

# KITTITAS COUNTY

## DEPARTMENT OF PUBLIC WORKS

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### MEMORANDUM

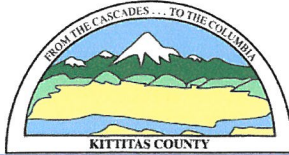
TO: Jeff Watson  
FROM: Christina Wollman, Planner II *aw*  
DATE: February 15, 2011  
SUBJECT: Learmonth Accessory Dwelling Unit AU-11-00001

The Department of Public Works has reviewed the permit for the Learmonth Accessory Dwelling Unit and has the following comments:

- A. Access: Access to the proposed ADU is from SR 10. Kittitas County does not have jurisdiction over state owned roads. The applicant must contact WSDOT for an access permit and complete any improvements prior to issuance of any permit. The applicant must adhere to all regulations set forth by WSDOT and the Kittitas County Road Standards.

Contact Dan Eberle, WSDOT SCR Development Review and Access Management  
509-577-1637

- B. Addressing: Contact the Kittitas County Rural Addressing Coordinator at (509) 962-7523 to obtain addresses prior to obtaining a building permit. A parcel cannot receive a building permit or utilities until such parcel is identified with a 911 address.



# KITTTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

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

CDS@CO.KITTTITAS.WA.US

Office (509) 962-7506

Fax (509) 962-7682

"Building Partnerships – Building Communities"

## ACCESSORY DWELLING UNIT PERMIT APPLICATION

*(Proposing an Accessory Dwelling Unit outside of a designated Urban Growth Area or Urban Growth Node, per Kittitas County Code 17.60B)*

**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

- Address list of all landowners within 500 feet of the subject parcel(s). If adjoining parcels are owned by the applicant, then the 500 foot area shall extend from the farthest parcel. If the parcel is within a subdivision with a Homeowners' or Road Association, then please include the mailing address of the association.
- Site plan of the property with all proposed buildings, points of access, roads, parking areas, septic tank, drainfield, drainfield replacement area, areas to be cut and/or filled, natural features such as contours, streams, gullies, cliffs, etc.
- Project Narrative responding to Questions 9-13 on the following pages.

### APPLICATION FEES:

1000.00	Kittitas County Community Development Services (KCCDS) (SEPA exempt)
0.00	Kittitas County Department of Public Works
0.00	Kittitas County Fire Marshal

**\$1000.00 Total fees due for this application (One check made payable to KCCDS)**

### FOR STAFF USE ONLY

Application Received By (CDS Staff Signature): 	DATE: 01-20-11	RECEIPT # 10142	<div style="border: 2px solid red; padding: 5px; color: red; font-weight: bold; font-size: 1.2em;">           PAID            JAN 20 2011            KITTTITAS CO.            CDS         </div> <p style="font-size: 0.8em; margin-top: 5px;">DATE STAMP IN BOX</p>
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COMMUNITY PLANNING • BUILDING INSPECTION • PLAN REVIEW • ADMINISTRATION • PERMIT SERVICES • CODE ENFORCEMENT • FIRE INVESTIGATION

FORM LAST REVISED: 6-25-2010

Page 1 of 3

**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: JAMES L. LEARMONTH  
Mailing Address: 11661 HWY 10  
City/State/ZIP: ELLENSBURG, WA 98926  
Day Time Phone: (509) 964-2279  
Email Address: jgboefairpoint.net

**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: JIM MILLER - ALPINE DESIGN  
Mailing Address: 5831 STRANGE RD  
City/State/ZIP: ELLENSBURG, WA 98926  
Day Time Phone: 509 929 1287  
Email Address: jbl@fairpoint.net

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

*If different than land owner or authorized agent.*

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Day Time Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**4. Street address of property:**

Address: 11661 HWY 10  
City/State/ZIP: ELLENSBURG, WA 98926

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

SEC 2 TWP 18 RANGE 17 PTN NE 1/4

6. Tax parcel number: 946333 18-17-02020-0031

7. Property size: 3.49 (acres)

**8. Land Use Information:**

X Zoning: AG-20

Comp Plan Land Use Designation: \_\_\_\_\_

**PROJECT NARRATIVE**

(INCLUDE RESPONSES AS AN ATTACHMENT TO THIS APPLICATION)

- 9. **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.
- 10. **Provision of the zoning code applicable.**
- 11. **Describe the development existing on the subject property and associated permits.** List permit numbers if know. (i.e. building permits, access permits, subdivisions)
- 12. **Name the road(s) or ingress/egress easements that provide legal access to the site.**
- 13. **An Administrative Use Permit may be granted only when the following criteria are met.** Please describe in detail how each criteria is met for this particular project:
  - A. There is only one ADU on the lot.
  - B. The owner of the property resides in or will reside in either the primary residence or the ADU.
  - C. The ADU does not exceed the square footage of the habitable area of primary residence.
  - D. The ADU is designed to maintain the appearance of the primary residence.
  - E. The ADU meets all the setback requirements for the zone in which the use is located.
  - F. The ADU has or will meet the applicable health department standards for potable water and sewage disposal.
  - G. The ADU is not located on a lot in which a Special Care Dwelling or an Accessory Living Quarter already exists.
  - H. The ADU has or will provide additional off-street parking.
  - I. The proposed use is essential or desirable to the public convenience and not detrimental or injurious to the public health, peace, safety, or general welfare of the surrounding neighborhood.
  - J. The proposed use will not adversely affect the established character of the surrounding vicinity and planned uses.
  - K. The proposed use will not be injurious to the uses, property, or improvements adjacent to, and in the vicinity of, the site upon which the proposed use is to be located.
  - L. The granting of the proposed administrative use permit is consistent and compatible with the intent of goals, objectives and policies of the Kittitas County Comprehensive Plan, and any implementing regulation.

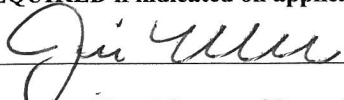
**AUTHORIZATION**

- 14. 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.

**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)**

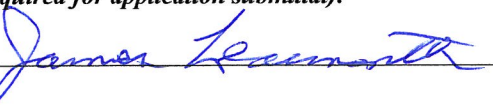
**Date:**

X 

1/18/11

**Signature of Land Owner of Record  
(Required for application submittal):**

**Date:**

X 

1/18/11

**ALPINE DESIGN & INSPECTION, INC.**

**MAILING ADDRESS: 581 STRANGE RD. ELLENSBURG, WA 98926 (509) 929-1287  
UPPER COUNTY OFFICE: 111 WRIGHT AVE, SUITE A, CLE ELUM, WA (509) 674-5128**

January 20, 2011

Kittitas County Community Development Services

Narrative regarding the attached Accessory Dwelling Unit application for the owners James Learmonth & Roberta Spinazola 11661 Hwy 10 Ellensburg, WA. Tax parcel number 18-17-02020-0031.

The attached ADU application is for the purpose of providing caretaker living quarters.

The proposed ADU will be a 766 square foot, one bedroom living quarter. The primary residence on this parcel is 1,876 square feet. The proposed ADU is the only ADU proposed for this property. Setbacks were checked when the existing building to be occupied by the ADU was permitted and built in 2002 and meet current setbacks. No external changes to the building are proposed. The style of the existing building closely matches the primary residence.

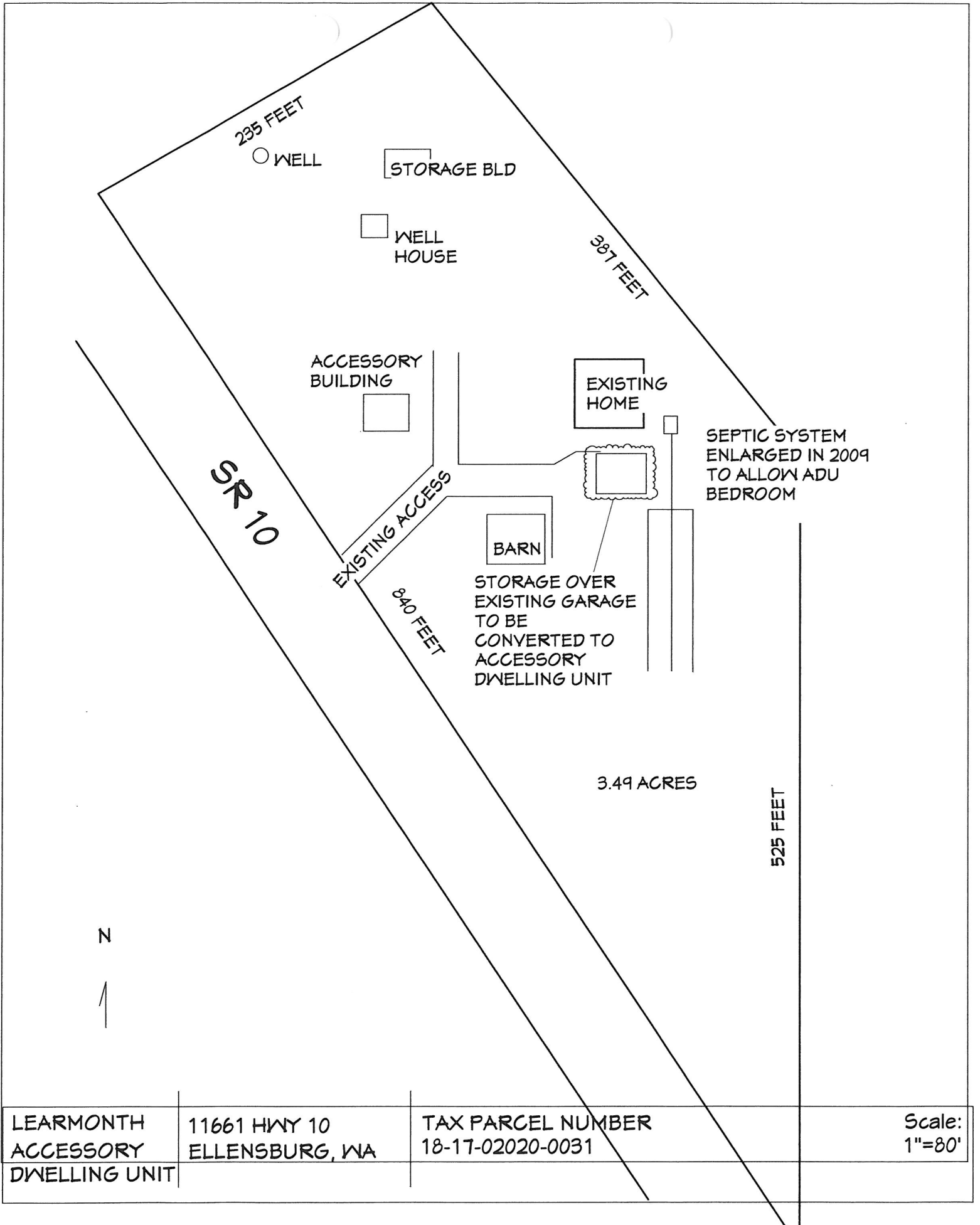
The proposed ADU will be located in the second floor of an existing detached garage on this parcel. The building has existing code compliant stairs built and inspected under a previous permit that will serve this dwelling. Plans and engineering of the proposed structure and occupancy change were submitted and reviewed previously and are waiting for ADU processing at KCCDS.

The Public Health Department has septic permit and design on record for the expanded septic system that was done specifically for this purpose (garage apartment). A new drainfield line was permitted and added in 2009.

Water for the dwelling will be provided from the existing well located on the parcel. A Water Availability permit and water quality test was processed through the Health Department and should be on record.

Access to the ADU will be from the existing driveway and road access off of HWY 10. This a 3.49 acre parcel with large gravel parking areas sufficient for two residences.

This occupancy will not be injurious to the public or have a negative impact on surrounding properties. The proposed ADU is consistent and compatible with the Kittitas County Comprehensive Plan.

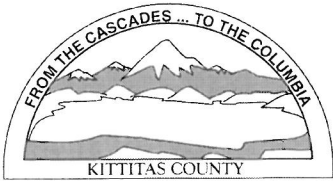


LEARMONTH  
ACCESSORY  
DWELLING UNIT

11661 HWY 10  
ELLENSBURG, WA

TAX PARCEL NUMBER  
18-17-02020-0031

Scale:  
1"=80'



KITTITAS COUNTY PERMIT CENTER  
411 N. RUBY STREET, ELLENSBURG, WA 98926

**RECEIPT NO.:** 00010142

COMMUNITY DEVELOPMENT SERVICES  
(509) 962-7506

PUBLIC HEALTH DEPARTMENT  
(509) 962-7698

DEPARTMENT OF PUBLIC WORKS  
(509) 962-7523

**Account name:** 015343

**Date:** 1/20/2011

**Applicant:** JIM MILLER

**Type:** check # 1285

<u>Permit Number</u>	<u>Fee Description</u>	<u>Amount</u>
AU-11-00001	ADMINISTRATIVE USE FEE	1,000.00
	Total:	1,000.00