

Letter of Transmittal



Western Washington Division
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407 Swiftwater Blvd., Cle Elum, WA 98922
Tel (509) 674-7433

To: **Kittitas County CDS**

Date: **03-08-2024** Job No. **23050**

Attn: **KCCDS**

Re: **Smith – Equinox SP**

WE ARE SENDING YOU Attached Under separate cover via overnight mail/regular mail the following items:

PRINTS	PLANS	SHOP DRAWINGS	COPY OF LETTER	CHANGE ORDER	SAMPLES	SPECIFICATIONS	SUBMITTAL

COPIES	DATE	NO.	DESCRIPTION
1	12/27/23	4 pgs	Short Plat Application
1		1 pg	Project Narrative
1	03/2024	4 pgs	8.5 x 11 copy of preliminary short plat drawing
2	03/2024	8 pgs	18 x 24 copy of preliminary short plat drawing

THESE ARE TRANSMITTED as checked below:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> For approval | <input type="checkbox"/> Approved as submitted | <input type="checkbox"/> Resubmit ____ copies for approval | <input type="checkbox"/> For signature |
| <input type="checkbox"/> For your use | <input type="checkbox"/> Approved as noted | <input type="checkbox"/> Submit ____ copies for distribution | |
| <input type="checkbox"/> As requested | <input type="checkbox"/> Returned for corrections | <input type="checkbox"/> Return ____ corrected prints | |
| <input type="checkbox"/> For review and comment _____ | | | |
| <input type="checkbox"/> FOR BIDS DUE _____ | | <input type="checkbox"/> PRINTS RETURNED AFTER LOAN TO US | |

REMARKS:

Signature: Title: _____

Copy to: File _____