

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

LARGE LOT APPLICATION

LL-08,000

("Large lot subdivision" means any subdivision of land into two or more lots or parcels the smallest of which is twenty (20) acres or greater.)

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

ADDITO ATIONI PEEC.				
V	Computer lot closures			
	Certificate of Title (Title Report)			
	OPTIONAL ATTACHMENTS (Optional at preliminary submittal, but required at the time of final submittal)			
	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, then please include the mailing address of the association.			
V	Five large copies of short plat with all preliminary drawing requirements complete (reference KCC Title 16 Subdivision Code for plat drawing requirements) and one small 8.5"x11"copy.			

APPLICATION FEES:

\$190 plus \$10 per lot for Public Works Department; \$380 plus \$75 per hour over 4 hrs. for Environmental Health Department; \$450 for Community Development Services (One check made payable to KCCDS)

	FOR STAFF USE	ONLY	RECEIVED
APPLICATION RECEIVED BY (CDS STAFF SIGNATURE) X NOTES:	DATE: 4.4.08	rесеірт # 	APROLA 2008 DA KILITAS COUNTY CDS

1.	Name, mailing address and day phone of land owner(s) of record: Landowner(s) signature(s) required on application form.				
	Name:	CABIN MOUNTAIN LLC			
	Mailing Address:	5814 FRANCES AVE NE			
	City/State/ZIP:	TACOMA WA 98422			
	Day Time Phone:	(509) 656-2460 VIC MONA	HAN (HOME)		
	Email Address:	(509) 674-9006 VIC MONAI	HAN (CELL)		
2.	Name, mailing address and day phone of authorized agent (if different from land owner of record): If an authorized agent is indicated, then the authorized agent's signature is required for application submittal.				
	Agent Name:				
	Mailing Address:				
	City/State/ZIP:				
	Day Time Phone:				
	Email Address:				
3.	Street address of property:				
	Address:	NO SITUS PER ASSESSOR	'S RECORDS		
	City/State/ZIP:				
4.	Legal description of property:				
	AUDITOR'S NUMB	ER 200802260022. A PORTION OF T	ECORDED UNDER KITTITAS COUNTY THE NORTH HALF OF SECTION 14, AS COUNTY, STATE OF WASHINGTON.		
5.	Tax parcel number(s)	e: <u>20-13-14020-0003 (17874)</u>			
6.	Property size: 164.4	45	(acres)		
7.	Narrative project description: Please include 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 (be specific, attach additional sheets as necessary):				
	LARGE LOT SUBE WATER: INDIVIDL SEWER: SEPTIC/I ZONE: FOREST A	DRAINFIELDS	NSISTING OF 20+ ACRES.		
8.	Are Forest Service roads/easements involved with accessing your development? Yes V6 (Circle) If yes, explain:				

What County maintained road(s) will the development be accessing from? 9. CABIN CREEK ROAD Application is hereby made for permit(s) to authorize the activities described herein. I certify that I am familiar with 10. 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. Date: Signature of Authorized Agent: REQUIRED if indicated on application Signature of Land Owner of Record: Date: (Required for application submittal)

