



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

CR

PLEASE PRINT IN INK OR
TYPE

MASTER APPLICATION

PROPERTY INFORMATION

Project Address: N/A City: Castle Rock Parcel #: 308120500
Short Plat/Subdivision: _____ Block: _____ Lot: _____

OWNER/APPLICANT INFORMATION

Applicant/Authorized Agent: Shane Tapani on behalf of CT6, LLC Phone: 360.687.1148
Mailing Address: PO Box 1419 City: Battle Ground State: WA Zip: 98604
Property Owner: Same as Applicant Phone: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Contractor: Tapani Inc. Lic #: TAPANI*88OE Phone: 360.907.7615
Mailing Address: PO Box 1419 City: Battle Ground State: WA Zip: 98604
Lender Name: N/A 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
☐ 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 Shoreline
**Substantial
Development
Permit
SEPA Checklist**

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? Yes Quantity (cubic yards): 121 cubic yard (cy) cut & 113 cy fill
(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:

Stormwater outfall for the Phase 1 infrastructure of the Landing on the Cowlitz Master Plan (ref. CR-24-051).

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

DocuSigned by: 8ADCF0136D1B439...

DATE: 3/6/2025 | 1:01 PM PST

APPLICATION ACCEPTED BY: _____ DATE: _____

APPLICATION APPROVED BY: _____ DATE: _____

PERMIT NUMBER
CR _____