



# KITTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

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

CDS@CO.KITTITAS.WA.US

Office (509) 962-7506

"Building Partnerships – Building Communities"

## 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.
- Draft Final Survey meeting all conditions of Conditional Preliminary Approval.

### APPLICATION FEES:

\$740.00	Kittitas County Community Development Services (KCCDS)
\$275.00	Kittitas County Department of Public Works
\$145.00	Kittitas County Fire Marshal
\$380.00	Kittitas County Public Health Department Environmental Health
<b>\$1,540.00</b>	<b>Total fees due for this application (One check made payable to KCCDS)</b>

### FOR STAFF USE ONLY

Application Received By (CDS Staff Signature): <div style="text-align: center; font-size: 2em; color: blue;">HB</div>	DATE: <div style="text-align: center; font-size: 1.5em; color: blue;">7-30-20</div>	RECEIPT # <div style="text-align: center; font-size: 1.5em; color: blue;">CD20-01960</div>	
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**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: Land Lloyd Development, Inc  
Mailing Address: P.O. Box 3889  
City/State/ZIP: Federal Way, WA 98063  
Day Time Phone: 253-606-8755  
Email Address: Tbargerdirtworks@gmail.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: Lanktree Land Surveying, Inc  
Mailing Address: 25514 74th Avenue S  
City/State/ZIP: Kent, WA 98032  
Day Time Phone: 253-653-6423  
Email Address: Tlanktree@lanktreeland.com

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

*If different than land owner or authorized agent.*

Name: Holly Chester  
Mailing Address: 25514 74th Avenue S  
City/State/ZIP: Kent, WA 98032  
Day Time Phone: 253-653-6423 x 102  
Email Address: Hchester@lanktreeland.com

**4. Street address of property:**

Address: \*Please see attached for lot details\*  
City/State/ZIP: \_\_\_\_\_

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

\*Please see attached for lot details\*  
\_\_\_\_\_

**6. Property size:** \_\_\_\_\_ **(acres)**

**7. Land Use Information:** Zoning: \_\_\_\_\_ Comp Plan Land Use Designation: \_\_\_\_\_

**8. Existing and Proposed Lot Information**

Original Parcel Number(s) & Acreage  
(1 parcel number per line)  
19-14-02053-0001 - 3.41 Acres  
19-14-02053-0002 - 3.04 Acres  
19-14-02053-0003 - 3.45 Acres  
19-14-02055-0001 - 3.25 Acres  
 \_\_\_\_\_  
 \_\_\_\_\_

New Acreage  
(Survey Vol. \_\_\_\_, Pg \_\_\_\_)  
Proposed Adjusted Lot 1: 5.40 Acres  
Proposed Adjusted Lot 2: 3.52 Acres  
Proposed Adjusted Lot 3: 4.51 Acres  
 \_\_\_\_\_  
 \_\_\_\_\_

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)

X [Signature] (date) 7/29/2020

X [Signature] (date) 6-30-2020

**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: \_\_\_\_\_

8. Existing and Proposed Lot Information

Original Parcel Number(s) & Acreage (1 parcel number per line)	New Acreage (Survey Vol. ____, Pg ____)
<u>19-14-02053-0001 - 3.41 Acres</u>	<u>Proposed Adjusted Lot 1: 5.40 Acres</u>
<u>19-14-02053-0002 - 3.04 Acres</u>	<u>Proposed Adjusted Lot 2: 3.52 Acres</u>
<u>19-14-02053-0003 - 3.45 Acres</u>	<u>Proposed Adjusted Lot 3: 4.51 Acres</u>
<u>19-14-02055-0001 - 3.25 Acres</u>	_____
_____	_____

APPLICANT IS: \_\_\_\_\_ OWNER \_\_\_\_\_ PURCHASER \_\_\_\_\_ LESSEE \_\_\_\_\_ OTHER

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Signature of Authorized Agent:

Signature of Land Owner of Record

(REQUIRED if indicated on application)

(Required for application submittal):

X  (date) 07/14/2020

X  (date) 7-8-20

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

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

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

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