

**Letter of Transmittal**  
May 18, 2015



Construction Review Services  
111 Israel Rd. SE  
Tumwater, WA 98501

PO Box 47852  
Olympia, Washington 98504-7852

www.doh.wa.gov/crs  
tel. 360-236-2944  
fax. 360-236-2321



**Project Info:**

CRS# 60526427  
Burbank Creek Housing  
Chapter 246-359 WAC Temp. Worker Housing  
Install Four Additional 12 Person FAS Units

Project location: 1121 Burbank Creek Rd  
Yakima, WA 98901

Local Permit #:

**Key People:**

Assigned DOH Reviewer: Stan Iwagoshi, CBI, RS  
stan.iwagoshi@doh.wa.gov

Facility Administrator: Burbank Creek Housing  
David Jacques  
PO Box 70  
Selah, WA 98942-0070  
(509) 969-2576 x.  
djacques@sagefruit.com

Facility Contact: Burbank Creek Housing  
John Cornell  
PO Box 70  
Selah, WA 98942-0070  
(509) 697-7208 x.  
jcornell@sagefruit.com

Architect / Engineer: N/A

Local AHJ: Kittitas County Community Development  
Kirk Holmes, Building Official  
411 N. Ruby St., Ste. 2  
Ellensburg, WA 98926  
(509) 962-7506 x.  
cds@co.kittitas.wa.us

x.

Consultant: N/A

Consultant: N/A

x.

x.

Contact: Kittitas County Health  
Onsite Sewage Specialist  
507 N. Nanum St., Ste. 102  
Ellensburg, WA 98926  
(509) 933-8262 x.  
environmentalhealth@co.kittitas.wa.us

Contact: N/A  
  
x.

**Copies To:**

- Local AHJ: Kittitas County Community Development
- Architect / Engineer: N/A
- Consultant: N/A
- Consultant: N/A
- Contact: Kittitas County Health
- Contact: N/A
- CRS File

- DOH Child Birth Center Licensing
- DOH Office of Accommodations & Res. Care Survey
- DOH Office of Investigations & Inspections
- DSHS, , Div. Of Alcohol & Substance Abuse
- DSHS, , Aging & Adult Services Admin.
- L&I, Bill Eckroth, Electrical Section
- L&I, John Harvey, Factory Assembled Structures

## Facility Data Certificate:

<b>Facility Name:</b> Burbank Creek Housing	<b>Licensee UBI#:</b> 601134847
<b>Site Address:</b> 1121 Burbank Creek Rd Yakima, WA 98901	<b>Critical Access Facility:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Estimated Date of Occupancy:</b>	

<b>ALL FACILITY TYPES</b>	Occupancy Group:	Construction Type:	Applicable Code:		
	Number of Beds:	Current:	Added:	Removed:	Total:
	Automatic Fire Sprinkler System:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type		
	Automatic Fire Alarm System:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	Compartmentation req'd:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Smoke Control System Provided:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Special Delayed Egress Control:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Location:		
Certificate of Need Required:	<input type="checkbox"/> Yes <input type="checkbox"/> No	CON Approval Granted:	<input type="checkbox"/> Yes <input type="checkbox"/> No	CON Number :	

<b>RESIDENTIAL CARE FACILITIES ONLY</b>	Number of units:	Private occupancy:	Two person occupancy:
	Based on size of rooms used for sleeping	Residents	
	Based on size of common rooms	Residents	
	Maximum allowable licensable beds: _____		
	Qualifies for Assisted Living Funding Program	<input type="checkbox"/> Yes <input type="checkbox"/> No	Number of qualifying units:

<b>NOTES</b>	<p>Installation of last 2 pre-approved Valley Manufactured Home FAS model 5227, 3-bedroom, 12 person units. Completion of initial project #60465860, for the installation of 4 Valley Manufactured Home FAS model #5227, where only two units were installed.</p>
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**The data above is based on the information presented to CRS. Any change in the facility or facility program that causes the above information to be incorrect is subject to review by CRS. Approval for construction is not approval for licensure. A copy of the facility data certificate will be sent to the licensing agency.**

**Project Status:**

**- Permit Issued/ Plan Review Complete -**

The construction documents for your project have been reviewed per Chapter 246-359 WAC Temporary Worker Housing Construction Standard and found acceptable. The stamped approved copy of the documents shall be kept available for the licensing staff on site.

**For Permitting**, please note the following:

- **The Department of Health, Construction Review Services (CRS), is responsible for building construction permitting and occupancy. Prior to starting construction, please submit the appropriate Construction Permit Fee to CRS within one (1) year of the Plan Approval date. Upon receipt of the required Construction Permit Fee, CRS will issue a Construction Permit.**
- **Once the permit is issued, the applicant is responsible for contacting CRS to schedule inspections at least 48 hours prior to the requested inspection date. (For example, if you want to pour a concrete foundation on Saturday, you will need your footings and foundation forms approved by Friday. Therefore, you will need to call by Wednesday to arrange for the inspection.)**
- **Temporary Worker Housing Construction Standard regulations do not allow occupancy of the completed project area until the construction documents have been accepted and a certificate of occupancy has been issued by the Department of Health.**

Upon completion of all of the above, we will close your project file and notify the Migrant Farmworker Housing program that you have completed the review process.

If you have any questions please feel free to contact Construction Review Services at (360) 236-2944.

Please take a few moments and fill out our online survey at [www.doh.wa.gov/crs](http://www.doh.wa.gov/crs).



- 2        **On 1/06/15 DOH/CRS – TWH Construction Plan Reviewer received and approved plans for the installation of 2 Valley Manufactured Home, Model 5227, 3-bedroom, 12- person FAS units, which are the exact same units as installed for CRS project #60465860. Building Permit can be issued. sai**
  
- 3               **Note: On 1/27/15 DOH/CRS – TWH Construction Plans Reviewer and Field Inspector conducted the site inspection for the installation of the last 2 pre-approved Valley Manufactured Home FAS model 5227, 3-bedroom, 12 person units. Completion of initial project #60465860, for the installation of 4 Valley Manufactured Home FAS model #5227, where only two units were installed. sai**
  
- 4               **Note: On 2/23/15 DOH/CRS – TWH Construction Field Inspector conducted the FAS runner inspections for the installation of the last 2 pre-approved Valley Manufactured Home FAS model 5227, 3-bedroom, 12 person units. No comments noted. Project remains as TWH BP. sai**
  
- 5               **Note: On 3/09/15 DOH/CRS – TWH Construction Specialist conducted a project status stop for the installation of the last 2 pre-approved Valley Manufactured Home FAS model 5227, 3-bedroom, 12 person units. No new activity noted since last inspection of 2/23/15. No comments noted. Project remains as TWH BP. sai**
  
- 6               **Note: On 4/22/15 DOH/CRS – TWH Construction Field Inspector conducted the FAS setting inspection for the installation of last 2 pre-approved Valley Manufactured Home FAS model 5227, 3-bedroom, 12 person units. Completion of initial project #60465860, for the installation of 4 Valley Manufactured Home FAS model #5227, where only two units were installed. L&I 150 tags #155859 A&B/ 155860 A&B. Also, electrical ditch cover and service was approved 4/22/15. No new comments identified. Project remains TWH BP. sai**

*Compliance with the comments above provided by the Department of Health, Construction Review Services, are necessary for this facility to meet the requirements of the applicable licensing regulations found in the Washington State Administrative Code and associated references. These comments do not relieve the facility from the responsibility to meet the requirements of any other applicable federal, state or local regulations. In the event of conflicts between other jurisdictions and these written comments, the most stringent shall apply.*

## Lindsey Ozbolt

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**From:** Rose Shriner  
**Sent:** Tuesday, April 28, 2015 7:49 AM  
**To:** Lindsey Ozbolt; Doc Hansen; Kaycee Hathaway; Jeff Watson  
**Cc:** Steph Mifflin; Emily Miltko  
**Subject:** FW: CRTW.FS.60526427 Burbank Creek Housing, Install Four Additional 12 Person FAS Units  
**Attachments:** 60526427.docx

Rose Shriner | Permit Technician  
Kittitas County Community Development Services  
411 N Ruby St Ste.2 | Ellensburg, WA 98926  
(p) 509.962.7506 | (f) 509.962.7682  
[rose.shriner@co.kittitas.wa.us](mailto:rose.shriner@co.kittitas.wa.us)

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**From:** Zepp, Jane M (DOH) [mailto:Jane.Zepp@DOH.WA.GOV]  
**Sent:** Monday, April 27, 2015 3:52 PM  
**To:** [djacques@sagefruit.com](mailto:djacques@sagefruit.com)  
**Cc:** [jcornell@sagefruit.com](mailto:jcornell@sagefruit.com); CDS User; environmental health; DOH HSQA Facilities Credentialing; Fisher, Debra (DOH); Kuykendall, Jon (DOH)  
**Subject:** CRTW.FS.60526427 Burbank Creek Housing, Install Four Additional 12 Person FAS Units

Updated comments from the recent site inspection are attached.

Please contact Construction Review Services (CRS) at (360) 236-2944 if you have any questions regarding this letter. Thank you for letting CRS be of service to you!

*Jane Zepp*

Permit Technician  
Washington State Department of Health  
Construction Review Services  
111 Israel Rd SE  
PO Box 47852  
Tumwater, WA 98501  
Phone: 360.236.2944  
[jane.zepp@doh.wa.gov](mailto:jane.zepp@doh.wa.gov)

Please complete our CRS Customer Satisfaction Survey by [clicking here!](#) Your feedback is appreciated!

*Public Health Always Working for a Safer and Healthier Washington.*

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Notice: All email sent to this address will be received by the Kittitas County email system and may be subject to public disclosure under Chapter 42.56 RCW and to archiving and review.

message id: 38eb45916c6dcbdac24bb8719d004a14