



# REQUEST FOR PRESUBMISSION CONFERENCE

## OFFICIAL USE ONLY

Case #: \_\_\_\_\_

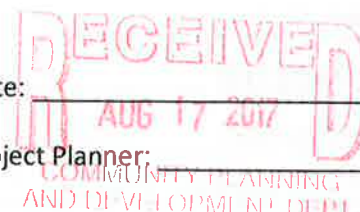
Master File #: 17.3610

Date: \_\_\_\_\_

Received By: [Signature]

Related Cases: \_\_\_\_\_

Project Planner: \_\_\_\_\_



*Note: Presubmission file will be purged in one year if there is no further activity on this project.*

**Please print or type and FILL OUT COMPLETELY (Electronic Submittal Required)**

Proposed Project Title: Dr. La Before and After Daycare

Project Address: 2405 15th Ave SE

OLYMPIA WA 98501

Assessor's Parcel Number(s): 45600500101

Legal Description: Section 24 Township 18 Range 2W Quarter SE NE

(attach separate sheet if necessary) Lot Block Addition Plat East side Addition Block 6 Lt 1

Zoning: Document 204002

**NAME OF APPLICANT:** David & Shannon Goerig

Mailing Address: 3408 Wiggins Rd SE

Area Code and Phone #: Olympia Wa 98501

E-mail Address: Goerigd@gmail.com

**NAME OF OWNER (or PURCHASER)** Gabriel Jordan

Mailing Address: 2407 15th Ave SE

Olympia WA 98501

Area Code and Phone #: \_\_\_\_\_

**NAME OF AUTHORIZED REPRESENTATIVE** (if different from above) \_\_\_\_\_

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

Area Code and Phone #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

I affirm that all answers, statements, and information submitted with this request are correct and accurate to the best of my knowledge. I also affirm that I am the owner of the subject site or am duly authorized by the owner to act with respect to this request. Further, I grant permission from the owner to any and all employees and representatives of the City of Olympia and other governmental agencies to enter upon and inspect said property as reasonably necessary to process this request.

Print Name Shannon Goerig

Signature(s) [Signature]

Date 8-18-17

	EXISTING	TO BE ADDED	TOTAL
Parcel Area	0.14 acre 6048.4 sq. ft.	sq. ft.	sq. ft.
Number of Lots	1		
IBC Building Type			
Occupancy Type			
Number of Buildings			
Height	ft.	ft.	ft.
Number of Stories Including Basement	2		
Basement	NA sq. ft.	sq. ft.	sq. ft.
Ground Floor	694 sq. ft.	sq. ft.	sq. ft.
Second Floor	850 sq. ft.	sq. ft.	sq. ft.
Remaining Floors (number _____)	garage? 260 sq. ft. NA	sq. ft.	sq. ft.
Gross Floor Area of Building	sq. ft.	sq. ft.	sq. ft.
Landscape Area	sq. ft.	sq. ft.	sq. ft.
Number of Vehicular Parking Spaces			
Number of Long Term Bike Spaces			
Number of Short Term Bike Spaces			
Total Amount of Hard Surfaces (pavement, green roofs, pervious pavement etc.)	sq. ft.	sq. ft.	sq. ft.
Total Impervious Surface Coverage (new and proposed)	sq. ft.	sq. ft.	sq. ft.
Sewer (circle one)	City/Septic	City/Septic	
Water (circle one)	City/Well	City/Well	

**PROJECT DESCRIPTION** (please fill out the above table and provide general information below):

We request a conditional change of use to provide Before and after care services for the students at Olympia Regional Learning Academy. There are currently no ~~see~~ viable services for working parents at the school.