

## KITTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

411 N. Ruby St., Suite 2, Ellensburg, WA 98926 CDS@CO.KITTITAS.WA.US Office (509) 962-7506 Fax (509) 962-7682

"Building Partnerships - Building Communities"

# ZONING CONDITIONAL USE PERMIT APPLICATION

UU-10-00006

(Proposing a use such as a Bed & Breakfast or Campground)

KITTITAS COUNTY ENCOURAGES THE USE OF PRE-APPLICATION MEETINGS. PLEASE CONTACT COMMUNITY DEVELOPMENT SERVICES TO SET UP A PRE-APPLICATION MEETING TO DISCUSS A PROPOSED PROJECT.

PLEASE TYPE OR PRINT CLEARLY IN INK. ATTACH ADDITIONAL SHEETS AS NECESSARY. PURSUANT TO KCC 15A.03.030, 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

- ADDRESS LIST OF ALL LANDOWNERS WITHIN 500 FEET OF THE SUBJECT PARCEL(S). IF ADJOINING PARCELS ARE OWNED BY THE APPLICANT, THEN THE 500 FOOT AREA SHALL EXTEND FROM THE FARTHEST PARCEL. IF THE PARCEL IS WITHIN A SUBDIVISION WITH A HOMEOWNERS' OR ROAD ASSOCIATION, PLEASE INCLUDE THE MAILING ADDRESS OF THE ASSOCIATION.
- SITE PLAN OF THE PROPERTY WITH ALL PROPOSED BUILDINGS POINTS OF ACCESS, ROADS, PARKING AREAS, SEPTIC TANK, DRAINFIELD, DRAINFIELD REPLACEMENT AREA, AREAS TO BE CUT AND/OR FILLED, NATURAL FEATURES SUCH AS CONTOURS, STREAMS, GULLIES, CLIFFS, ETC.
  - □ SEPA CHECKLIST (UNLESS EXEMPT) Not applicable

#### **APPLICATION FEE:**

\$2,030.00 (\$1,560 fee + \$470 SEPA) for Community Development Services
\$130.00 for Fire Marshal

(One check made payable to KCCDS)

\*\*\*Accessory Dwelling Units and Special Care Dwellings are exempt from SEPA\*\*\*

#### FOR STAFF USE ONLY

APPLICATION RECEIVED BY: (CDS STAFF SIGNATURE)	DATE: 06-28-10	RECEIPT #	RECEIVED DAME STAND	
NOTES:			CDS	0

Landowner(s) signature(s	s) required on application form.	
Name:	Howard & Laurie Knott	
Mailing Address:	PO Box 706	
City/State/ZIP:	Easton, WA 98925	
Day Time Phone:	509-656-9951	
Email Address:	knotthole1@msn.com	
Name, mailing address a If an authorized agent is for application submittal.	and day phone of authorized agent, if different from land ov indicated, then the authorized agent's signature is required	vner of record:
Agent Name:		
Mailing Address:		
City/State/ZIP:		
Day Time Phone:		
Email Address:		
Street address of proper	ty:	
Address:	4540 Lake Ridge Road	
City/State/ZIP:	Easton, WA 98925	
Legal description of pro Parcel A-3 of Surve	perty: y 562242 B 19/125 in Sec.3, T.20N., R.13E	
Tax parcel number: 20	-13-03030- <del>005</del> and 20-13-03030- <del>003</del>	
Property size: 27.5		(acres)
location, water supply, se	<b>Aption:</b> Please include the following information in your descrewage disposal and all qualitative features of the proposal; in (be specific, attach additional sheets as necessary):	ription: describe project sinclude every element of

2 of 3

See attached

## 7. Narrative project description

We would like to rent out three rooms in our existing home as a B&B/guesthouse. We are situated on a hill just SW of Lake Easton at 4540 Lake Ridge Road, Easton, WA and this is our primary residence.

Our home is approximately 6000 sq. feet including these three rooms. The three rooms, situated above the garage, are approximately 350 sq. ft. each and are self-contained with private bathrooms and a wet-bar area (sink & microwave). Each room will service two adults. This will be a part-time endeavor for us and we have no desire to rent rooms more frequently than approximately 20 nights per year. The rooms have received frequent use over the past 5 years by our very large families and it is our desire to see some revenue from them.

Breakfast will be provided by our home's main kitchen, once we obtain a food handler's permit. We will service the laundry in our current laundry facilities. We have an existing back-up generator, which provides complete power to these three rooms. The entire house has both electricity and propane.

The current septic system was permitted and built to accommodate eight bedrooms – we have five bedrooms total with only two full time residents, so we are well equipped to handle sewage. We have already been approved for a Class B on our single service private well, so water is also not a problem. We also had a preliminary walk-thru by the Kittitas County Fire Marshall and have made the minor changes suggested by her.

This will be a year round facility providing seasonal recreation such as cross-country skiing and hiking. There is plenty of parking to accommodate the small number of guests expected and access will be via our existing road. The road is maintained throughout the year.

- 8. Provision of the zoning code applicable: 17.56.030R Bed & Breakfast or Guest Ranch
- 9. A conditional use permit may be granted when the following criteria are met. Please describe <u>in detail</u> how each criteria is met for this particular project (attach additional sheets as necessary):
  - **A.** The proposed use is essential or desirable to the public convenience and not detrimental or injurious to the public health, peace, or safety or to the character of the surrounding neighborhood.

#### See attached

B. The proposed use at the proposed location will not be unreasonably detrimental to the economic welfare of the county and that it will not create excessive public cost for facilities and services by finding that (1) it will be adequately serviced by existing facilities such as highways, roads, police and fire protection, irrigation and drainage structures, refuse disposal, water and sewers, and schools; or (2) that the applicant shall provide such facilities; or (3) demonstrate that the proposed use will be of sufficient economic benefit to offset additional public costs or economic detriment.

#### See attached

10. 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.

All correspondence and notices will be mailed to the Land Owner of Record and copies sent to the authorized agent.

Signature of Authorized Agent: (REQUIRED if indicated on application)	Date:	
X		
Signature of Land Owner of Record (REOUIRED for application submittal):	Date:	
x Howard J. Knut	6-25-10	

### 9. A.

We are committed to providing a relaxing, quiet, safe, and environmentally conscious environment to our patrons. We believe this project will provide to the public a much-needed overnight facility for outdoor enthusiasts between Easton and Snoqualmie Pass. Within a 1.5 mile radius, there is only one other residence occupied full-time, and one residence part time. Both neighbors are supportive of our plan and have complete trust that we would not allow any detrimental change to our environment/neighborhood.

## 9. B.

There would be absolutely no detriment to the county with our proposed project. Existing services (i.e. highways, roads, police & fire protection, irrigation and drainage) are all adequate, especially given our very small number of guests and days used. We believe this endeavor could bring much needed revenue to the local community of Easton, while allowing us the opportunity to realize the dream we've had for many years of owning a Bed & Breakfast.

# All Landowners Within 500 feet of Subject Parcel

West side of property line:

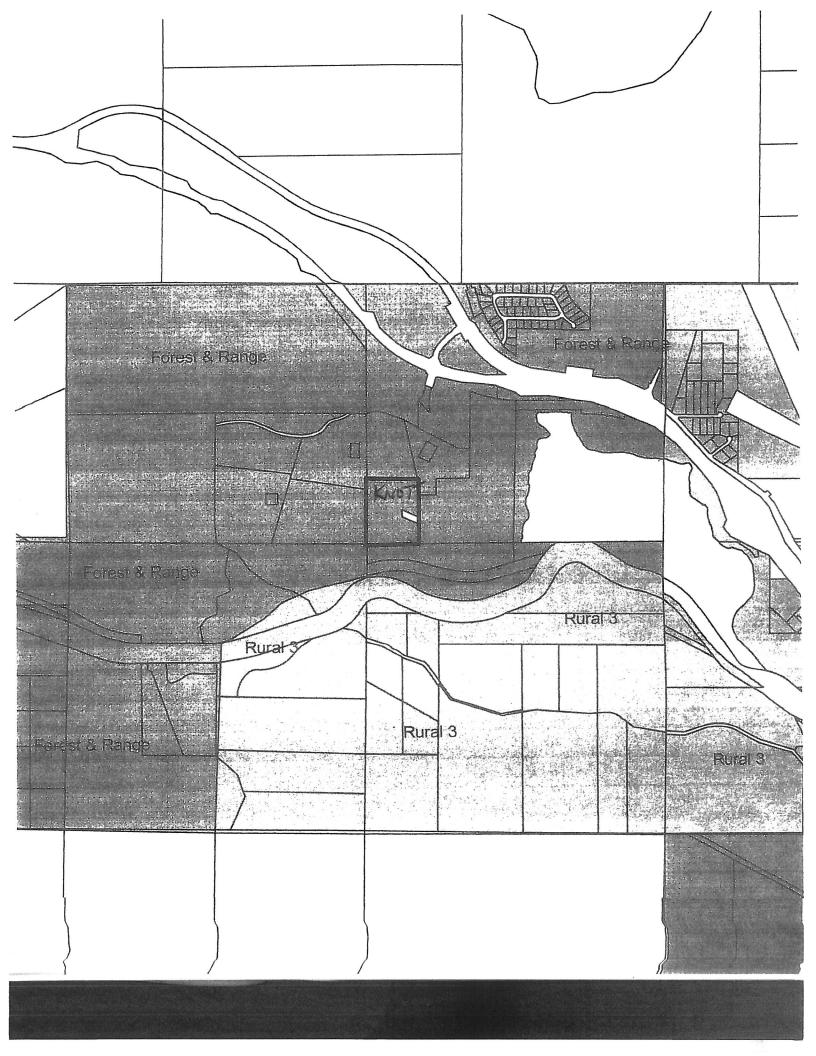
April & Patrick Dehuff PO Box 529 Easton, WA 98925 509-656-0328 (full-time residents)

North side of property line:

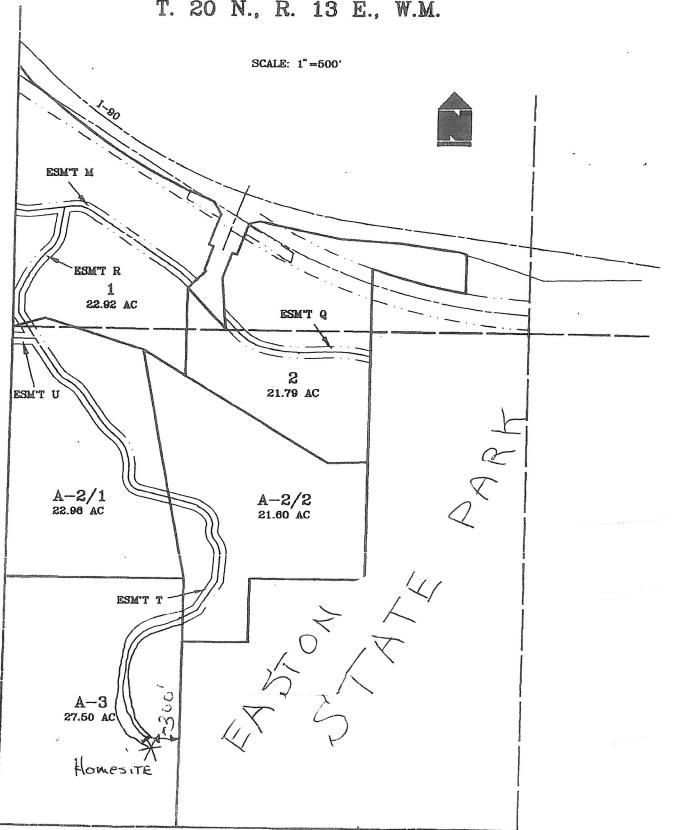
Jill and Brad Jackson 1216 – 9<sup>th</sup> Ave. W. Seattle, WA 98119 206-321-2599 (part-time residents)

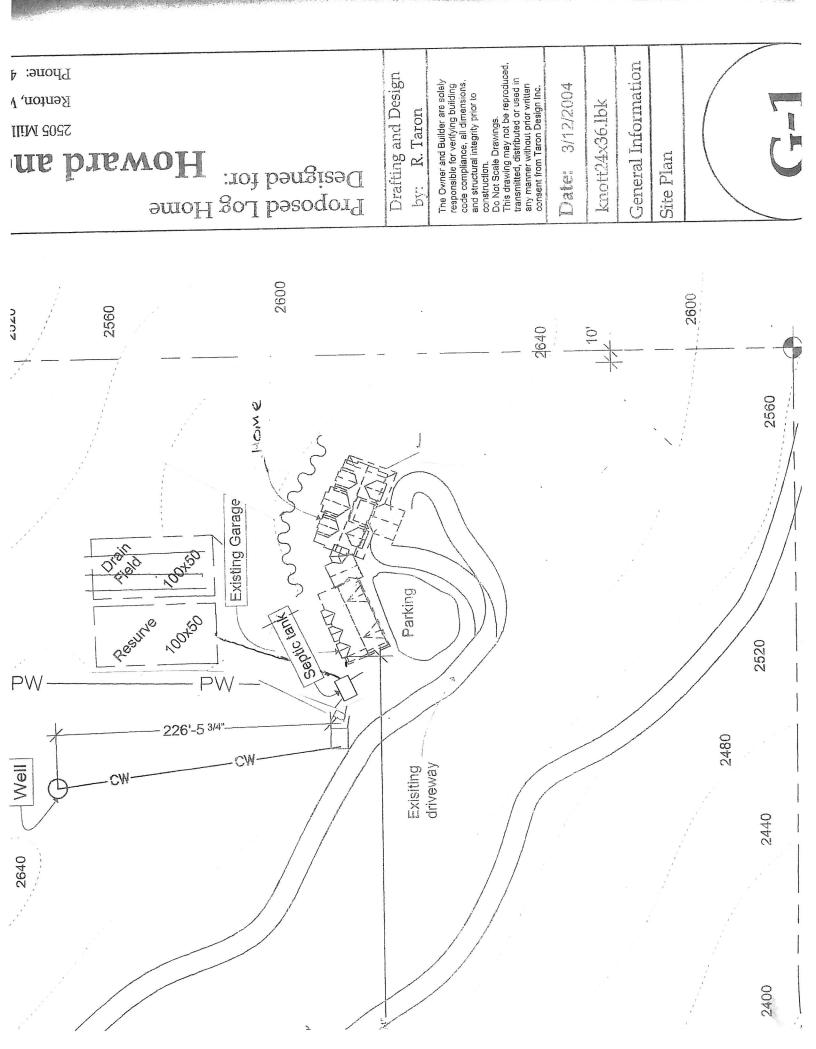
East and South side of property line:

Lake Easton State Park 150 Lake Easton State Park Road Easton, WA 98925 888-226-7688



EASTON TERRACE
Part of the W 1/2 of Section 3,
T. 20 N., R. 13 E., W.M.







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

**RECEIPT NO.:** 

00008290

COMMUNITY DEVELOPMENT SERVICES

(509) 962-7506

PUBLIC HEALTH DEPARTMENT (509) 962-7698

DEPARTMENT OF PUBLIC WORKS

(509) 962-7523

Account name:

022447

Date: 7/13/2010

Applicant:

KNOTT, HOWARD J ETUX

Type:

check

# 1146

Permit Number	Fee Description		Amount
CU-10-00006	CUP FEE CDS		1,560.00
CU-10-00006	CUP FIRE MARSHAL FEE		130.00
		Total:	1,690.00