utility District.

| TO BE COMPLETED BY APPLICANT: | |
|--|-----------------|
| Applicant Signature: | Date: 6/12/2020 |
| Address: P.O. BOX 111 | |
| City, State, Zip Code FOX ISLAND, WA 98333 | |
| Phone Number: 253-381-0252 FAX Number | • |
| E Mail Address: LAWILLCONST@GMAIL.COM | |

- A summary of fees and refundable deposits is available upon request.
- All fees are required to be paid in full before connection to the sanitary sewer system.
- A Developer Extension Contract is required for extensions to the sanitary sewer system. All
 extensions are required to be approved by the District and to meet District standards.
- If a grinder pump is required, the grinder pump make and model shall be specified by the District. Prior to approval, the District shall be granted the required utility easements.

West Sound Utility District recommends that you retain a copy of this completed form for your personal records.