

## KITTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

411 N. Ruby St., Suite 2, Ellensburg, WA 98926 CDS@CO.KITTITAS.WA.US

DS@CO.KITTITAS.WA.US Office (509) 962-7506 Fax (509) 962-7682

"Building Partnerships - Building Communities"

## **BOUNDARY LINE ADJUSTMENT**

(Adjustment of lot lines resulting in no new lots, as defined by KCC 16.08.055)

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

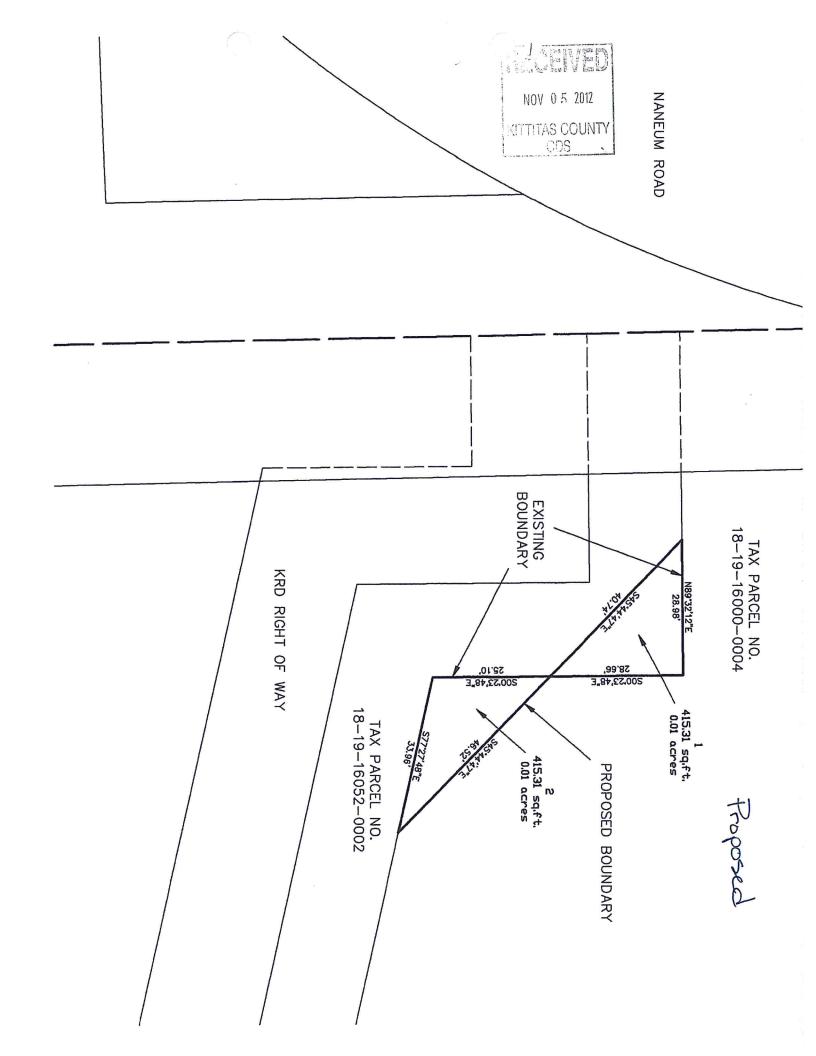
Please type or print clearly in ink. Attach additional sheets as necessary. Pursuant to KCC 15A.03.040, a complete application is determined within 28 days of receipt of the application submittal packet and fee. The following items must be attached to the application packet.

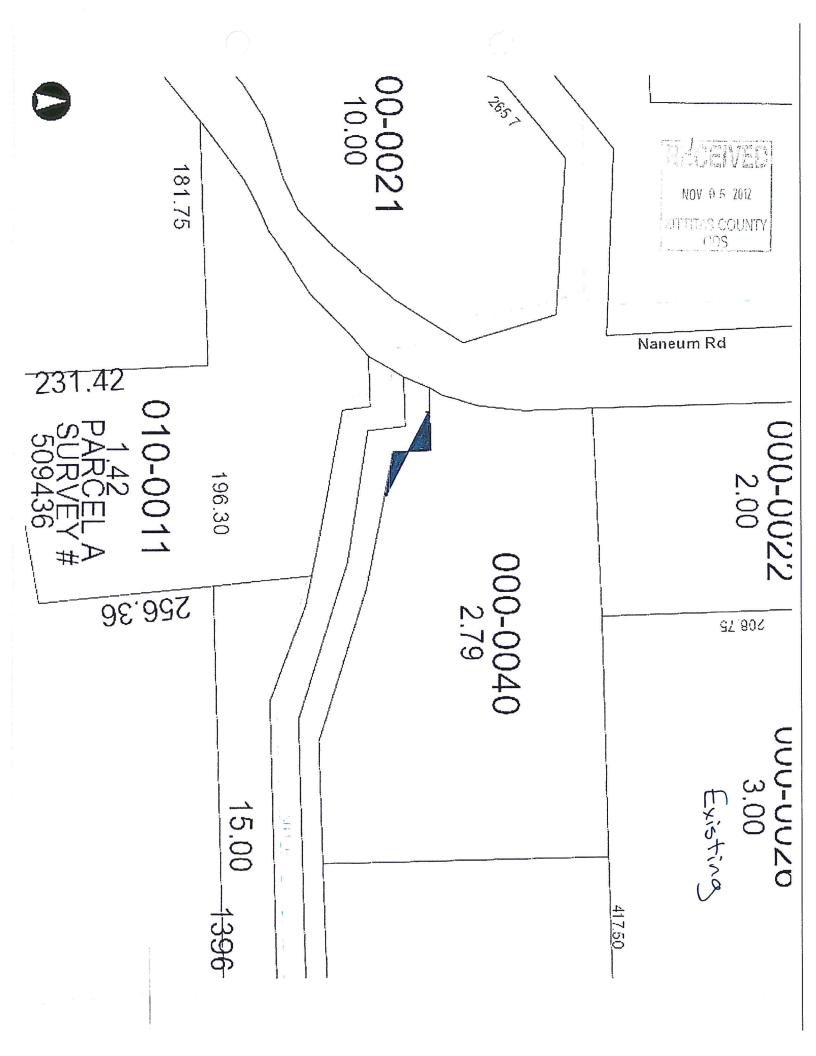
## REQUIRED ATTACHMENTS

<ul> <li>Note: a separate application must be filed for each boundary line adjustment request.</li> <li>Unified Site Plan of existing lot lines and proposed lot lines with distances of all existing structures, access points, well heads and septic drainfields.</li> <li>Signatures of all property owners.</li> <li>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.</li> <li>For preliminary approval, please submit a sketch containing the following elements.</li> </ul>							
	<ol> <li>Identify the boundary of the segregation:         <ul> <li>a. The boundary lines and dimensions</li> <li>b. Sub-Parcel identification (i.e. Parcels A, B, C or Lots 1, 2, 3, etc.)</li> </ul> </li> <li>Show all existing buildings, well heads and drain fields and indicate their distances from the original exterior property lines AND from the proposed property lines. If you have a copy of an original survey, please attach. A new survey will not be needed until preliminary approval has been granted.</li> <li>Provide legal descriptions for each proposed tax parcel and identify by letter or number use on the map. Example: Parcel</li> <li>A - The North 75 feet of the West 400 feet 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.</li> <li>For final approval (not required for initial application): Legal descriptions of the proposed lots, or a recorded survey.</li> </ol>						
9	\$225.00 \$90.00 \$65.00 \$175.00	Kittitas County Department of Public Works Kittitas County Fire Marshal Kittitas County Public Health Department Environmental Health					
2	\$555.00	Total ices due for this application (one electrical payment)	promote the second seco				
		FOR STAFF USE ONLY	IDMACMEN				
Appl	lication F	Received By (CDS Staff Signature):  DATE: RECEIPT 15935	NOV 0 5 2012				
			KITTITAS COUNTY CDS				
100			DATE STAMP IN BOX				

An original survey of the c parcels until after prelimin Assessor COMPAS Inform	ary approval has been issued.  nation about the parcels.	t submit a new survey of the page	roposed adjusted or new				
	GENERAL APPLICATION						
Name, mailing address and day phone of land owner(s) of record:  Landowner(s) signature(s) required on application form							
Name:	Umland	Daugherty					
Mailing Address:	5122 Naneum Rd	P.O. Box 795					
City/State/ZIP:	Ellensburg, WA 989	926					
Day Time Phone:							
Email Address:							
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:	Chris Cruse						
Mailing Address:	P.O. Box 959						
City/State/ZIP:	Ellensburg, WA 98	926					
Day Time Phone:	962-8242						
Email Address:	cruseandassoc@k	valley.com					
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:			-				
Street address of property:							
Address:			-				
City/State/ZIP:			_				
Legal description of property (attach additional sheets as necessary): Portions of SE 1/4 S16, T18N, R19E, WM and lot 2 of Patterson SP-11-00007							
Property size: 2.79	and 5.65		(acres)				
I and Use Information:		Comp Plan Land Use Designa	tion: Rural				

8.	Existing and Proposed Lot Information							
	Original Parcel Number(s) & Acreage (1 parcel number per line)	New Acreage (Survey Vol, Pg)						
	18-19-16000-0040 2.79 Ac	2.79 Ac						
	18-19-16052-0002 5.65 Ac	5.65 Ac						
	APPLICANT IS:OWNERPURCHASE	RLESSEEOTHER						
9.	with the information contained in this application information is true, complete, and accurate. I fur	e the activities described herein. I certify that I am familiar, and that to the best of my knowledge and belief such other certify that I possess the authority to undertake the sto which this application is made, the right to enter the						
NOTIC parcel r	E: Kittitas County does not guarantee a buildab receiving approval for a Boundary Line Adjustmen	ole site, legal access, available water or septic areas, for at.						
All age	correspondence and notices will be transmitted to th nt or contact person, as applicable.	e Land Owner of Record and copies sent to the authorized						
Signatu	re of Authorized Agent:	Signature of Land Owner of Record						
(REQU	RED if indicated on application)	(Required for application submittal): /// 4/// X						
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 Stat	tus: By:	Date:						
()	COMMUNITY DEVELOPM This BLA meets the requirements of Kittitas County							
()	Deed Recording Vol Page Date							
Car	rd #:	Parcel Creation Date:						
	t Split Date:	Current Zoning District:						
Pre	liminary Approval Date:	Ву:						
Fin	al Approval Date:	Ву:						







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

**RECEIPT NO.:** 

00015935

COMMUNITY DEVELOPMENT SERVICES

(509) 962-7506

PUBLIC HEALTH DEPARTMENT (509) 962-7698

DEPARTMENT OF PUBLIC WORKS

(509) 962-7523

Account name:

023458

Date: 11/5/2012

Applicant:

BRET M. DAUGHERTY

Type:

check

# 1007

Permit Number	Fee Description	Amount
BL-12-00031	BOUNDARY LINE ADJUSTMENT MAJOR	225.00
BL-12-00031	BLA MAJOR FM FEE	65.00
BL-12-00031	PUBLIC WORKS BLA	90.00
BL-12-00031	ENVIRONMENTAL HEALTH BLA	175.00
	Total:	555.00