



KITTTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

411 N. Ruby St., Suite 2, Ellensburg, WA 98926

CDS@CO.KITTTITAS.WA.US

Office (509) 962-7506

"Building Partnerships – Building Communities"

**BOUNDARY LINE ADJUSTMENT**

*(Adjustment of lot lines resulting in no new lots, as defined by KCC 16.10.010)*

**NOTE: If this Boundary Line Adjustment is between multiple property owners, seek legal advice for conveyance of property. This form does not legally convey property.**

**Please type or print clearly in ink. Attach additional sheets as necessary. Pursuant to KCC 15A.03.040, a complete application is determined within 28 days of receipt of the application submittal packet and fee. The following items must be attached to the application packet.**

**REQUIRED ATTACHMENTS**

**Note: The following are required per KCC 16.10.020 Application Requirements. A separate application must be filed for each boundary line adjustment request.**

- Unified Site Plan of existing lot lines and proposed lot lines with distances of all existing structures, access points, wetlands, streams, well heads and septic drainfields to scale.
- Signatures of all property owners.
- Narrative project description (include as attachment): Please include at minimum the following information in your description: describe project size, location, water supply, sewage disposal and all qualitative features of the proposal; include every element of the proposal in the description.
- Provide existing and proposed legal descriptions of the affected lots. Example: Parcel A – The North 75 feet of the West 400 feet of the Southwest quarter of the Southwest quarter of the Southwest quarter of Section 02; Township 20 North; Range 16 East; W.M.; Except the West 30 feet thereof for roads.
- A certificate of title issued within the preceding one hundred twenty (120) days.

For final approval (not required for initial application submittal):

- Full year's taxes to be paid in full.
- Draft Final Survey meeting all conditions of Conditional Preliminary Approval.

**APPLICATION FEES:**

\$810.00	Kittitas County Community Development Services (KCCDS)
\$1,215.00*	Kittitas County Public Works
\$145.00	Kittitas County Fire Marshal
\$205.00	Kittitas County Public Health Department Environmental Health

**\$2,375.00 Total fees due for this application** (One check made payable to KCCDS)

\*5 hours of review included in Public Works Fee. Additional review hours will be billed at \$243 per hour.

**FOR STAFF USE ONLY**

Application Received By (CDS Staff Signature): 	DATE: 6-29-23	RECEIPT # 0023-01646	<div style="border: 2px solid black; padding: 5px; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <div style="border: 1px solid black; padding: 5px; font-weight: bold; font-size: 1.1em;">JUN 29 2023</div> <div style="border: 1px solid black; padding: 5px; font-weight: bold; font-size: 1.1em;">Kittitas County CDS</div> <div style="border: 1px solid black; padding: 5px; font-size: 0.8em;">DATE STAMP IN BOX</div>
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**OPTIONAL ATTACHMENTS**

- An original survey of the current lot lines. (Please do not submit a new survey of the proposed adjusted or new parcels until after preliminary approval has been issued.)
- Assessor COMPAS Information about the parcels.

**GENERAL APPLICATION INFORMATION**

**1. Name, mailing address and day phone of land owner(s) of record:**

*Landowner(s) signature(s) required on application form*

Name: SUNCADIA RESORT LLC  
Mailing Address: 770 SUNCADIA TRAIL  
City/State/ZIP: CLE ELUM, WA 98922  
Day Time Phone: O) 509.649.6352  
Email Address: Gary Kittleson <gkittleson@suncadia.com>

**2. Name, mailing address and day phone of authorized agent, if different from landowner of record:**

*If an authorized agent is indicated, then the authorized agent's signature is required for application submittal.*

Agent Name: Lathan Wedin  
Mailing Address: 770 Suncadia Trail  
City/State/ZIP: Cle Elum, WA 98922  
Day Time Phone: 509.649.6119  
Email Address: Lathan Wedin <lwedin@suncadia.com>

**3. Name, mailing address and day phone of other contact person**

*If different than land owner or authorized agent.*

Name: Rhoda Crispin of Lathrop, Winbauer, Harrel & Slothower, LLP  
Mailing Address: 415 East Mountain View Ave., Suite 302  
City/State/ZIP: Ellensburg, WA 98926  
Day Time Phone: 509-925-5622  
Email Address: rccrispin@lwhsd.com

**4. Street address of property:**

Address: Liberty Bell Ln  
Cle Elum WA 98922  
City/State/ZIP: \_\_\_\_\_

**5. Legal description of property (attach additional sheets as necessary):**

Lots 17-58, 17-59, 17-60, 17-61, and 17-62, of SUNCADIA - PHASE 3 DIVISION 17 (TUMBLE CREEK), in the County of Kittitas, State of Washington, as per plat thereof recorded in Book 13 of Plats, pages 215 through 228, under Auditor's File No. 202204190029, records of said county.

**6. Property size:** 4.56 acres (acres)

**7. Land Use Information:** Zoning: MPR Comp Plan Land Use Designation: Rural Recreation

**8. Existing and Proposed Lot Information**

Original Parcel Number(s) & Acreage  
(1 parcel number per line)

20-14-15050-1758 \ P#96429 ac: 1.01 (0.810)  
 20-14-15050-1759 \ P#96430 ac: 0.97 (0.966)  
 20-14-15050-1760 \ P#96431 ac: 0.91 (0.907)  
 20-14-15050-1761 \ P#96432 ac: 0.88 (0.884)  
 20-14-15050-1762 \ P#962433 ac: 0.97 (0.793)

New Acreage  
(Survey Vol. \_\_\_\_, Pg \_\_\_\_)

Parcel A: (17-59) ac: 1.292  
 Parcel B: (17-60) ac: 1.174  
 Parcel C: (17-61) ac: 1.10 (1.086)  
 Parcel D: (17-62) ac: 1.00 (1.008)

APPLICANT IS:  OWNER  PURCHASER  LESSEE  OTHER

**AUTHORIZATION**

9. Application is hereby made for permit(s) to authorize the activities described herein. I certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief such information is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activities. I hereby grant to the agencies to which this application is made, the right to enter the above-described location to inspect the proposed and or completed work.

**NOTICE: Kittitas County does not guarantee a buildable site, legal access, available water or septic areas, for parcel receiving approval for a Boundary Line Adjustment.**

*All correspondence and notices will be transmitted to the Land Owner of Record and copies sent to the authorized agent or contact person, as applicable.*

Signature of Authorized Agent:

(REQUIRED if indicated on application)

X  (date) 6/21/23

Signature of Land Owner of Record

(Required for application submittal):

X  (date) 6/21/23  
 X  (date) 6/21/23

Suncadia Resort LLC, a Delaware limited liability company By i Managing Member, LCIF Suncad LLC, a Delaware limited liability company

**THIS FORM MUST BE SIGNED BY COMMUNITY DEVELOPMENT SERVICES AND THE TREASURER'S OFFICE PRIOR TO SUBMITTAL TO THE ASSESSOR'S OFFICE.**

**TREASURER'S OFFICE REVIEW**

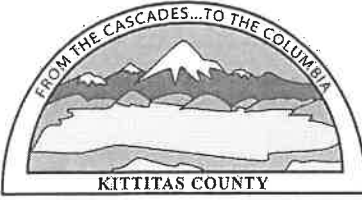
Tax Status: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_

**COMMUNITY DEVELOPMENT SERVICES REVIEW**

( ) This BLA meets the requirements of Kittitas County Code (Ch. 16.08.055).

Deed Recording Vol. \_\_\_\_\_ Page \_\_\_\_\_ Date \_\_\_\_\_ \*\*Survey Required: Yes \_\_\_ No \_\_\_

Card #: \_\_\_\_\_ Parcel Creation Date: \_\_\_\_\_  
 Last Split Date: \_\_\_\_\_ Current Zoning District: \_\_\_\_\_  
 Preliminary Approval Date: \_\_\_\_\_ By: \_\_\_\_\_  
 Final Approval Date: \_\_\_\_\_ By: \_\_\_\_\_



KITTITAS COUNTY  
COMMUNITY DEVELOPMENT SERVICES

Receipt Number: CD23-01646

411 N. Ruby St., Suite 2  
Ellensburg, WA 98926  
509-962-7506 / <https://www.co.kittitas.wa.us/cds/>

**Payer/Payee:** SUNCADIA RESORT LLC  
770 SUNCADIA TRAIL  
CLE ELUM WA 98922

**Cashier:** GAIL WEYAND CDS  
**Payment Type:** CHECK (452)

**Date:** 06/29/2023

**BL-23-00014**      **Boundary Line Adjustment**

<u>Fee Description</u>	<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
Boundary Line Adjustment (Fire)	\$145.00	\$145.00	\$0.00
Boundary Line Adjustment (Health)	\$205.00	\$205.00	\$0.00
Boundary Line Adjustment	\$810.00	\$810.00	\$0.00
Boundary Line Adjustment (Public Works)	\$1,215.00	\$1,215.00	\$0.00
<b>BL-23-00014 TOTALS:</b>	<b>\$2,375.00</b>	<b>\$2,375.00</b>	<b>\$0.00</b>
<b>TOTAL PAID:</b>		<b>\$2,375.00</b>	