



City of Castle Rock

Department Of Building and Planning
City Hall, PO Box 370 / 141 'A' St SW, Castle Rock, WA 98611
Phone: 360.274.8181 / Email: finance@ci.castle-rock.wa.us

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PLEASE PRINT IN INK OR TYPE

MASTER APPLICATION

PROPERTY INFORMATION

Project Address: see property sheet attached City: Castle Rock Parcel #: see property sheet
Short Plat/Subdivision: Block: Lot:

OWNER/APPLICANT INFORMATION

Applicant/Authorized Agent: CT6, LLC. - Contact: Shane Tapani Phone: 360-687-1148
Mailing Address: PO Box 1419 City: Battle Ground State: WA Zip: 98604
Property Owner: see property sheet attached Phone:
Mailing Address: City: State: Zip:
Additional Contact:
Contractor: MacKay Sposito - Contact: Jaclyn Smith PE Lic #: Phone: 360-823-1320
Mailing Address: 18405 SE Mill Plain Blvd Ste 100 City: Vancouver State: WA Zip: 98683
Lender Name: Phone:
Lender's Address:

PROJECT INFORMATION

- Building/Construction: Building Permit, Excavation & Grading Permit, Manufactured/Structure Placement, Mechanical Permit, Plumbing Permit, Roofing Permit, Signage Permit, Other
Planning: Critical Areas, Flood Plain, Master Plan Amendment (checked), Mobile Home Park, Plat (Preliminary), Plat (Final), Short Plat, Site Plan (Preliminary), Site Plan (Final)
Environmental: Critical Areas, Flood Plain Permits, SEPA, Surface Mining, Other

PROJECT DESCRIPTION

Occupancy Group: N/A Type of Construction: N/A Sq. Ft. N/A No. of Stories: N/A No. of Bedrooms: N/A
Is there any grading, filling, or excavation associated with this project? No Quantity (cubic yards):
(Including grading for road construction, site preparation, and landscaping.) NO SITE WORK MAY BE DONE PRIOR TO CRITICAL AREAS DETERMINATION.
Water Supply: N/A Sewage Disposal: N/A Type of Heat: N/A Fair Market Value: N/A
Does project involve Asbestos? YES NO

PLEASE PROVIDE A BASIC DESCRIPTION OF THE PROPOSED PROJECT:

Minor Master Plan Amendment to approved Landing on the Cowlitz Master Plan (Ordinance 2021-10)

I hereby certify that I am the owner or duly authorized agent of the owner for the purposes of this application. Further, I grant permission from the owner to any and all employees and representatives of the City of Castle Rock and other governmental agencies to enter upon and inspect said property as reasonably necessary to process this application. I further certify that I have read and examined this application and know the same to be true and correct. If any of the information provided on this application is incorrect, the permit or approval may be revoked.

APPLICANT'S SIGNATURE: Shane Tapani DATE: 7/11/23
APPLICATION ACCEPTED BY: DATE:
APPLICATION APPROVED BY: DATE:

PERMIT NUMBER
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