



KITTTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

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Office (509) 962-7506

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"Building Partnerships – Building Communities"

BL-17-00004

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, 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.

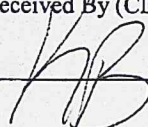
For final approval (not required for initial application submittal):

- Full year's taxes to be paid in full.
- Recorded Survey.

APPLICATION FEES:

\$730.00	Kittitas County Community Development Services (KCCDS)
\$90.00	Kittitas County Department of Public Works
\$145.00	Kittitas County Fire Marshal
\$215.00	Kittitas County Public Health Department Environmental Health
\$1,180.00	Total fees due for this application (One check made payable to KCCDS)

FOR STAFF USE ONLY

Application Received By (CDS Staff Signature): 	DATE: 2-15-17	RECEIPT # 32883	<div style="border: 1px solid black; padding: 5px;"> <p style="color: blue; font-weight: bold; margin: 0;">RECEIVED</p> <p style="color: red; font-size: 1.2em; font-weight: bold; margin: 0;">FEB 15 2017</p> <p style="color: blue; font-weight: bold; margin: 0;">Kittitas County CDS</p> <p style="font-size: 0.8em; margin: 0;">DATE STAMP IN BOX</p> </div>
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COMMUNITY PLANNING • BUILDING INSPECTION • PLAN REVIEW • ADMINISTRATION • PERMIT SERVICES • CODE ENFORCEMENT

FORM LAST REVISED: 12-30-15

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

TRACT A:

Name: NEW SUNCADIA, LLC, a Delaware limited liability company

Attention of: Cape Powers

Mailing Address: 770 Suncadia Trail

City/State/ZIP: Cle Elum WA 98922

Day Time Phone: 509-649-3906

Email Address: cpowers@suncadia.com

TRACT B:

Name: NEW SUNCADIA HOSPITALITY, LLC, a Delaware limited liability company

Attention of: Cape Powers

Mailing Address: 770 Suncadia Trail

City/State/ZIP: Cle Elum WA 98922

Day Time Phone: 509-649-3906

Email Address: cpowers@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: ESM Consulting Engineers LLC, Contact: Cynthia A. Flood, P.L.S.

Mailing Address: 33400 8TH Avenue South, Suite 205

City/State/ZIP: Federal Way, WA 98003

Day Time Phone: 253-838-6113

Email Address: cindy.flood@esmcivil.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: No address assigned. The property is located in the northeasterly quadrant of the intersection of Suncadia Trail and Swiftwater Drive.
City/State/ZIP: Cle Elum, WA 98922

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

Tract Z-2, plat of "Suncadia Phase 1 Division 3", Auditor's File No. 200505040001, being a portion of Sections 19 and 20, Township 20 North, Range 15 East, W.M., Kittitas County, State of Washington;

TOGETHER WITH Tract G-6, plat of "Suncadia Phase 1 Division 3", Auditor's File No. 200505040001, being a portion of Sections 19 and 20, Township 20 North, Range 15 East, W.M., Kittitas County, State of Washington.

6. Property size: 32.83 Acres

7. Land Use Information: Zoning: Master Planned Resort Comp Plan Land Use Designation

The Phase 1 Division 6 site is within the MPR site and is consistent with the September 2000 Conceptual Master Plan approved by Kittitas County and the Master Planned Resort development agreement that has been adopted by Kittitas County ordinance, and the Phase 1 General Site Plan as revised on February 16, 2005.

8. Existing and Proposed Lot Information

*

Original Parcel Number(s) & Acreage (1 parcel number per line)	New Acreage (Survey Vol. ____, Pg ____)
<u>Tract A (20-15-20058-0184) 16.60 Acres</u>	<u>16.81 Acres</u>
<u>Tract B (20-15-20058-0168) 16.23 Acres</u>	<u>16.02 Acres</u>

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)**

Cynthia A Flood

Date: 2017-02-10

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

Date: _____

**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: _____

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Signature of Land Owner of Record – TRACT A
(Required for application submittal):

Signature of Land Owner of Record – TRACT B
(Required for application submittal):

NEW SUNCADIA, LLC,
a Delaware limited liability company

NEW SUNCADIA HOSPITALITY, LLC
a Delaware limited liability company

By: Suncadia Operating Member, LLC
A Delaware limited liability company,
Its: Managing Member

By: New Suncadia, LLC,
A Delaware limited liability company,
Its: Sole Member

By: LDD Suncadia Manager, Inc.,
A Delaware corporation
Its: Manager

By: Suncadia Operating Member, LLC
A Delaware limited liability company
Its: Managing Member

By: 
Name: Gary A. Kittleson
Its: Vice President

By: LDD Suncadia Manager, Inc.,
A Delaware corporation
Its: Manager

Date: 2/14/17

By: 
Name: Gary A. Kittleson
Its: Vice President

Date: 2/14/17

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: _____

Boundary Line Adjustment for Suncadia Phase 1 Division 6

Suncadia Phase 1 Division 6 is currently known as Tract Z-2 of the plat of “Suncadia Phase 1 Division 3” containing 16.60 acres. The Prospector Golf Course borders the north side of the project, Suncadia Trail is on the south side, and Swiftwater Drive is on the west side.

Water and sewer service will be provided by the Master Planned Resort (MPR).

The primary access to the site will be provided off the existing Suncadia Trail and Swiftwater Drive roadways.

There is a desire to straighten the line between this tract and the adjoining golf tract (Tract G-6 of said plat) with the result being 0.21 acres being added to Tract Z-2.

This resulting 16.81 acre tract will be final platted as Suncadia Phase 1 Division 6. The Site Development Plan for this project will be submitted shortly. This plat will create 40 detached residential lots (primarily second or vacation homes), roadways and Community/Recreational open space.