RECEIVED

MAR 03 2014 KITTITAS COUNTY

CDS

March 3, 2014

I hereby request the BLA submitted 2/26/14 (BL-14-0007) be amended as reflected on the revised BLA forms dated 3/3/14.

Anthony Mynar

3/3/14

	OPT	IONAL	ATTA	CHM	ENT
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	parcels until after pr	OPTIONAL ATTACHMENTS f the current lot lines. (Please do not submit a new survey of the proposed adjusted or new eliminary approval has been issued.) 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:	MYNAR /THAYER						
	Mailing Address:	2500 RIVERBOTTOM ROAD						
	City/State/ZIP:	ELLENSBURG, WA 98926						
	Day Time Phone:							
	Email Address:							
2.	Name, mailing address If an authorized agen	ess and day phone of authorized agent, if different from landowner of record: t is indicated, then the authorized agent's signature is required for application submittal.						
	Agent Name:	CRUSE ÉASSOC.						
	Mailing Address:	P.O. Box 959						
	City/State/ZIP:	ELLENSBURG, WA 98926						
	Day Time Phone:	509-962-8242						
	Email Address:	cruseandassoc @Kvalley.com						
3.	Name, mailing addre If different than land o	ss and day phone of other contact person wner or authorized agent.						
	Name:							
	Mailing Address:							
	City/State/ZIP:							
	Day Time Phone:							
	Email Address:							
4.	Street address of prop	erty:						
	Address:	RIVERBOTTOM ROAD						
	City/State/ZIP:	ELLENSBURG, WA 98926						
5.	Legal description of pr	operty (attach additional sheets as necessary): YH and portion of EY2 SEY4 all -17-18.						
6.	Property size: /02	(acres)						
7.	Land Use Information:	Zoning: AG 20 Comp Plan Land Use Designation: RURAL WORKING						

6.

7.

3/3/14

8.	Existing and Proposed Lot Information	ı					
	Original Parcel Number(s) & Acreage (1 parcel number per line)		New Acreage (Survey Vol, Pg)				
	17-18-14030-0001 2	9.16	25.8				
	17-18-14030-0013		33.13				
	17-18-14040-0006	108.9	43.1	southern television of the control o			
							
	APPLICANT IS:OWNER	PURCHASEF	LESSEE	OTHER			
	A 1:4: :- L l J - G :-	AUTHORIZ		andification familia			
9.	Application is hereby made for permit with the information contained in th						
	information is true, complete, and ac proposed activities. I hereby grant to						
	above-described location to inspect the			ie, the right to enter the			
NOTIC	CE: Kittitas County does not guaran	tee a buildable	e site. legal access, available wa	ter or septic areas, for			
	receiving approval for a Boundary Li			•			
	correspondence and notices will be tra	nsmitted to the	Land Owner of Record and copi	es sent to the authorized			
age	ent or contact person, as applicable.						
Signatu	re of Authorized Agent:		Signature of Land Owner of Re	cord			
(REQU	TRED if indicated on application)	(Required for application submit	tal):			
Lu	half Musse (A (date)	3-3-14	Kyli thays	(date) 3-3-/4			
10 CVA	(Course of Manne)	<u> </u>	Much	3-3-/4			
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	us: By:			Date:			
()			T SERVICES REVIEW				
	This BLA meets the requirements of Ki	-		N-			
	Deed Recording Vol Page						
	d #:		arcel Creation Date:				
	Split Date:		urrent Zoning District:				
	iminary Approval Date:		By:				



