

**HEALTH OFFICER DECISION****Application Type: Building Clearance****Memo #:** 69621  
**Tax ID #:** 272702-3-003-2003  
**RP ACCT ID:** 1406743  
**Expiration:** 01/04/2021**Property Information**26180 LEYMAN LN NE  
Kingston WA 98346**Applicant**Jeff & Dorothy Thomas  
26180 LEYMAN LN NE  
KINGSTON WA 98346**Health Officer Decision for Onsite Sewage System**

<b>Approved</b> (See Conditions Below)	Name of Inspector: <i>KIMBERLY JONES</i>	Date: <i>12/10/2019</i>

**Health Officer Decision for Water Supply**

<b>Approved</b> (See Conditions Below)	Name of Inspector: <i>KIMBERLY JONES</i>	Date: <i>12/10/2019</i>

**Final Decision: Approved****Health District workflow step can be approved for Building Permit final**



## Residential Building Clearance

### Application Summary:

Submitted: 12/6/2019 1:42:25 PM  
Completed: 12/11/2019 10:04:00 AM

Application No: 69621

Reviewer: Jones, Kimberly

## Addresses

### Applicant's Address

Jeff Thomas  
26180 Leyman LN NE  
Kingston, WA 98346

### Contact Methods

Email: djcjtho@centurylink.net  
Phone: 3602974194

### Project Property Address

Jeff Thomas  
26180 Leyman LN NE  
Kingston, WA 98346

### Contact Methods

Contact Person Phone Number: 360-509-8189  
Contact Person Email: coffeeguy55@icloud.com

Assessor's Account Number: 272702-3-003-2003  
Contact Person Name: Jeff Thomas

### Property Address

26180 LEYMAN LN NE  
Kingston, WA

## Questions

### Prerequisites

**Q:** Are you proposing a change in use of the property? For example: changing from residential to commercial use, or adding any use types that are not typical of residential use.

**A:** No

**Q:** May Qualify for an Exemption \*\*\*

**A:**

**Q:** Do your property records indicate that your septic system has an approved septic permit?

**A:** Yes

**Q:** May Qualify for an Exemption \*\*\*

**A:**

### Residential Building Clearance

Application ID: 69621

Applications powered by the SkipThePaper

**Permit Number: 19-05128**

**Q:** Do your property records indicate that there is an approved reserve drainfield area OR the property is greater than 1 acre?

**A:** Yes

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**Q:** May Qualify for an Exemption \*\*\*

**A:**

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## Proposal

**Q:** Are you proposing a detached structure with plumbing?

**A:** No

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**Q:** May Qualify for an Exemption \*\*\*

**A:**

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**Q:** Are you proposing an above-ground deck that is less than 10 feet from the primary and reserve drainfield areas?

**A:** No

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**Q:** May Qualify for an Exemption \*\*\*

**A:**

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**Q:** Are you proposing an increase in bedrooms?

**A:** No

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**Q:** May Qualify for an Exemption \*\*\*

**A:**

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**Q:** Are you proposing the expansion of the building(s) footprint or addition of a structure (excluding decks) that will be less than 30 feet to the primary and/or reserve drainfield areas?

**A:** No

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**Q:** May Qualify for an Exemption \*\*\*

**A:**

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**Q:** Are you proposing the replacement of a manufactured home?

**A:** No

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**Q:** May Qualify for an Exemption \*\*\*

**A:**

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**Q:** Does your application include documents stamped by a licensed septic designer or professional engineer for establishing a reserve drainfield area?

**A:** No

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**Q:** May Qualify for an Exemption \*\*\*

**A:**

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**Q:** \*\*\* If all answers above within the Prerequisites and Proposal sections resulted in: "May Qualify for an Exemption" You may select the Building Clearance Exemption Fee in the application services section below.</br>Please note that further review by the Health District may require full Building Clearance fees - you will be notified of the change.

**A:**

**Q:** Please describe your project in detail.

**A:** 2x2x2 hole is dug for reserve area inspection

## Septic System Detail

**Q:** Is the property served by a standard gravity or standard pump-to-gravity onsite sewage system?

**A:** Yes

**Q:** Has the septic tank (and pump tank if present) been inspected or pumped within the last 3 years? This is required for application approval.

**A:** Yes

## Drinking Water Detail

**Q:** Is the property served by a public water system?

**A:** No

**Q:** Type of well to which the residence is connected

**A:** Individual Well

**Q:** Are all wells located on the property shown on your site plan? If there are wells, they must be shown on the site plan.

**A:** Yes

## Informational

**Q:** A site plan that meets the Universal Site Plan is required to be attached to this application.

**A:**

## Acknowledgment

**Q:** I certify that all of the information provided is accurate to the best of my knowledge, and agree to all of the conditions set forth within KCBOH Ordinance No. 2008A-01. The site plan must comply with the requirements listed on the universal site plan and include a bar scale. Failure to complete site plan requirements may result in application rejection.

**A:** Yes

**Q:** I understand that based upon the initial review of my application that the service fee selected may be changed by the Health District.

**A:** Yes

## Service Summary

Service	Fee
Full Building Clearance	\$330.00

**Total charges for application: \$330.00**

## Payment Log

Date	Amount	Description	Bank Response
12/6/2019	\$330.00	Application Fee	This transaction has been approved.

**Total amount Paid: \$330.00**

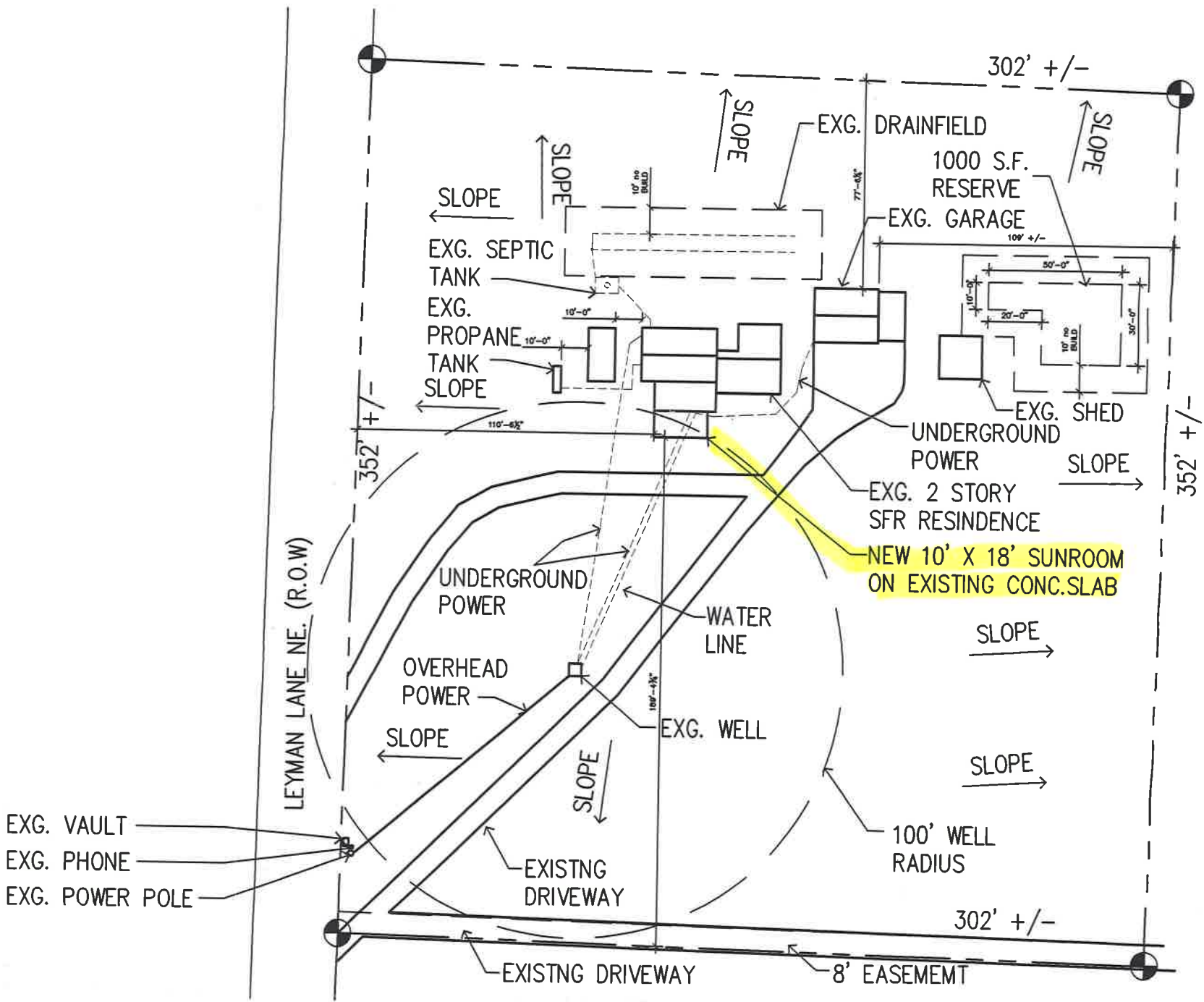
Figure 1: Site Plan Requirements Checklist	
All site plans shall be clearly and accurately drawn to 1/4"=30', 30' = 40' or 60' scale on paper no larger than 11" x 17" and must indicate all of the following information. For each item below, mark either "Shown" or "Not Shown" as appropriate for your project. This checklist must be completed and included on all site plans. Any site plan without this checklist will be rejected and returned to the applicant for correction.	
Shown N/A	Parcel Number 272702-3-003-2003
A. General Property Information:	
<input checked="" type="checkbox"/>	Tax ID Number and Property Address
<input checked="" type="checkbox"/>	Property lines and dimensions
<input checked="" type="checkbox"/>	Elevations of property and the direction of natural drainage
<input checked="" type="checkbox"/>	Slopes that exceed 15%, including any out banks greater than 4' in height
<input checked="" type="checkbox"/>	North arrow and site plan scale
<input type="checkbox"/>	Manne, waters, lakes and ponds and their associated high water lines
<input type="checkbox"/>	Streams, creeks & wetlands and their associated buffer areas
B. Existing Property Improvements:	
<input checked="" type="checkbox"/>	Location of all existing structures, including the locations of existing structures on adjacent waterfront properties
<input checked="" type="checkbox"/>	Location of all existing wells and their well radii, including those wells on adjacent properties within 100' of property lines
<input checked="" type="checkbox"/>	Location of all existing drainfields, including the 10' "No Build Zone" as well as the locations of existing drainfields on adjacent properties within 100' of any well
<input type="checkbox"/>	Location of existing drainage facilities, including all sub-surface infiltration systems
<input checked="" type="checkbox"/>	Location of all existing and abutting roadways, driveways, easements, buffers and required open spaces
<input checked="" type="checkbox"/>	Location of all existing water, sewer and utility lines
C. Proposed Property Improvements:	
<input checked="" type="checkbox"/>	Location and dimensions of all proposed structures or building envelopes in relation to property lines, other structures, etc.
<input type="checkbox"/>	Location of all proposed wells, including their 100' well radii and all water lines
<input type="checkbox"/>	Location of all proposed septic tanks, pump tanks, pre-treatment units, and drainfields, including the 10' "no build" zone
<input type="checkbox"/>	Location and dimensions of all proposed drainage and infiltration systems
<input type="checkbox"/>	Location, dimensions, surfacing materials, and clearing limits of all proposed parking areas, driveways, sidewalks & road app's.
<input type="checkbox"/>	Location of all proposed water, sewer and utility lines



## VICINITY MAP

SCALE : NTS

APPROVED  
FOR SEWAGE AND WATER ONLY



## BUILDING DATA

## SITE PLAN

SCALE : 1" = 50'-0"

SCOPE OF WORK: \_\_\_\_\_ NEW SUNROOM  
OWNER: \_\_\_\_\_ JEFF THOMAS  
SITE ADDRESS: \_\_\_\_\_ 26180 LEYMAN LN. NE  
KINGSTON WA, 98346  
TAX ID # \_\_\_\_\_ 272702-3-003-2003

SITE AREA: \_\_\_\_\_ 2.26 ACRES  
ZONING: \_\_\_\_\_ RP  
DATE: \_\_\_\_\_ 10-17-19  
RVSD: \_\_\_\_\_ 11-7-19  
DRAWING BY: \_\_\_\_\_ ERIC PERKINS  
360-509-5405  
*Eric Perkins*

### NOTES:

1. INFORMATION ON THIS SITE PLAN IS FOR NEW SUNROOM LOCATION AND GENERAL DESIGN PURPOSES ONLY.
2. SEE SHORT PLAT AND SEPTIC / SEWER DESIGNS FOR ADDITIONAL INFORMATION. SITE INFO PROVIDED BY OWNER.
3. SITE INFO OBTAINED FROM KITSAP COUNTY CAD FILE, KITSAP COUNTY PARCEL DETAILS AND PERSONAL SITE VISIT.
4. LEGAL DESCRIPTION - W1/2 E1/2 NE1/4 SW1/4 EXC N 1000FT THOF & EXCEPT THE WEST 30 FEET FOR RIGHT OF WAY PER RESOLUTION NO. 031-1997; SITUATE IN KITSAP COUNTY, WASHINGTON; ALSO SUBJECT TO EASEMENTS OF RECORD.