

# Critical Areas Checklist

Wednesday, August 06, 2014

Application File Number



Planner

Is SEPA required  Yes  No



Is Parcel History required?  Yes  No

What is the Zoning?



Is Project inside a Fire District?  Yes  No

If so, which one?



Is the project inside an Irrigation District?  Yes  No

If so, which one?

Does project have Irrigation Approval?  Yes  No

Which School District?

Is the project inside a UGA?  Yes  No

If so which one?

Is there FIRM floodplain on the project's parcel?  Yes  No

If so which zone?

What is the FIRM Panel Number?

Is the Project parcel in the Floodway?  Yes  No

Does the project parcel contain a shoreline of the State?  Yes  No

If so what is the Water Body?

What is the designation?

Does the project parcel contain a Classified Stream?  Yes  No

If so what is the Classification?

Does the project parcel contain a wetland?  Yes  No

If so what type is it?

Does the project parcel intersect a PHS designation?  Yes  No

If so, what is the Site Name?

Is there hazardous slope in the project parcel?  Yes  No

If so, what type?

Does the project parcel abut a DOT road?  Yes  No

If so, which one?

Does the project parcel abut a Forest Service road?  Yes  No

If so, which one?

Does the project parcel intersect an Airport overlay zone ?  Yes  No

If so, which Zone is it in?

Does the project parcel intersect a BPA right of way or line?  Yes  No

If so, which one?

Is the project parcel in or near a Mineral Resource Land?  Yes  No

If so, which one?

Is the project parcel in or near a DNR Landslide area?  Yes  No

If so, which one?

Is the project parcel in or near a Coal Mine area?  Yes  No

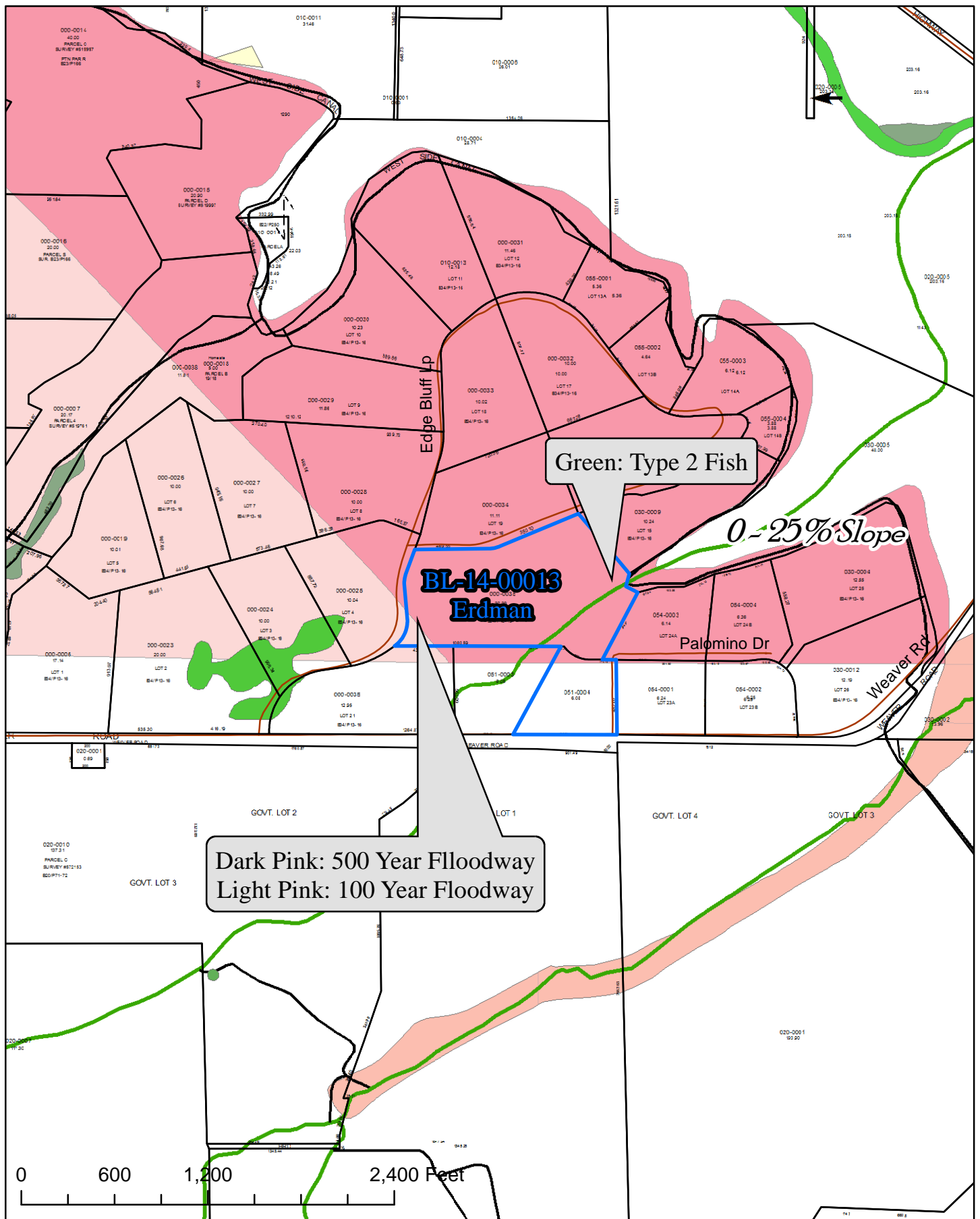
What is the Seismic Designation?

C

Does the Project Application have a Title Report Attached?

Does the Project Application have a Recorded Survey Attached?

Have the Current Years Taxes been paid?

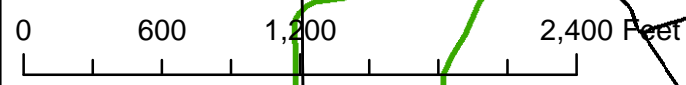


Green: Type 2 Fish

0-25% Slope

**BL-14-00013**  
**Erdman**

Dark Pink: 500 Year Floodway  
Light Pink: 100 Year Floodway



**BL-14-00013**  
**Erdman**

**Critical Area**  
**Map**

8/5/2014

kaycee.hathaway



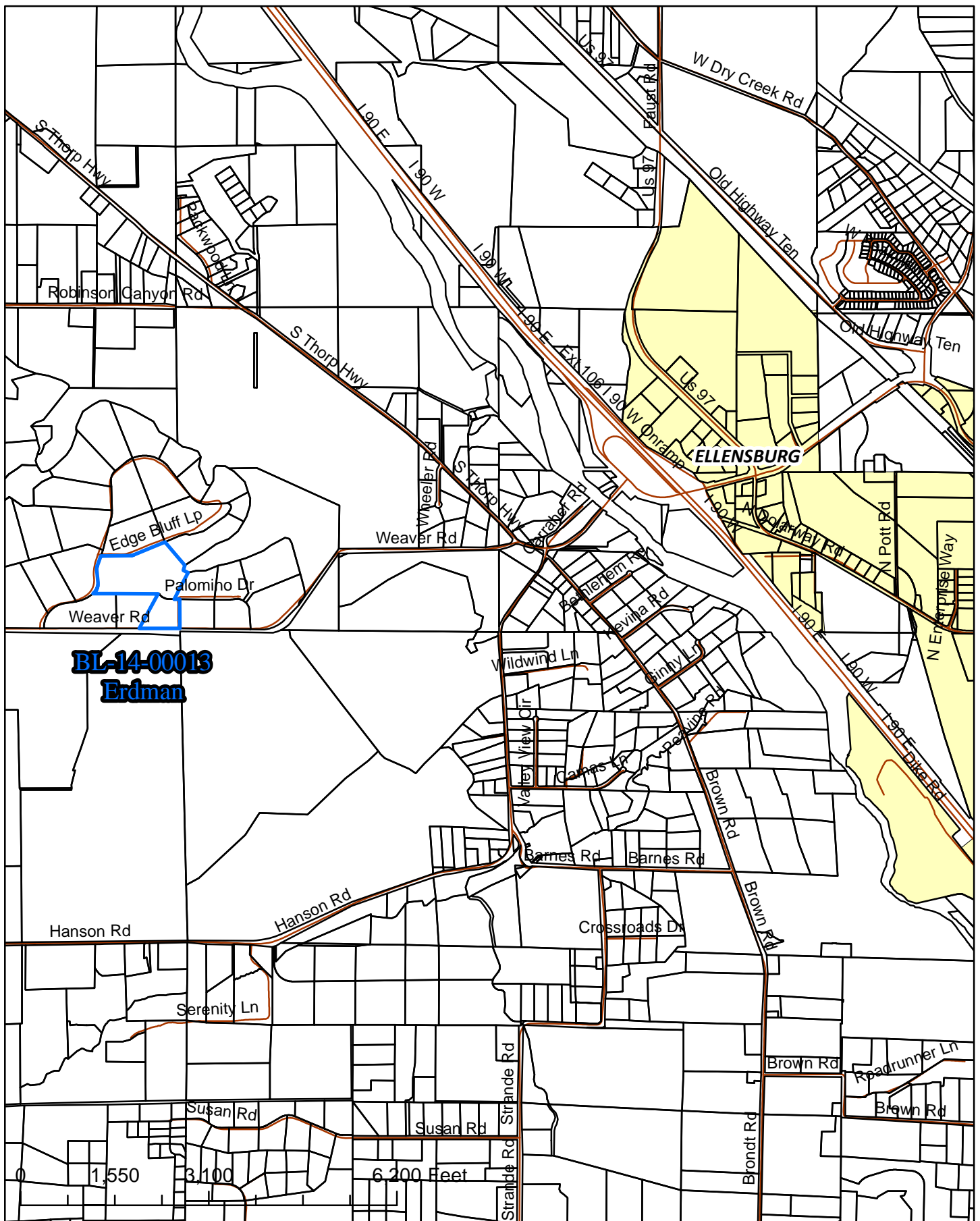


BL-14-00013  
Erdman

8/5/2014

Air  
Photo

kaycee.hathaway



**BL-14-00013**  
**Erdman**

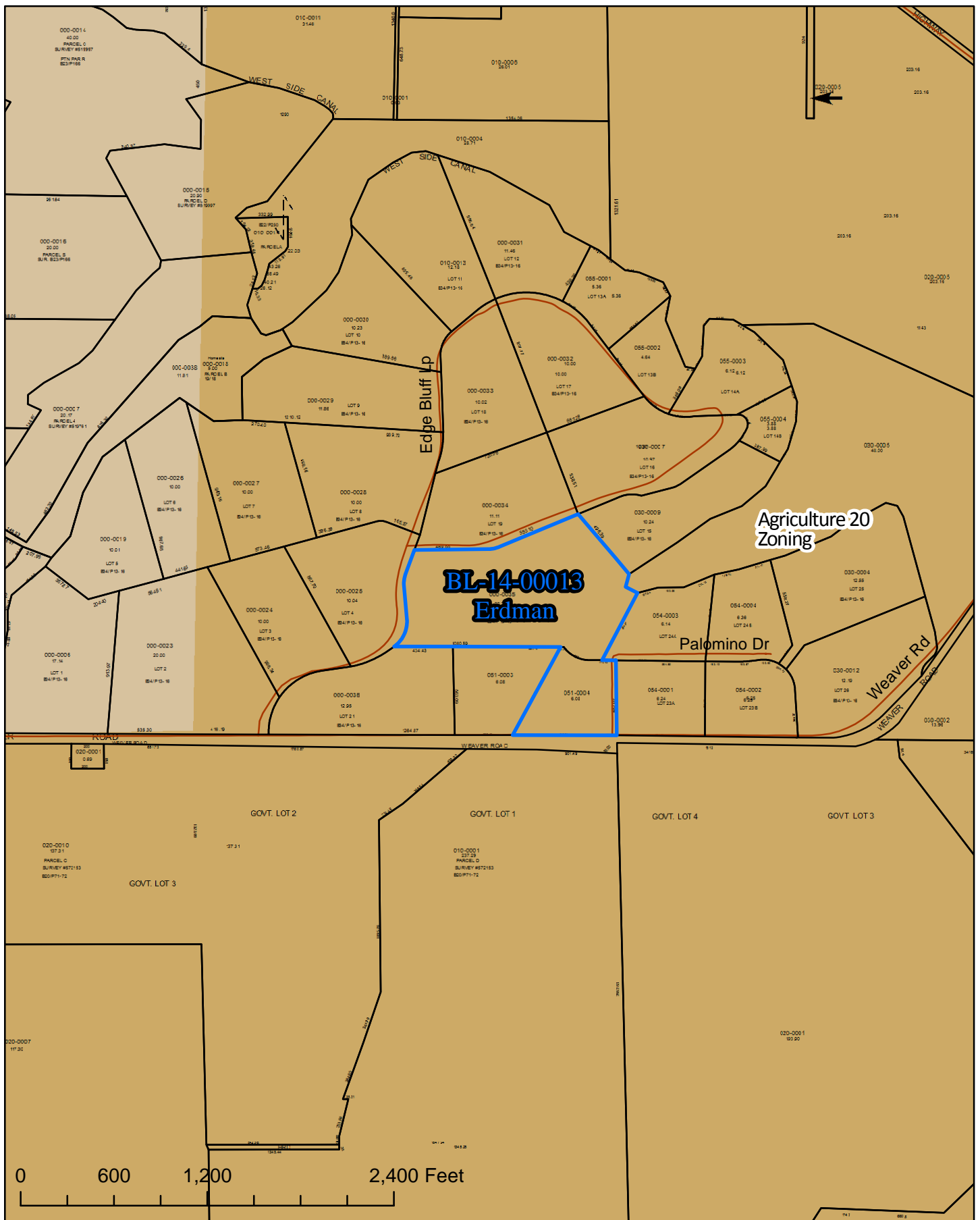
**BL-14-00013**  
**Erdman**

**Area**  
**Map**

8/5/2014

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Agriculture 20 Zoning

**BL-14-00013**  
**Erdman**

Palomino Dr

Weaver Rd

**BL-14-00013**  
**Erdman**

**Zoning**  
**Map**

8/5/2014

kaycee.hathaway



# Kittitas County COMPAS Map

EXISTING

RECEIVED  
JUL 18 2014  
KITITAS COUNTY  
CDS

000-0025

Fudge Road, LP

000-0036

Weaver Rd

Section 31  
Section 06

Weaver Rd

000-0035

22.29 AC

051-0003

DYK/ERDMAN  
SP 12-0001

051-0004

051-0004  
6.08 AC

Weaver Rd

Section 06  
Section 05

Section 31  
Section 32

054-0001

JOANNE  
SP 07-95

Palomino Dr

054-0003

Section 32  
Section 05

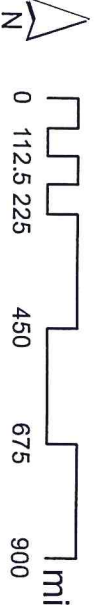
Weaver Rd

Date: 7/16/2014

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1 inch = 376 feet  
Relative Scale 1:4,514

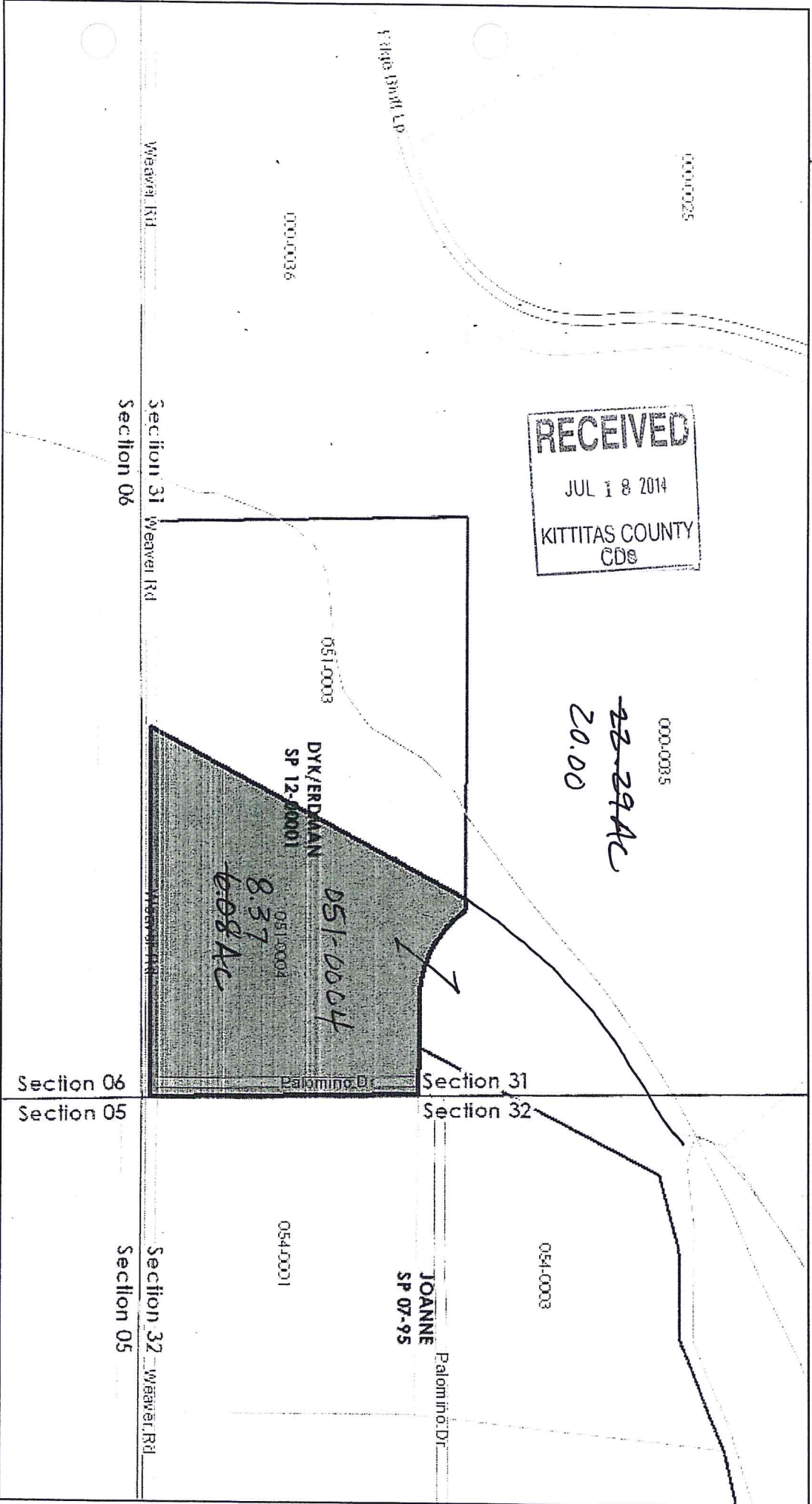


Kittitas County COMPAS Map

PROPOSED

RECEIVED  
JUL 18 2014  
KITITAS COUNTY  
CDS

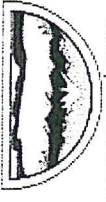
~~22.29~~ AC  
20.00



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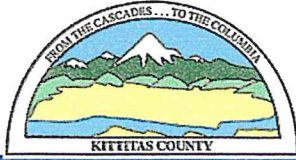
Date: 7/16/2014

1 inch = 376 feet  
Relative Scale 1:4,514



0 112.5 225 450 675 900 mi

BL-14-00013



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"

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 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: 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, well heads and septic drainfields.
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.
For preliminary approval, please submit a sketch containing the following elements.
1. Identify the boundary of the segregation:
a. The boundary lines and dimensions
b. Sub-Parcel identification (i.e. Parcels A, B, C or Lots 1, 2, 3, etc.)
2. 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.
3. Provide legal descriptions for each proposed tax parcel and identify by letter or number use on the map. Example: Parcel
4. 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.
For final approval (not required for initial application): Legal descriptions of the proposed lots, or a recorded survey.

APPLICATION FEES:

Table with 2 columns: Amount and Description. Rows include Kittitas County Community Development Services (KCCDS) \$225.00, Kittitas County Department of Public Works \$90.00, Kittitas County Fire Marshal \$65.00, Kittitas County Public Health Department Environmental Health \$215.00, and Total fees due for this application (One check made payable to KCCDS) \$595.00.

FOR STAFF USE ONLY

Application Received By (CDS Staff Signature):

[Handwritten signature]

DATE: 7/18/14

RECEIPT # 22015



**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: MT. SPRING EST. / ERDMAN  
 Mailing Address: 3171 WEAVER ROAD  
 City/State/ZIP: ELLENSBURG, WA 98926  
 Day Time Phone: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

**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: Chuck Cruse  
 Mailing Address: PO Box 959  
 City/State/ZIP: ELLENSBURG, WA 98926  
 Day Time Phone: 509-962-8242  
 Email Address: cruseandassoc@kvalley.com

**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: WEAVER ROAD  
 City/State/ZIP: ELLENSBURG, WA 98926

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

Parcel 20 BK 34-pg 13-16 and Lot 22B BK K pgs 249-251 in SE 1/4 31-18-18.

**6. Property size: 28.37 AC (acres)**

**7. Land Use Information: Zoning: AG 20 Comp Plan Land Use Designation: RURAL WORKING**



8. Existing and Proposed Lot Information

Original Parcel Number(s) & Acreage (1 parcel number per line)	New Acreage (Survey Vol. ____, Pg ____)
<u>18-18-31051-0004 6.08Ac</u>	<u>8.37</u>
<u>18-18-31000-0035 22.29Ac</u>	<u>20.00</u>
_____	_____
_____	_____

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:

Signature of Land Owner of Record

(REQUIRED if indicated on application)

(Required for application submittal):

Charles A. Cressy (date) 7-18-14

X Dale J. [Signature] (date) 7-18-14  
Timothy [Signature] 7-18-14

**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).

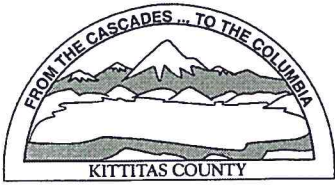
Deed Recording Vol. \_\_\_\_\_ Page \_\_\_\_\_ Date \_\_\_\_\_ \*\*Survey Required: Yes \_\_\_\_\_ No \_\_\_\_\_

Card #: \_\_\_\_\_ Parcel Creation Date: \_\_\_\_\_

Last Split Date: \_\_\_\_\_ Current Zoning District: \_\_\_\_\_

Preliminary Approval Date: \_\_\_\_\_ By: \_\_\_\_\_

Final Approval Date: \_\_\_\_\_ By: \_\_\_\_\_



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

**RECEIPT NO.: 00022015**

COMMUNITY DEVELOPMENT SERVICES  
(509) 962-7506

PUBLIC HEALTH DEPARTMENT  
(509) 962-7698

DEPARTMENT OF PUBLIC WORKS  
(509) 962-7523

**Account name:** 010588

**Date:** 7/18/2014

**Applicant:** TIMOTHY ERDMAN

**Type:** check # 4235

<u>Permit Number</u>	<u>Fee Description</u>	<u>Amount</u>
BL-14-00013	BOUNDARY LINE ADJUSTMENT MAJOR	225.00
BL-14-00013	BLA MAJOR FM FEE	65.00
BL-14-00013	PUBLIC WORKS BLA	90.00
BL-14-00013	ENVIRONMENTAL HEALTH BLA	215.00
	Total:	595.00