Lindsey Ozbolt

From:

Rose Shriner

Sent:

Tuesday, March 03, 2015 8:09 AM

To:

Lindsey Ozbolt

Cc:

Doc Hansen; Jeff Watson; Kaycee Hathaway

Subject:

FW: Comments for 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

From: LaChance, Marlei (DOH) [mailto:Marlei.LaChance@doh.wa.gov]

Sent: Monday, March 02, 2015 5:09 PM

To: djacques@sagefruit.com

Cc: jcornell@sagefruit.com; CDS User; joe.gilbert@co.kittitas.wa.us; DOH HSQA Facilities Credentialing; Fisher, Debra

(DOH); Kuykendall, Jon (DOH)

Subject: Comments for 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!

Marlei'

Marlei' Brenna LaChance Permit Tech Supervisor Construction Project Coordinator Construction Review Services (360) 236-2944 (360) 236-2321 fax

Please complete our CRS Customer Satisfaction Survey by clicking here! Your feedback is appreciated!

Public Health - Always working for a safer and healthier Washington

This message may be confidential. If you received it by mistake, please notify the sender and delete the message. All messages to and from the Department of Health may be disclosed to the public.

Letter of Transmittal

March 16, 2015



			Construction Review Service 111 Israel Rd. Sl Tumwater, WA 9850		
			PO Box 47852 Olympia, Washington 98504-7852		
			www.doh.wa.gov/crs tel. 360-236-2944 fax. 360-236-2321		
Project Info:					
CRS# 60526427		Project	1121 Burbank Creek Rd		
Burbank Creek Housing		location:	Yakima, WA 98901		
Chapter 246-359 WAC Temp. Worker Housing		rodution.	1 akiiila, WA 90901		
Instal	l Four Additional 12 Person FAS Units	Local Permit #:			
Key People:		Local I cillit #.			
Assigned DOH	Stan Iwagoshi, CBI, RS				
Reviewer:	stan.iwagoshi@doh.wa.gov				
Facility	Burbank Creek Housing	Facility Contact:	Burbank Creek Housing		
Administrator:	David Jacques		John Cornell		
	PO Box 70		PO Box 70		
	Selah, WA 98942-0070 (509) 969-2576 x.		Selah, WA 98942-0070		
	djacques@sagefruit.com		(509) 697-7208 x.		
Architect /	N/A	7 1 1 1 7 7 7	jcornell@sagefruit.com		
Engineer:	X.	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		
Consultant:	N/A	Consultant:	N/A		
	х.		х.		
Contact:	Vittitas County III III				
comact.	Kittitas County Health Joe Gilbert, Onsite Sewage Specialist 507 N. Nanum St., Ste. 102 Ellensburg, WA 98926 (509) 933-8262 x.	Contact:	N/A		
	joe.gilbert@co.kittitas.wa.us		Х.		
Copies To:					
	Cittitas County Community Development	DOH Child Birth	Center Licensing		
☐ Architect / Eng☐ Consultant: N		DOH Office of Accommodations & Res. Care Survey			
Consultant: N Consultant: N		DOH Office of It	nvestigations & Inspections iv. Of Alcohol & Substance Abuse		
	tas County Health	☐ DSHS, , A	ging & Adult Services Admin.		
Contact: N/A		L&I, Bill Eckroth	n, Electrical Section		
CRS File		☐ L&I, John Harve	y, Factory Assembled Structures		

	F	acility 1	Data Certific	eate:				
Facility Name:		ty Name:	Burbank Creek Housing			Licensee UBI#:	601134847	
Site Address:		ddress:	1121 Burbank C Yakima, WA 98			Critical Access Facility:		☐ Yes ⊠ No
Est	im	ated Date o	of Occupancy:					
S		ccupancy oup:		Construction Type:			Applicable Code:	
TYPES	Number of Current: Added: Beds:		Removed: Total:					
I'Y T	Au	tomatic Fir	e Sprinkler System	: Yes	☐ No	Type		
55	_		e Alarm System:	Yes	☐ No			
				Control System Provided:	Yes No			
V	Special Delayed Egress Control:			Yes	□No	Location	:	
	Ce	rtificate of	Need Required:	Yes	□No	CON Ap	proval Granted: imber :	Yes No
RESIDENTIAL CARE		Number o	f units:	Private o	occupancy:		Two person occup	oancy.
	Based on size of rooms used for sleeping Based on size of common rooms Maximum allowable licensable beds: Qualifies for Assisted Living Funding Program				esidents	, 1		
AL C	Based on size of common rooms Residents							
NTI	Maximum allowable licensable beds:							
SIDE		Qualifies for Assisted Living Funding Program Yes No Number of qualifying units:						
RES	FA							
	net	alletion of	logt 2 mms annual	V II . V				
- 1	JUL	ubienou of	last 2 pre-approved initial project #604 o units were installe	65860, for the	ectured Hon installation	ne FAS mo	odel 5227, 3-bedroom, 12 y Manufactured Home F	2 person units. AS model #5227,
causi	es i	ne above n	mormation to be i	ncorrect is sub	ject to revi	ew by CF	ange in the facility or fa	ncility program that uction is not

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.

Plan Review Comments:

Comment ID #
Approved
Not Approved

1 ×

Copies of the following permits issued by the local AHJ must be received before Authorization to Begin Construction can be issued:

Septic System Installation

Permit# 2014-11812; 11813; and 11808

Issued by: Kittitas County Health Department

Issued on:

System Approved on: 7/23/14

Electrical Work

Permit # 2375994E

Issued by: WA L&I, Electrical Work Permit Section

Issued on:

Work Approved on: 7/14/14

Water System

System ID #: AD176

Application submitted to: WA DOH, Office of Drinking Water, East Region Office

Application submitted on:

System Approved on: 6/10/14

Site Plan Submitted for Height & Set-back

Accepted by: Kittitas County Community Development

Accepted on: KC Conditional Use Permit #CU 13-00007 6/03/14

Site Plan Reviewed for Road Access

Accepted by:

Accepted on: 6/03/14

- 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
- 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
- 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

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.