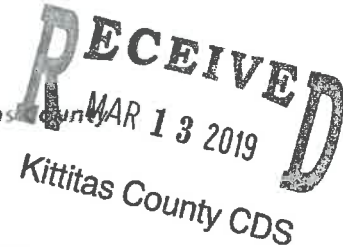




DE-19-00019



To Protect and Promote the Health and the Environment of the People of Kittitas County

### Application for Site Evaluation

**REQUESTED BY:**

Property Owners Name: JAMES K. SCHULER & CLE ELUM PINES WEST LLC

Site Address: RANCH ROAD

City: CLE ELUM Zip: \_\_\_\_\_

Telephone: ( ) Cell: ( 509 ) 304-9060

Requested By: PATRICK DENEEN

Mailing Address: BOX 808

City: CLE ELUM Zip: 98922

Designers Name: MARK NELSON Cell: ( 509 ) 304-9060

Signature of owner or agent: [Signature]

Designer E-mail: mark@evergreenvalleyutilities.com

**SEE ATTACHED MAP FOR FOUR COMMUNITY DRAIN FIELDS**

**SITE:** 17012

Map Parcel Number 20-17-20052-0002 Lot #: 2

Subdivision: \_\_\_\_\_ Gate Code: \_\_\_\_\_ Acreage Size: \_\_\_\_\_

Directions to site: 97 TO BURKE ROAD TO RANCH ROAD

Parcel Map must be attached

**WILL SCHEDULE WITH HEALTH DEPARTMENT**

Test holes are dug  Will call when holes are dug

**STRUCTURE (CHECK ALL THAT APPLY):** SEE ATTACHED

Proposed OR  Existing (Repair or Alteration)

Single Family Residence OR  Commercial Application

Number of bedrooms: \_\_\_\_\_ Number of permanent occupants: \_\_\_\_\_

Other (Specify) \_\_\_\_\_ Expected Daily Design Flow \_\_\_\_\_

**WATER SUPPLY:**

Public Water System - Name of system: HIDDEN VALLEY WATER SYSTEM

Private well  Well is drilled and located on attached Map  Well not drilled

Cistern

<u>3/4/19</u>	<u>390<sup>00</sup> \$2,140<sup>00</sup> 535<sup>00</sup></u>	<u>PH19-00131</u>
Date	Fee	Receipt #

\$535.00 Site Evaluation Fee is non-refundable after service has been provided  
Site Evaluation is valid for five years

Kittitas County  
Public Health Department  
507 N. Nanum Street, Suite 102  
Ellensburg, WA 98926  
T: 509.962.7515  
F: 509.962.7581



www.co.kittitas.wa.us/healthv











Environmental  
Health Services  
507 N. Nanum Street, Suite 102  
Ellensburg, WA 98926  
T: 509.933.8262  
F: 509.962.7581

# RANCH ROAD PERFORMANCE BASED CLUSTER PLAT A PORTION OF THE NE 1/4 SECTION 28, T. 20 N., R. 17 E., W.M., KITITAS COUNTY, WASHINGTON

## Four Community Septic Drain Fields

### LEGEND

### PERFORMANCE BASED CLUSTER PLATTING TABLE

-  SECTION CORNER, AS NOTED
-  QUARTER CORNER, AS NOTED
-  28 CENTER OF SECTION
-  FOUND 1/2" IRON ROD & CAP, LS 18092
-  SET 5/8" IRON ROD & CAP, LS 45503
-  SET NAIL & WASHER, LS 45503
-  (R) RADIAL BEARING
-  PICNIC AREA
-  SPORT/TENNIS COURT
-  OPEN SPACE (15.20 TOTAL ACRES)

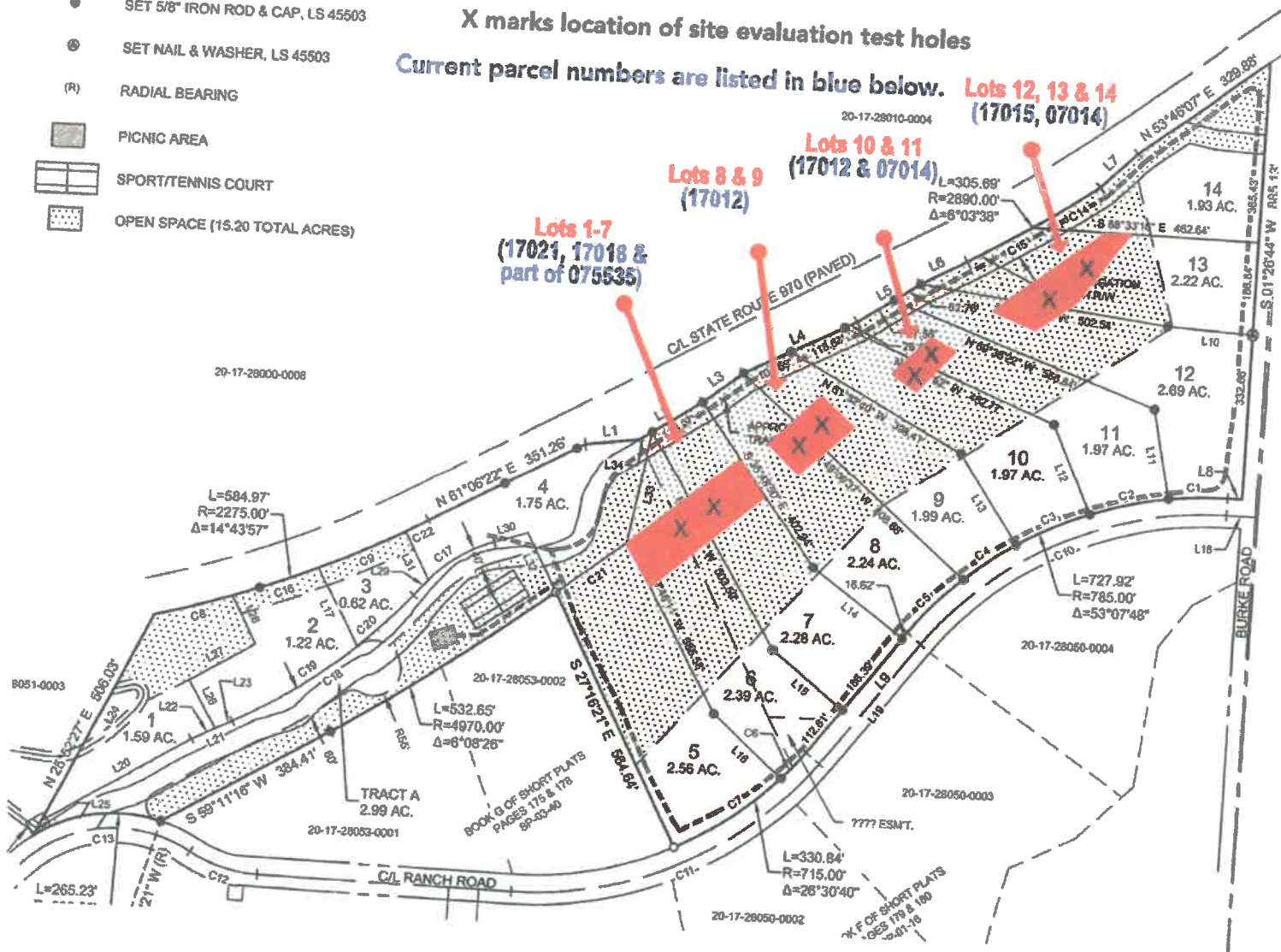
OPEN SPACE TOTAL (50%)	15.20 AC.	50 POINTS
DEVELOPMENT AREA (LOTS & ROAD)	15.20 AC.	
GROUP A WATER SYSTEM		50 POINTS
COMMUNITY SEPTIC SYSTEM		10 POINTS
PASSIVE REC. FACILITIES		5 POINTS
ACTIVE REC. FACILITIES		10 POINTS
<b>TOTAL</b>	<b>30.40 AC.</b>	<b>125 POINTS</b>

X marks location of site evaluation test holes

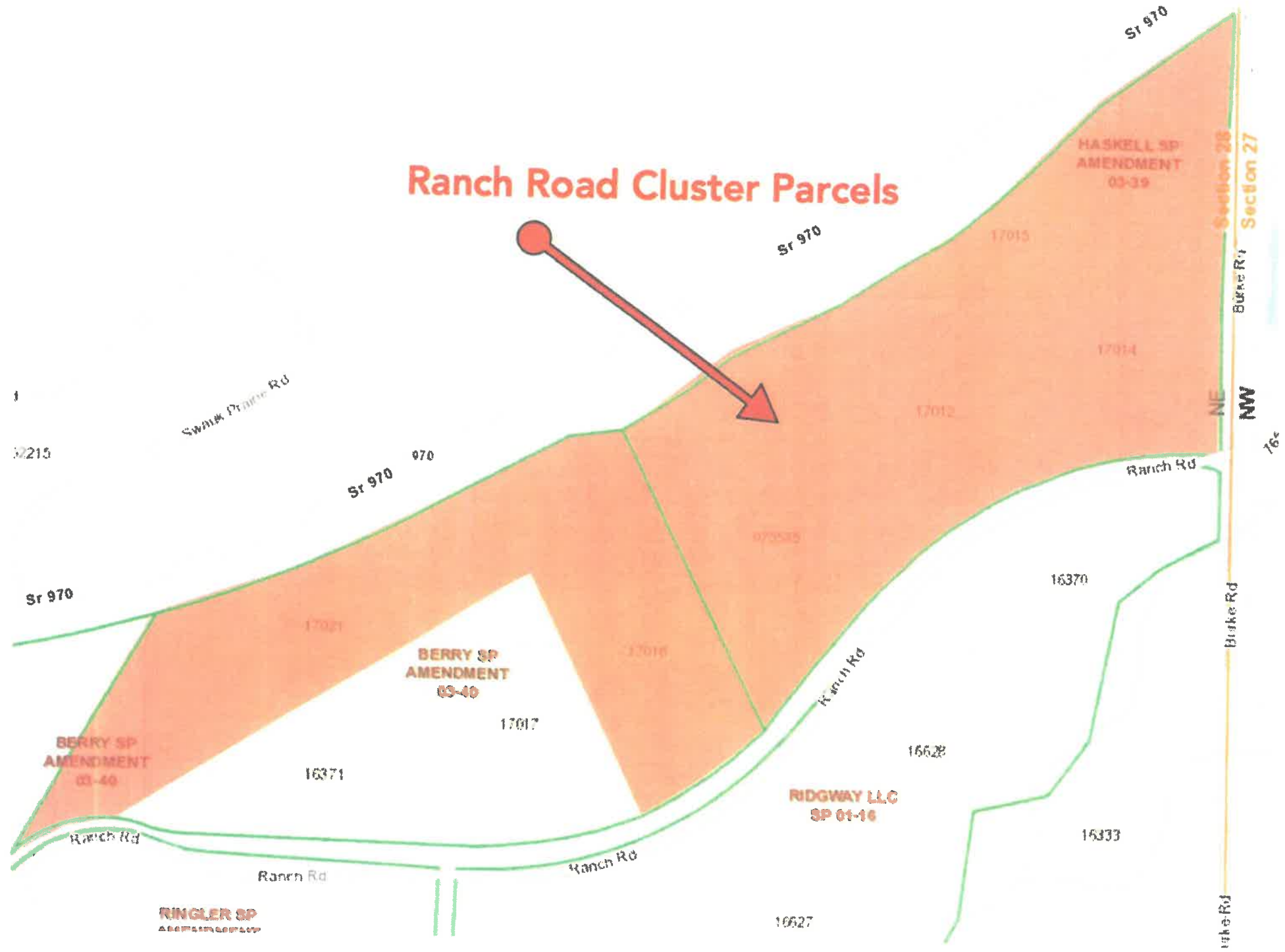
Current parcel numbers are listed in blue below. **Lots 12, 13 & 14 (17015, 07014)**

**Lots 8 & 9 (17012)**

**Lots 1-7 (17021, 17018 & part of 075535)**



# Ranch Road Cluster Parcels





**KITTITAS COUNTY  
PUBLIC HEALTH**

507 N Nanum St., Suite 102  
Ellensburg, WA 98926  
509-962-7515 / <https://www.co.kittitas.wa.us/health/>

**Receipt Number: PH19-00131**

**Payer/Payee:** CLE ELUM PINES WEST LLC  
PO BOX 808  
CLE ELUM WA 98922

**Cashier:** KIM SHILLEY  
**Payment Type:** CHECK (611)

**Date:** 03/04/2019

OE-19-00018 On Site Sewage Evaluation RANCH RD CLE ELUM		<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
<u>Fee Description</u>				
OSS Site Eval Permit		\$390.00	\$390.00	\$0.00
<b>OE-19-00018 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>	<b>\$0.00</b>

OE-19-00019 On Site Sewage Evaluation RANCH RD CLE ELUM		<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
<u>Fee Description</u>				
OSS Site Eval Permit		\$390.00	\$390.00	\$0.00
<b>OE-19-00019 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>	<b>\$0.00</b>

OE-19-00020 On Site Sewage Evaluation RANCH RD CLE ELUM		<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
<u>Fee Description</u>				
OSS Site Eval Permit		\$390.00	\$390.00	\$0.00
<b>OE-19-00020 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>	<b>\$0.00</b>

OE-19-00021 On Site Sewage Evaluation 41 RANCH RD CLE ELUM		<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
<u>Fee Description</u>				
OSS Site Eval Permit		\$390.00	\$390.00	\$0.00
<b>OE-19-00021 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>	<b>\$0.00</b>
<b>TOTAL PAID:</b>			<b>\$1,560.00</b>	

17021  
17012

OSS SITE EVALUATION - TEST HOLE DATA & PARCEL INFORMATION

TIME IN: \_\_\_\_\_ TIME OUT: \_\_\_\_\_

File Last Name: Schulter / Cle Elum  
press east

Parcel Number: 20-17-28053-000

Date: \_\_\_\_\_

Soil Profile
C = Clay
S = Sand
Si = Silt
L = Loam
GR = Gravel
CO = Cobbles
BKR = Broken Rock
HP = Hard Pan
H2O = Water
MOT = Mottling
RL = Root Line
Restrict. Layer: _____

SOIL LOG # <u>7</u> PRIMARY			
Depth Feet	Texture	Structure	Color
1-	S.C.L	weak to moderate	Brown
2-			
3-	Int Mott Mott		Red red
4-			
5-			
6-	H <sub>2</sub> O		

SOIL LOG # <u>8</u> RESERVE			
Depth Feet	Texture	Structure	Color
1-	S.C.L	weak	Brown
2-			
3-	Mott		red
4-			
5-			
6-	S.C.L / Gr H <sub>2</sub> O		

Field Observations:	Minimum Setbacks:	System Approved:	Parcel Map/Soil log Location
	<input checked="" type="checkbox"/> Surface Water (100') <input checked="" type="checkbox"/> Wells (100') <input checked="" type="checkbox"/> Water Lines (10') <input checked="" type="checkbox"/> Cut banks (25' + 5' or 50' + 5') <input checked="" type="checkbox"/> Interceptor Ditches (10' up or 30') <input checked="" type="checkbox"/> Property Lines (5') <input checked="" type="checkbox"/> Buildings (10') <input checked="" type="checkbox"/> Cuts or fills? Slope: <u>1-2%</u> (Percent & Direction)	<input checked="" type="checkbox"/> APP Rate: <u>0.2</u> <input type="checkbox"/> 0.4 <input type="checkbox"/> 0.6 <input type="checkbox"/> 0.8 <input type="checkbox"/> 1.0 <input type="checkbox"/> Gravity <input checked="" type="checkbox"/> Pressure <input type="checkbox"/> Pressure with Sand Lined Trenches <input type="checkbox"/> Alternative <input type="checkbox"/> Other: _____ <input type="checkbox"/> Unsuitable	9.70 TH9 .. TH6 

Comments or Waivers Needed: Install a Pressure system with an 0.3 app rate @ a max depth of 30'

Staff Signature: [Signature]

Designer Signature: \_\_\_\_\_





DE-19-00019

To Protect and Promote the Health and the Environment of the People of Kittitas County

### Application for Site Evaluation

**REQUESTED BY:**

Property Owners Name: **JAMES K. SCHULER & CLE ELUM PINES WEST LLC**  
 Site Address: **RANCH ROAD**  
 City: **CLE ELUM** Zip: \_\_\_\_\_  
 Telephone: ( ) \_\_\_\_\_ Cell: ( **509** ) **304-9060**  
 Requested By: **PATRICK DENEEN**  
 Mailing Address: **BOX 808**  
 City: **CLE ELUM** Zip: **98922**  
 Designers Name: **MARK NELSON** Cell: ( **509** ) **304-9060**  
 Signature of owner or agent: *[Signature]*  
 Designer E-mail: **mark@evergreenvalleyutilities.com**

SITE: **17021**  
 Map Parcel Number **20-17-28053-0004** Lot #: **4,3+1**  
 Subdivision: \_\_\_\_\_ Gate Code: \_\_\_\_\_ Acreage Size: \_\_\_\_\_  
 Directions to site: **97 TO BURKE ROAD TO RANCH ROAD**

**SEE ATTACHED MAP FOR FOUR COMMUNITY DRAIN FIELDS**

**20-17-28053-0003**  
**20-17-28053-0001**

Parcel Map must be attached

**WILL SCHEDULE WITH HEALTH DEPARTMENT**

Test holes are dug  Will call when holes are dug

STRUCTURE (CHECK ALL THAT APPLY): **SEE ATTACHED**

Proposed OR  Existing (Repair or Alteration)  
 Single Family Residence OR  Commercial Application

Number of bedrooms: \_\_\_\_\_ Number of permanent occupants: \_\_\_\_\_

Other (Specify) \_\_\_\_\_ Expected Daily Design Flow \_\_\_\_\_

**WATER SUPPLY:**

Public Water System - Name of system: **HIDDEN VALLEY WATER SYSTEM**  
 Private well  Well is drilled and located on attached Map  Well not drilled  
 Cistern

**3/4/19**      **390.00 \$2,140**      **PH19-00131**  
 Date      Fee      Receipt #

**\$535.00 Site Evaluation Fee is non-refundable after service has been provided**  
**Site Evaluation is valid for five years**

Kittitas County  
Public Health Department  
507 N. Nanum Street, Suite 102  
Ellensburg, WA 98926  
T: 509.962.7515  
F: 509.962.7581



www.co.kittitas.wa.us/health/

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# RANCH ROAD

## PERFORMANCE BASED CLUSTER PLAT

A PORTION OF THE NE 1/4 SECTION 28, T. 20 N., R. 17 E., W.M.,  
KITTITAS COUNTY, WASHINGTON

### Four Community Septic Drain Fields

#### LEGEND

-  SECTION CORNER, AS NOTED
-  QUARTER CORNER, AS NOTED
-  CENTER OF SECTION
-  FOUND 1/2" IRON ROD & CAP, LS 18092
-  SET 5/8" IRON ROD & CAP, LS 45503
-  SET NAIL & WASHER, LS 45503
- (R) RADIAL BEARING
-  PICNIC AREA
-  SPORT/TENNIS COURT
-  OPEN SPACE (15.20 TOTAL ACRES)

#### PERFORMANCE BASED CLUSTER PLATTING TABLE

OPEN SPACE TOTAL (50%)	15.20 AC.	50 POINTS
DEVELOPMENT AREA (LOTS & ROAD)	15.20 AC.	
GROUP A WATER SYSTEM		50 POINTS
COMMUNITY SEPTIC SYSTEM		10 POINTS
PASSIVE REC. FACILITIES		5 POINTS
ACTIVE REC. FACILITIES		10 POINTS
<b>TOTAL</b>	<b>30.40 AC.</b>	<b>125 POINTS</b>

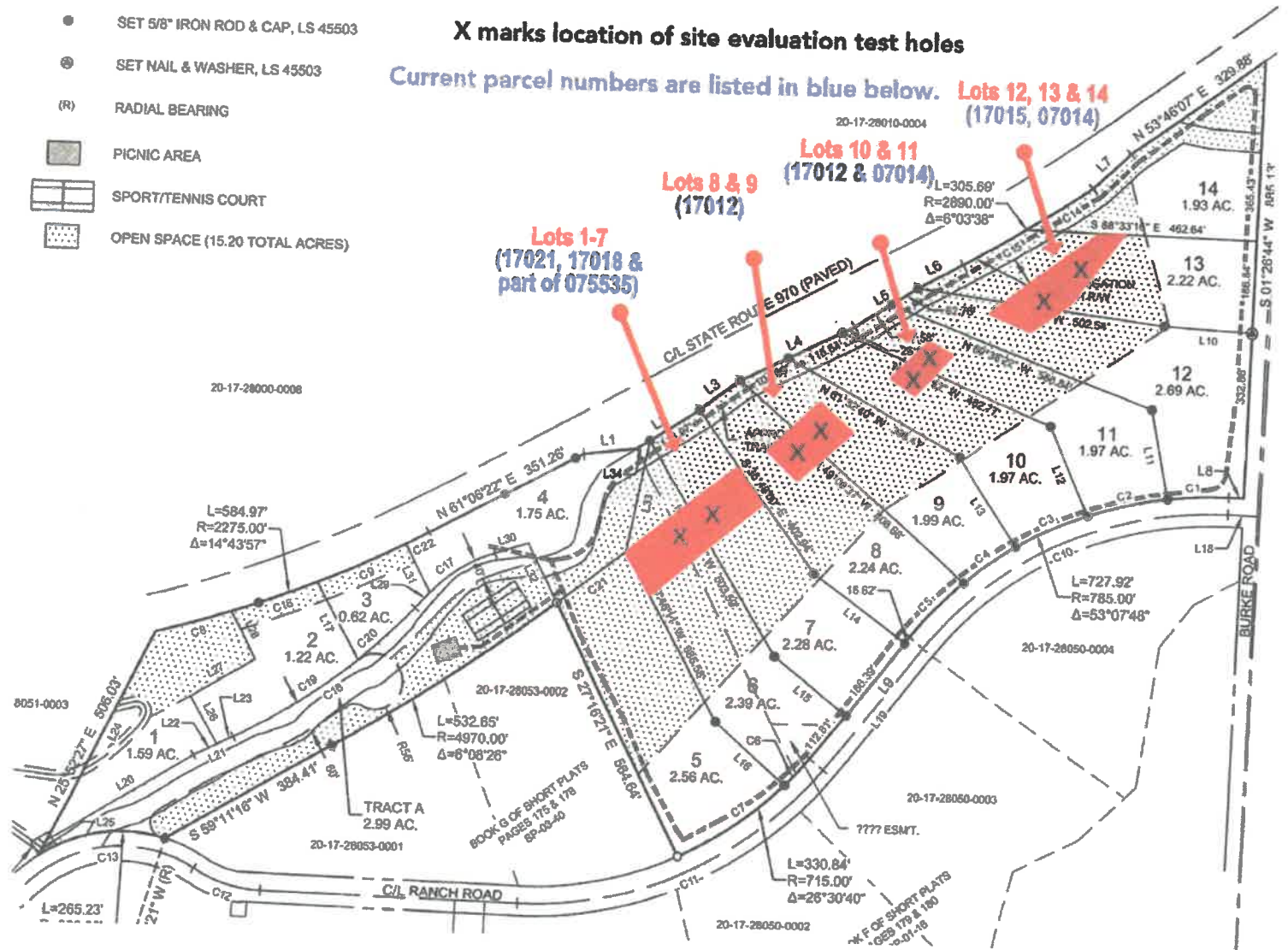
**X marks location of site evaluation test holes**

Current parcel numbers are listed in blue below. **Lots 12, 13 & 14 (17015, 07014)**

**Lots 10 & 11 (17012 & 07014)**

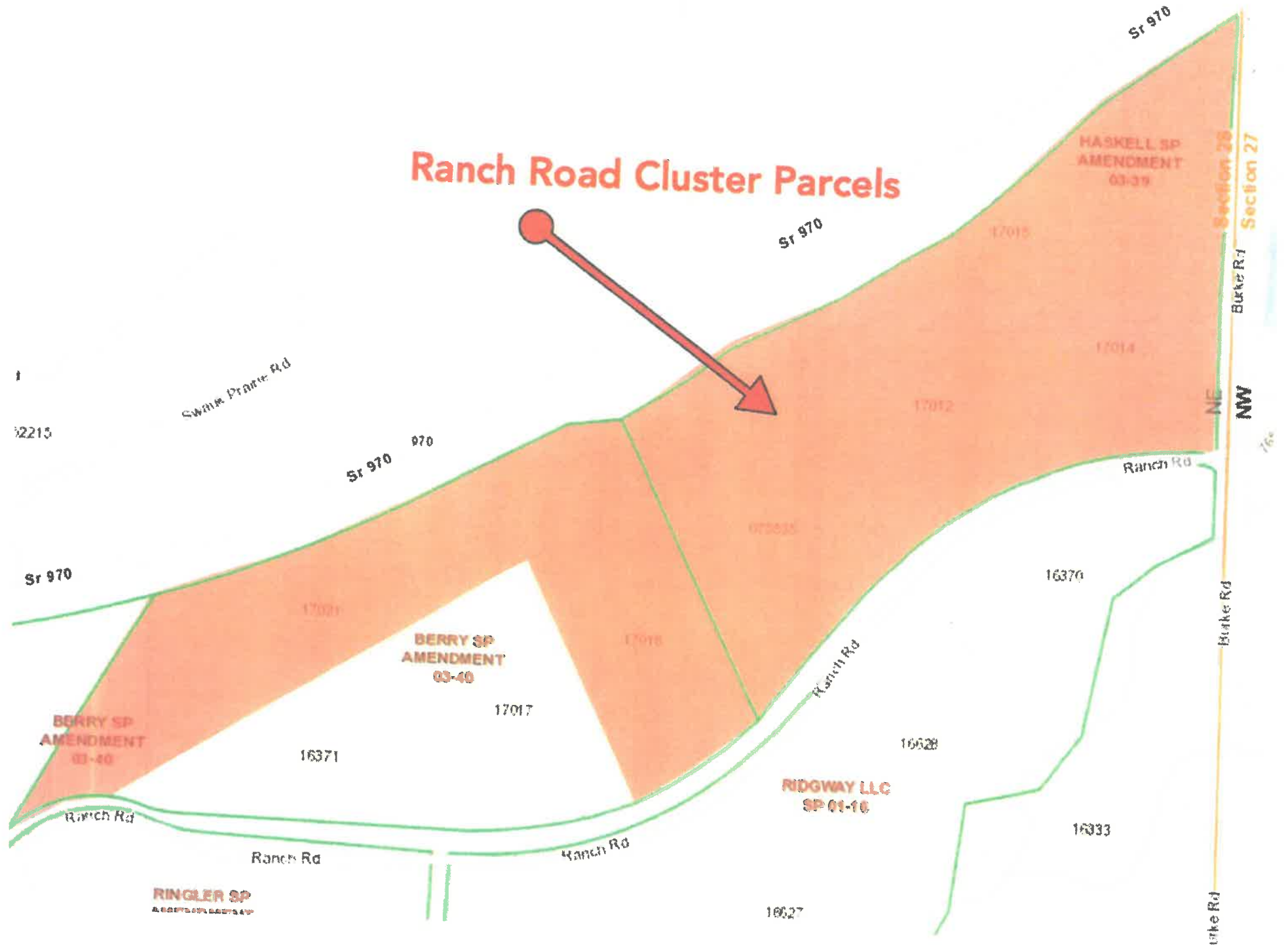
**Lots 8 & 9 (17012)**

**Lots 1-7 (17021, 17018 & part of 075535)**





# Ranch Road Cluster Parcels





**KITTITAS COUNTY  
PUBLIC HEALTH**

507 N Nanum St., Suite 102  
Ellensburg, WA 98926  
509-962-7515 / <https://www.co.kittitas.wa.us/health/>

**Receipt Number: PH19-00131**

**Payer/Payee:** CLE ELUM PINES WEST LLC  
PO BOX 808  
CLE ELUM WA 98922

**Cashier:** KIM SHILLEY  
**Payment Type:** CHECK (611)

**Date:** 03/04/2019

OE-19-00018 On Site Sewage Evaluation RANCH RD CLE ELUM		<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
<u>Fee Description</u>				
OSS Site Eval Permit		\$390.00	\$390.00	\$0.00
<b>OE-19-00018 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>	<b>\$0.00</b>
OE-19-00019 On Site Sewage Evaluation RANCH RD CLE ELUM		<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
<u>Fee Description</u>				
OSS Site Eval Permit		\$390.00	\$390.00	\$0.00
<b>OE-19-00019 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>	<b>\$0.00</b>
OE-19-00020 On Site Sewage Evaluation RANCH RD CLE ELUM		<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
<u>Fee Description</u>				
OSS Site Eval Permit		\$390.00	\$390.00	\$0.00
<b>OE-19-00020 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>	<b>\$0.00</b>
OE-19-00021 On Site Sewage Evaluation 41 RANCH RD CLE ELUM		<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
<u>Fee Description</u>				
OSS Site Eval Permit		\$390.00	\$390.00	\$0.00
<b>OE-19-00021 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>	<b>\$0.00</b>
<b>TOTAL PAID:</b>			<b>\$1,560.00</b>	

OSS SITE EVALUATION - TEST HOLE DATA & PARCEL INFORMATION

File Last Name: Schuler/Clarklyn Pines West

TIME IN: \_\_\_\_\_ TIME OUT: \_\_\_\_\_

Parcel Number: 20-17-28053-0003

Date: \_\_\_\_\_

- Soil Profile
- C = Clay
- S = Sand
- Si = Silt
- L = Loam
- GR = Gravel
- CO = Cobbles
- BKR = Broken Rock
- HP = Hard Pan
- H2O = Water
- MOT = Mottling
- RL = Root Line
- Restrict. Layer: \_\_\_\_\_

SOIL LOG # <u>9</u> PRIMARY			
Depth Feet	Texture	Structure	Color
1-	C.L	weak	Brown
-			
2-			
-			
3-			
-			
4-	H2O		
-			
5-			
-			
6-			

SOIL LOG # <u>10</u> RESERVE			
Depth Feet	Texture	Structure	Color
1-	C.L	weak	Brown
-			
2-			
-			
3-			
-			
4-			
-			
5-			
-			
6-			

Field Observations:	Minimum Setbacks:	System Approved:	Parcel Map/Soil log Location
	<input type="checkbox"/> Surface Water (100') <input type="checkbox"/> Wells (100') <input type="checkbox"/> Water Lines (10') <input type="checkbox"/> Cut banks (25' + 5' or 50' + 5') <input type="checkbox"/> Interceptor Ditches (10' up or 30') <input type="checkbox"/> Property Lines (5') <input type="checkbox"/> Buildings (10') <input type="checkbox"/> Cuts or fills? Slope: _____ (Percent & Direction)	APP Rate: <input type="checkbox"/> .2 <input type="checkbox"/> .4 <input type="checkbox"/> .6 <input type="checkbox"/> .8 <input type="checkbox"/> 1.0 <input type="checkbox"/> Gravity <u>0.3</u> <input checked="" type="checkbox"/> Pressure <input type="checkbox"/> Pressure with Sand Lined Trenches <input type="checkbox"/> Alternative <input type="checkbox"/> Other: _____ <input type="checkbox"/> Unsuitable	

Comments or Waivers Needed: I install a pressure system with a 0.3 app rate @ a max depth of 36"

Staff Signature: \_\_\_\_\_

Designer Signature: \_\_\_\_\_





OE-19-00020

To Protect and Promote the Health and the Environment of the People of Kittitas County

### Application for Site Evaluation

**REQUESTED BY:**

Property Owners Name: JAMES K. SCHULER & CLE ELUM PINES WEST LLC  
 Site Address: RANCH ROAD  
 City: CLE ELUM Zip: \_\_\_\_\_  
 Telephone: ( ) \_\_\_\_\_ Cell: ( 509 ) 304-9060  
 Requested By: PATRICK DENEEN  
 Mailing Address: BOX 808  
 City: CLE ELUM Zip: 98922  
 Designers Name: MARK NELSON Cell: ( 509 ) 304-9060  
 Signature of owner or agent: [signature]  
 Designer E-mail: mark@evergreenvalleyutilities.com

**SEE ATTACHED MAP FOR FOUR COMMUNITY DRAIN FIELDS**

SITE: 17015  
 Map Parcel Number 20-17-29052-0004 Lot #: 4  
 Subdivision: \_\_\_\_\_ Gate Code: \_\_\_\_\_ Acreage Size: \_\_\_\_\_  
 Directions to site: 97 TO BURKE ROAD TO RANCH ROAD

Parcel Map must be attached

**WILL SCHEDULE WITH HEALTH DEPARTMENT**

Test holes are dug  Will call when holes are dug

**STRUCTURE (CHECK ALL THAT APPLY): SEE ATTACHED**

Proposed OR  Existing (Repair or Alteration)  
 Single Family Residence OR  Commercial Application  
 Number of bedrooms: \_\_\_\_\_ Number of permanent occupants: \_\_\_\_\_  
 Other (Specify) \_\_\_\_\_ Expected Daily Design Flow \_\_\_\_\_

**WATER SUPPLY:**

Public Water System - Name of system: HIDDEN VALLEY WATER SYSTEM  
 Private well  Well is drilled and located on attached Map  Well not drilled  
 Cistern

3/4/19

390.<sup>00</sup> \$2,140 ~~2360~~

PH19-00131

Date

Fee (1560)

Receipt #

\$535.00 Site Evaluation Fee is non-refundable after service has been provided

Site Evaluation is valid for five years

Kittitas County  
 Public Health Department  
 507 N. Nanum Street, Suite 102  
 Ellensburg, WA 98926  
 T: 509.962.7515  
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# RANCH ROAD

## PERFORMANCE BASED CLUSTER PLAT

A PORTION OF THE NE 1/4 SECTION 28, T. 20 N., R. 17 E., W.M.,  
KITTITAS COUNTY, WASHINGTON

# Four Community Septic Drain Fields

### LEGEND

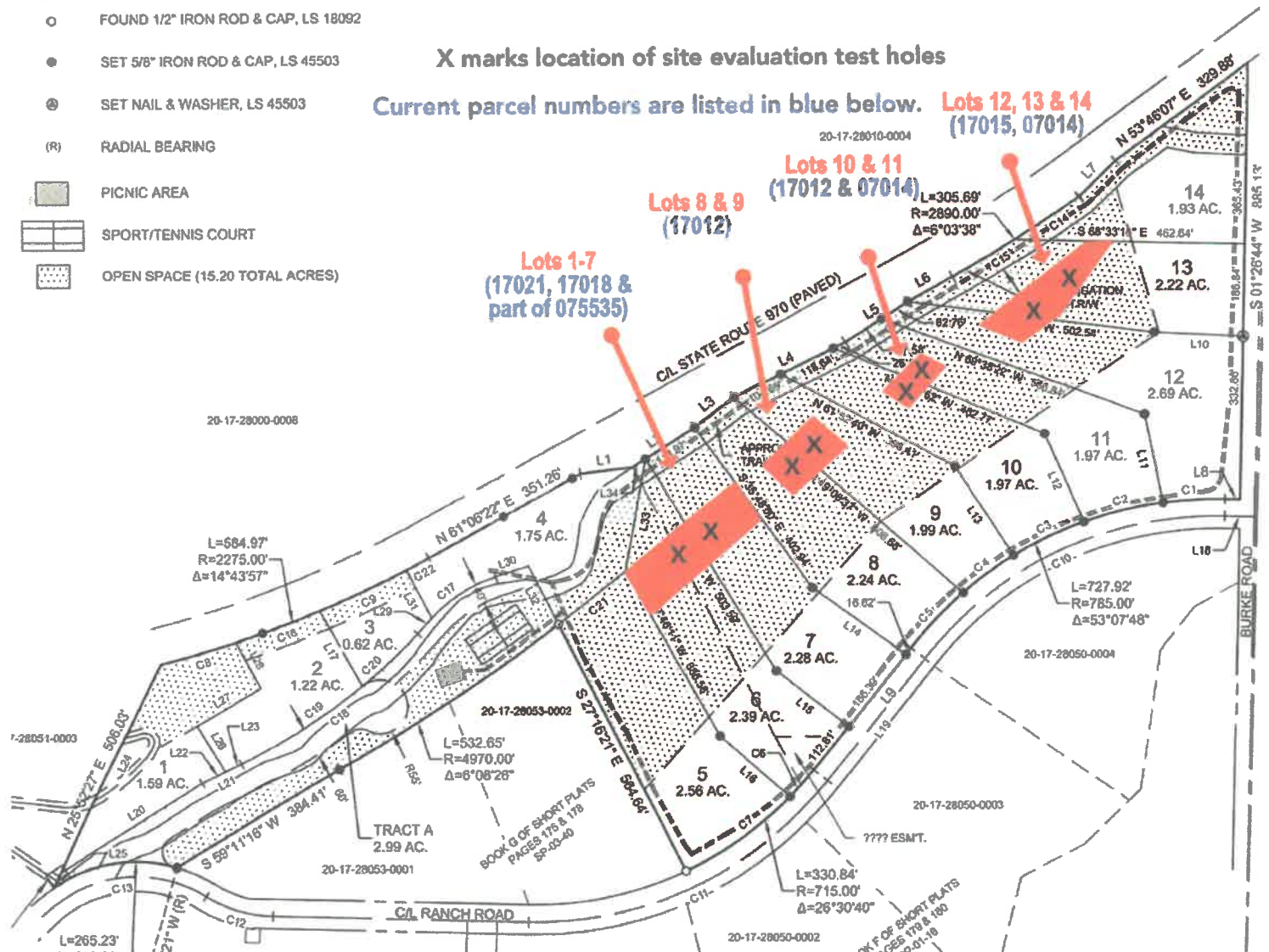
-  SECTION CORNER, AS NOTED
-  QUARTER CORNER, AS NOTED
-  CENTER OF SECTION
-  FOUND 1/2" IRON ROD & CAP, LS 18092
-  SET 5/8" IRON ROD & CAP, LS 45503
-  SET NAIL & WASHER, LS 45503
-  (R) RADIAL BEARING
-  PICNIC AREA
-  SPORT/TENNIS COURT
-  OPEN SPACE (15.20 TOTAL ACRES)

### PERFORMANCE BASED CLUSTER PLATTING TABLE

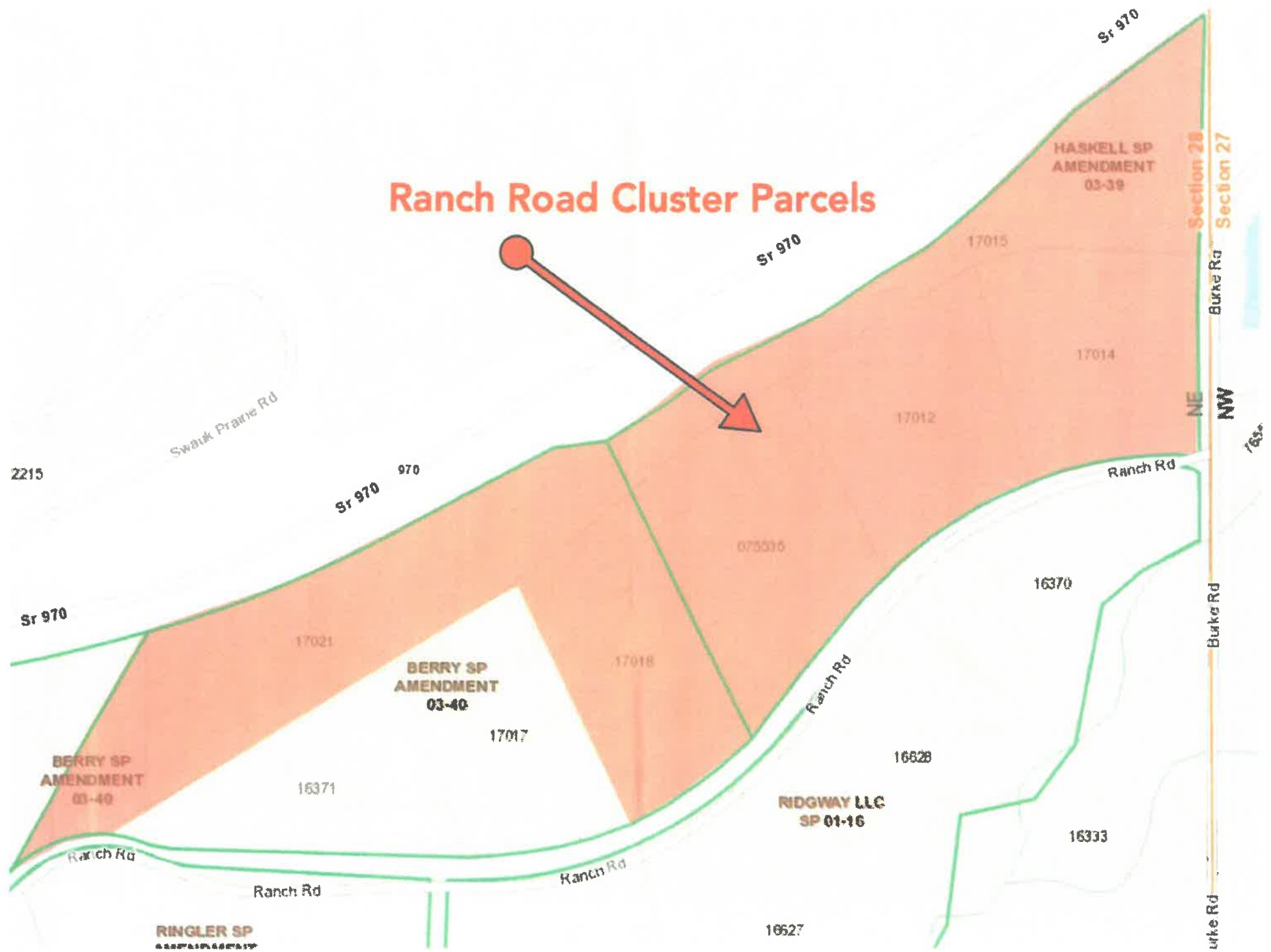
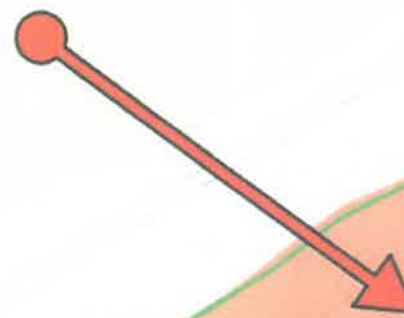
OPEN SPACE TOTAL (50%)	15.20 AC.	50 POINTS
DEVELOPMENT AREA (LOTS & ROAD)	15.20 AC.	
GROUP A WATER SYSTEM		50 POINTS
COMMUNITY SEPTIC SYSTEM		10 POINTS
PASSIVE REC. FACILITIES		5 POINTS
ACTIVE REC. FACILITIES		10 POINTS
<b>TOTAL</b>	<b>30.40 AC.</b>	<b>125 POINTS</b>

X marks location of site evaluation test holes

Current parcel numbers are listed in blue below. Lots 12, 13 & 14 (17015, 07014)



# Ranch Road Cluster Parcels





**KITTITAS COUNTY  
PUBLIC HEALTH**

507 N Nanum St., Suite 102  
 Ellensburg, WA 98926  
 509-962-7515 / <https://www.co.kittitas.wa.us/health/>

**Receipt Number: PH19-00131**

**Payer/Payee:** CLE ELUM PINES WEST LLC  
 PO BOX 808  
 CLE ELUM WA 98922

**Cashier:** KIM SHILLEY  
**Payment Type:** CHECK (611)

**Date:** 03/04/2019

OE-19-00018 On Site Sewage Evaluation RANCH RD CLE ELUM		<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
<u>Fee Description</u>				
OSS Site Eval Permit		\$390.00	\$390.00	\$0.00
<b>OE-19-00018 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>	<b>\$0.00</b>
OE-19-00019 On Site Sewage Evaluation RANCH RD CLE ELUM		<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
<u>Fee Description</u>				
OSS Site Eval Permit		\$390.00	\$390.00	\$0.00
<b>OE-19-00019 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>	<b>\$0.00</b>
OE-19-00020 On Site Sewage Evaluation RANCH RD CLE ELUM		<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
<u>Fee Description</u>				
OSS Site Eval Permit		\$390.00	\$390.00	\$0.00
<b>OE-19-00020 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>	<b>\$0.00</b>
OE-19-00021 On Site Sewage Evaluation 41 RANCH RD CLE ELUM		<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
<u>Fee Description</u>				
OSS Site Eval Permit		\$390.00	\$390.00	\$0.00
<b>OE-19-00021 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>	<b>\$0.00</b>
<b>TOTAL PAID:</b>			<b>\$1,560.00</b>	



OSS SITE EVALUATION - TEST HOLE DATA & PARCEL INFORMATION

TIME IN: \_\_\_\_\_ TIME OUT: \_\_\_\_\_

File Last Name: Schuler / Cle Elum Prices west Parcel Number: 20-17-28052-0004 Date: 3/5/19

Soil Profile
C = Clay
S = Sand
Si = Silt
L = Loam
GR = Gravel
CO = Cobbles
BKR = Broken Rock
HP = Hard Pan
H2O = Water
MOT = Mottling
RL = Root Line
Restrict. Layer: _____

SOIL LOG # 1 PRIMARY			
Depth	Texture	Structure	Color
Feet			
1-	S.C.L	Weak - moderate blocky	Brown
-			
2-			
-			
3-			
-			
4-			
-			
5-			
-			
6-			

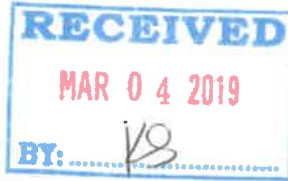
SOIL LOG # 2 RESERVE			
Depth	Texture	Structure	Color
Feet			
1-	S.C.L	Moderate blocky	Brown
-			
2-			
-			
3-			
-			
4-			
-			
5-			
-			
6-			

<b>Field Observations:</b>	<b>Minimum Setbacks:</b>	<b>System Approved:</b>	<b>Parcel Map/Soil log Location</b>
	<input type="checkbox"/> Surface Water (100') <input type="checkbox"/> Wells (100') <input type="checkbox"/> Water Lines (10') <input type="checkbox"/> Cut banks (25' + 5' or 50' + 5') <input type="checkbox"/> Interceptor Ditches (10' up or 30') <input type="checkbox"/> Property Lines (5') <input type="checkbox"/> Buildings (10') <input type="checkbox"/> Cuts or fills? Slope: _____ (Percent & Direction)	APP Rate: <input type="checkbox"/> .2 <input checked="" type="checkbox"/> .4 <input type="checkbox"/> .6 <input type="checkbox"/> .8 <input type="checkbox"/> 1.0 <input type="checkbox"/> Gravity <input checked="" type="checkbox"/> Pressure <input type="checkbox"/> Pressure with Sand Lined Trenches <input type="checkbox"/> Alternative <input type="checkbox"/> Other: _____ <input type="checkbox"/> Unsuitable	970 T12 54.1 Parcel 2

Comments or Waivers Needed: Install Pressure system with 0.3 app rate @ max depth of 36"

Staff Signature: \_\_\_\_\_ Designer Signature: \_\_\_\_\_ Page \_\_\_\_\_ of \_\_\_\_\_





OE-19-00021

To Protect and Promote the Health and the Environment of the People of Kittitas County

### Application for Site Evaluation

**REQUESTED BY:**

Property Owners Name: **JAMES K. SCHULER & CLE ELUM PINES WEST LLC**  
 Site Address: **RANCH ROAD**  
 City: **CLE ELUM** Zip: \_\_\_\_\_  
 Telephone: ( ) \_\_\_\_\_ Cell: ( **509** ) **304-9060**  
 Requested By: **PATRICK DENEEN**  
 Mailing Address: **BOX 808**  
 City: **CLE ELUM** Zip: **98922**  
 Designers Name: **MARK NELSON** Cell: ( **509** ) **304-9060**  
 Signature of owner or agent:   
 Designer E-mail: **mark@evergreenvalleyutilities.com**

**SEE ATTACHED MAP FOR FOUR COMMUNITY DRAIN FIELDS**

SITE: **17014**  
 Map Parcel Number **20-17-28052-0003** Lot #: **3**  
 Subdivision: \_\_\_\_\_ Gate Code: \_\_\_\_\_ Acreage Size: \_\_\_\_\_  
 Directions to site: **97 TO BURKE ROAD TO RANCH ROAD**

Parcel Map must be attached

**WILL SCHEDULE WITH HEALTH DEPARTMENT**

Test holes are dug  Will call when holes are dug

**STRUCTURE (CHECK ALL THAT APPLY): SEE ATTACHED**

Proposed OR  Existing (Repair or Alteration)  
 Single Family Residence OR  Commercial Application

Number of bedrooms: \_\_\_\_\_ Number of permanent occupants: \_\_\_\_\_

Other (Specify) \_\_\_\_\_ Expected Daily Design Flow \_\_\_\_\_

**WATER SUPPLY:**

Public Water System - Name of system: **HIDDEN VALLEY WATER SYSTEM**  
 Private well  Well is drilled and located on attached Map  Well not drilled  
 Cistern

**3/4/19**

**390<sup>00</sup> \$2,140 ~~535.00~~**

**PH19-00131**

Date

Fee

Receipt #

**\$535.00 Site Evaluation Fee is non-refundable after service has been provided**  
**Site Evaluation is valid for five years**

Kittitas County  
 Public Health Department  
 507 N. Nanum Street, Suite 102  
 Ellensburg, WA 98926  
 T: 509.962.7515  
 F: 509.962.7581



[www.co.kittitas.wa.us/health/](http://www.co.kittitas.wa.us/health/)

Environmental  
 Health Services  
 507 N. Nanum Street, Suite 102  
 Ellensburg, WA 98926  
 T: 509.933.8262  
 F: 509.962.7581











# RANCH ROAD

## PERFORMANCE BASED CLUSTER PLAT

A PORTION OF THE NE 1/4 SECTION 28, T. 20 N., R. 17 E., W.M.,  
KITTITAS COUNTY, WASHINGTON

### Four Community Septic Drain Fields

#### LEGEND

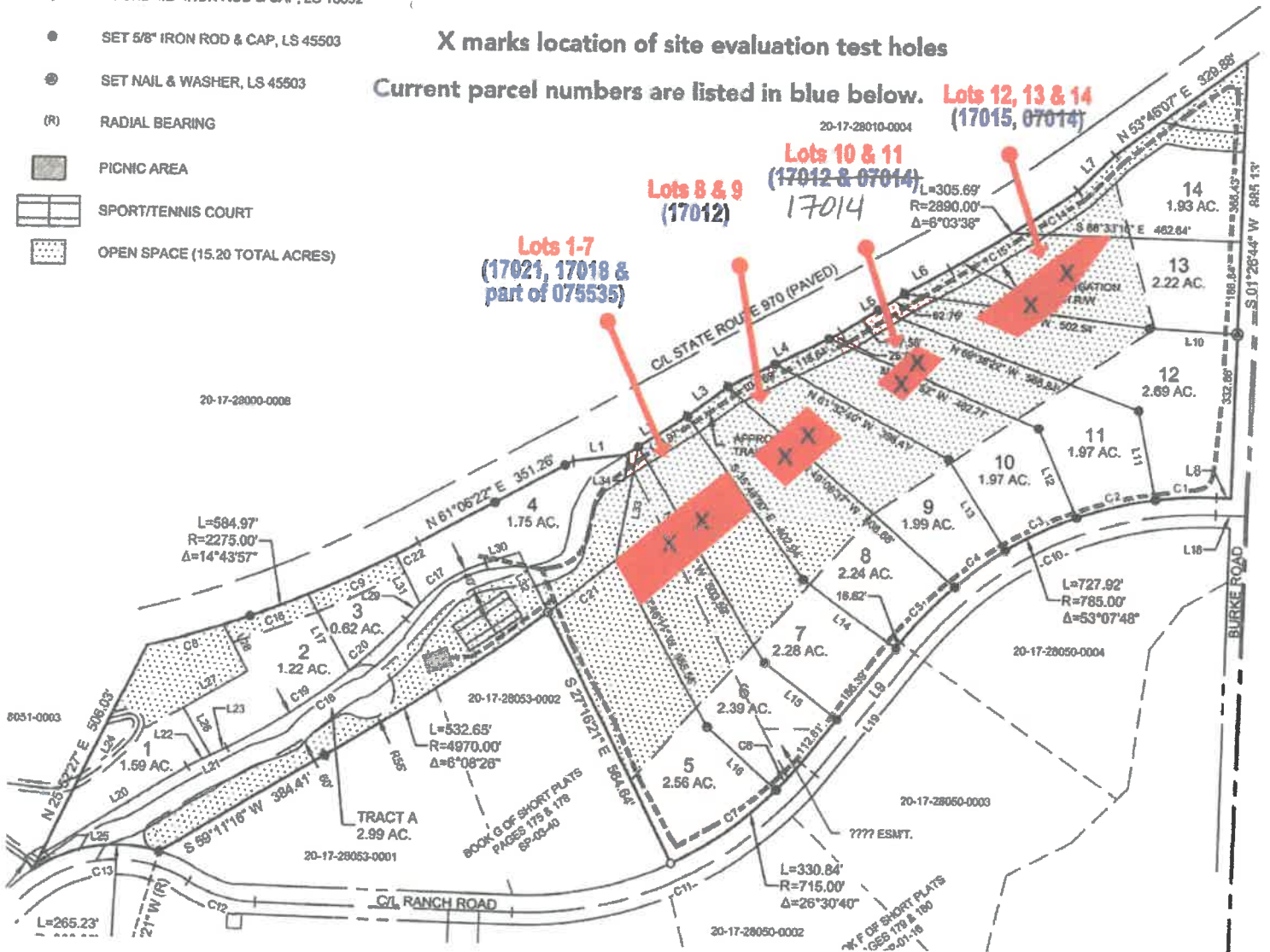
-  SECTION CORNER, AS NOTED
-  QUARTER CORNER, AS NOTED
-  CENTER OF SECTION
-  FOUND 1/2" IRON ROD & CAP, LS 18092
-  SET 5/8" IRON ROD & CAP, LS 45503
-  SET NAIL & WASHER, LS 45503
-  (R) RADIAL BEARING
-  PICNIC AREA
-  SPORT/TENNIS COURT
-  OPEN SPACE (15.20 TOTAL ACRES)

#### PERFORMANCE BASED CLUSTER PLATTING TABLE

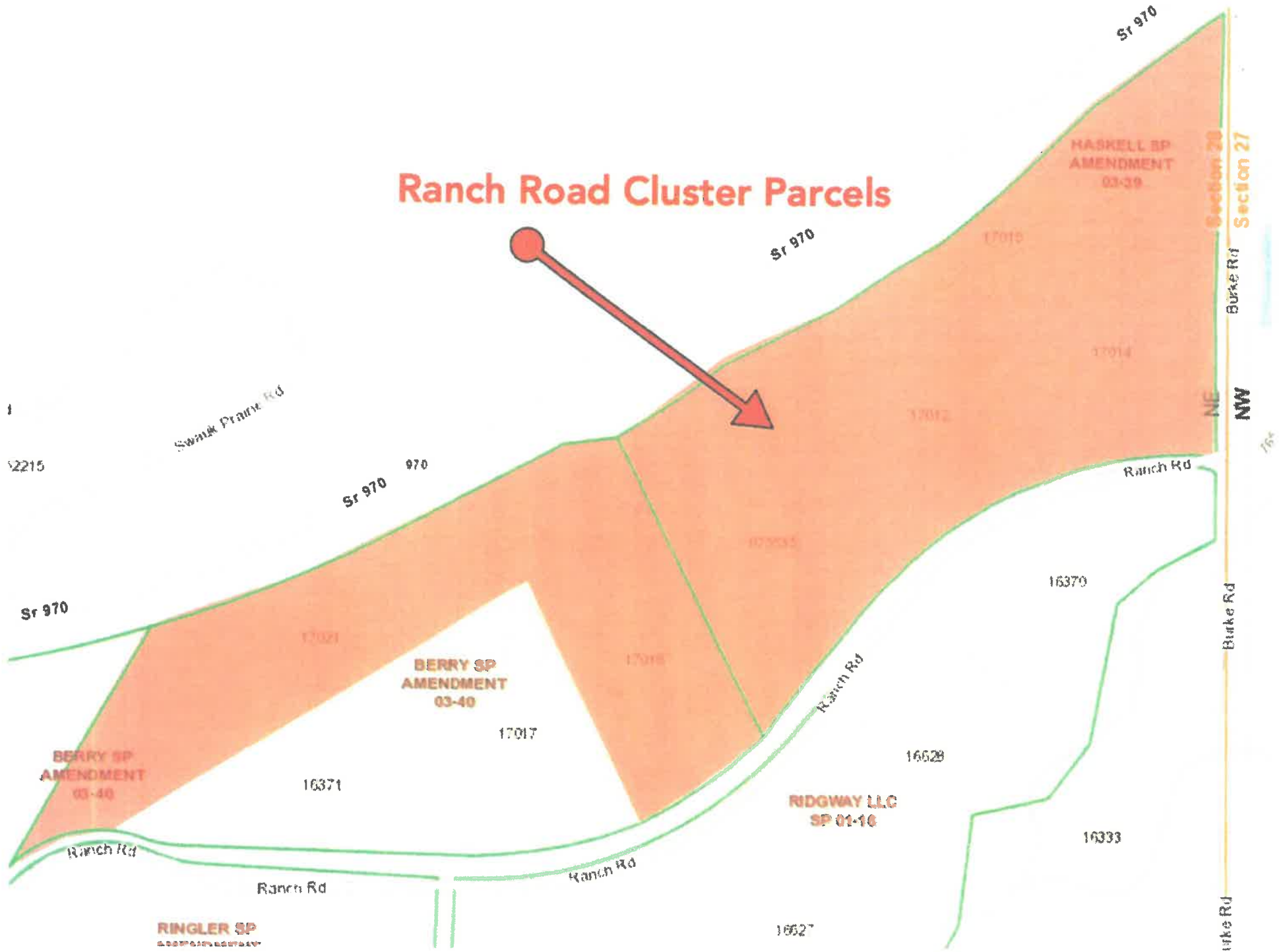
OPEN SPACE TOTAL (50%)	15.20 AC.	50 POINTS
DEVELOPMENT AREA (LOTS & ROAD)	15.20 AC.	
GROUP A WATER SYSTEM		50 POINTS
COMMUNITY SEPTIC SYSTEM		10 POINTS
PASSIVE REC. FACILITIES		5 POINTS
ACTIVE REC. FACILITIES		10 POINTS
<b>TOTAL</b>	<b>30.40 AC.</b>	<b>125 POINTS</b>

**X marks location of site evaluation test holes**

Current parcel numbers are listed in blue below. Lots 12, 13 & 14 (17015, 07014)



# Ranch Road Cluster Parcels





**KITTITAS COUNTY  
PUBLIC HEALTH**

507 N Nanum St., Suite 102  
Ellensburg, WA 98926  
509-962-7515 / <https://www.co.kittitas.wa.us/health/>

**Receipt Number: PH19-00131**

**Payer/Payee:** CLE ELUM PINES WEST LLC  
PO BOX 808  
CLE ELUM WA 98922

**Cashier:** KIM SHILLEY  
**Payment Type:** CHECK (611)

**Date:** 03/04/2019

OE-19-00018 On Site Sewage Evaluation RANCH RD CLE ELUM			
<u>Fee Description</u>	<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
OSS Site Eval Permit	\$390.00	\$390.00	\$0.00
<b>OE-19-00018 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>
OE-19-00019 On Site Sewage Evaluation RANCH RD CLE ELUM			
<u>Fee Description</u>	<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
OSS Site Eval Permit	\$390.00	\$390.00	\$0.00
<b>OE-19-00019 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>
OE-19-00020 On Site Sewage Evaluation RANCH RD CLE ELUM			
<u>Fee Description</u>	<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
OSS Site Eval Permit	\$390.00	\$390.00	\$0.00
<b>OE-19-00020 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>
OE-19-00021 On Site Sewage Evaluation 41 RANCH RD CLE ELUM			
<u>Fee Description</u>	<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
OSS Site Eval Permit	\$390.00	\$390.00	\$0.00
<b>OE-19-00021 TOTALS:</b>		<b>\$390.00</b>	<b>\$390.00</b>
<b>TOTAL PAID:</b>		<b>\$1,560.00</b>	

OSS SITE EVALUATION - TEST HOLE DATA & PARCEL INFORMATION

TIME IN: \_\_\_\_\_ TIME OUT: \_\_\_\_\_

File Last Name: \_\_\_\_\_

Parcel Number: \_\_\_\_\_

Date: \_\_\_\_\_

Soil Profile
C = Clay
S = Sand
Si = Silt
L = Loam
GR = Gravel
CO = Cobbles
BKR = Broken Rock
HP = Hard Pan
H2O = Water
MOT = Mottling
RL = Root Line
Restrict. Layer: _____

SOIL LOG # 5 PRIMARY			
Depth Feet	Texture	Structure	Color
1-	S.C.L	break to moderate blocky	Dark Brown
2-			
3-			
4-			
5-			
6-			

SOIL LOG # 6 RESERVE			
Depth Feet	Texture	Structure	Color
1-	S.C.L	break to moderate blocky	Dark Brown
2-			
3-			
4-			
5-			
6-			

Field Observations:	Minimum Setbacks:	System Approved:	Parcel Map/Soil log Location
	<input type="checkbox"/> Surface Water (100') <input type="checkbox"/> Wells (100') <input type="checkbox"/> Water Lines (10') <input type="checkbox"/> Cut banks (25' + 5' or 50' + 5') <input type="checkbox"/> Interceptor Ditches (10' up or 30') <input type="checkbox"/> Property Lines (5') <input type="checkbox"/> Buildings (10') <input type="checkbox"/> Cuts or fills? Slope: _____ (Percent & Direction)	APP Rate: <input type="checkbox"/> .2 <input checked="" type="checkbox"/> .3 <input type="checkbox"/> .4 <input type="checkbox"/> .6 <input type="checkbox"/> .8 <input type="checkbox"/> 1.0 <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure <input type="checkbox"/> Pressure with Sand Lined Trenches <input type="checkbox"/> Alternative <input type="checkbox"/> Other: _____ <input type="checkbox"/> Unsuitable	* 970 T46 T45

Comments or Waivers Needed: Install a Pressure system with a 0.3 app rate @ a max depth of 36"

Staff Signature: \_\_\_\_\_

Designer Signature: \_\_\_\_\_

OSS SITE EVALUATION - TEST HOLE DATA & PARCEL INFORMATION

TIME IN: \_\_\_\_\_ TIME OUT: \_\_\_\_\_

File Last Name: \_\_\_\_\_

Parcel Number: \_\_\_\_\_

Date: \_\_\_\_\_

Soil Profile
C = Clay
S = Sand
Si = Silt
L = Loam
GR = Gravel
CO = Cobbles
BKR = Broken Rock
HP = Hard Pan
H2O = Water
MOT = Mottling
RL = Root Line
Restrict. Layer: _____

SOIL LOG # 3 PRIMARY			
Depth Feet	Texture	Structure	Color
1-	C.L	weak blocky	Dark Brown
2-			
3-	Int mott		
4-	S.C.L	weak - moderate blocky	Light brown
5-			
6-	Tight		

SOIL LOG # 4 RESERVE			
Depth Feet	Texture	Structure	Color
1-	C.L	moderate blocky	Dark brown
2-			
3-	Int mott		
4-	S.C.L/GR	strong blocky granular	Light brown
5-			
6-	Tight		

Field Observations:	Minimum Setbacks:	System Approved:	Parcel Map/Soil log Location
	<input type="checkbox"/> Surface Water (100') <input type="checkbox"/> Wells (100') <input type="checkbox"/> Water Lines (10') <input type="checkbox"/> Cut banks (25' + 5' or 50' + 5') <input type="checkbox"/> Interceptor Ditches (10' up or 30') <input type="checkbox"/> Property Lines (5') <input type="checkbox"/> Buildings (10') <input type="checkbox"/> Cuts or fills? Slope: _____ (Percent & Direction)	APP Rate: <input type="checkbox"/> .2 <input type="checkbox"/> .4 <input type="checkbox"/> .6 <input type="checkbox"/> .8 <input type="checkbox"/> 1.0 <input type="checkbox"/> Gravity <input checked="" type="checkbox"/> Pressure <input type="checkbox"/> Pressure with Sand Lined Trenches <input type="checkbox"/> Alternative <input type="checkbox"/> Other: _____ <input type="checkbox"/> Unsuitable	

Comments or Waivers Needed: Install a pressure system with a 0.3 app rate @ max depth of 36"

Staff Signature: \_\_\_\_\_

Designer Signature: \_\_\_\_\_



