

# 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

## LONG PLAT APPLICATION

(To divide lot into 5 or more lots)

KITTITAS COUNTY ENCOURAGES THE USE OF PRE-APPLICATION MEETINGS. PLEASE CALL THE DEPARTMENT IF YOU WOULD LIKE TO SET UP A MEETING TO DISCUSS YOUR PROJECT. INCOMPLETE APPLICATIONS WILL **NOT** BE ACCEPTED.

PLEASE TYPE OR PRINT CLEARLY IN INK. ATTACH ADDITIONAL SHEETS AS NECESSARY. THE FOLLOWING ITEMS MUST BE ATTACHED TO THIS APPLICATION PACKET:

### REQUIRED ATTACHMENTS

- Ten large copies of plat with all preliminary drawing requirements complete (reference KCC Title 16 Subdivision Code for plat drawing requirements) and one small 8.5" x 11" copy
- Address list of all landowners within 500 feet of the site's tax parcel. If adjoining parcels are owned by the applicant, the 500 feet extends from the farthest parcel. If the parcel is within a subdivision with a Homeowners or Road Association, please include the address of the association.
- SEPA Checklist (Only required if your subdivision consists of 9 lots or more.  
Please pick up a copy of the Checklist if required)

### OPTIONAL ATTACHMENTS

(Optional at preliminary submittal, but required at the time of final submittal)

- Certificate of Title (Title Report)
- Computer lot closures

### FEES:

\$200 plus \$10 per lot for Public Works Department;  
\$625 plus \$75 per hour over 12.5 hours for Environmental Health Department;  
\$1500 for Community Development Services Department, PLUS \$225 if SEPA Checklist is required  
\*One check made payable to KCCDS

### FOR STAFF USE ONLY

APPLICATION RECEIVED BY:

SIGNATURE:

x

DATE:

Nov 14, 2007

RECEIPT #

054432

**DATE STAMP  
HERE**

NOTES:

1. **Name, mailing address and day phone of land owner(s) of record:**

Name: Michael L and Myrna Darland  
Mailing Address: 2021 102nd PL SE  
City/State/ZIP: Bellevue, WA 98004-7029  
Day Time Phone: 425.455.0671  
Email Address: michaeldar@halcyon.com

2. **Name, mailing address and day phone of authorized agent (if different from land owner of record):**

Agent Name: SAME AS ABOVE  
Mailing Address: Some times in Chile November thru April  
City/State/ZIP: Time is 5 hours earlier than in WA state  
Day Time Phone: 425.818.1425 (number rings at Yan Kee Way Lodge in Chile)  
Email Address: michaeldar@halcyon.com

3. **Contact person for application (select one):**

Owner of record       Authorized agent  
All verbal and written contact regarding this application will be made only with the contact person.

4. **Street address of property:**

Address: no address  
City/State/ZIP: Snoqualmie Pass, WA 98068

5. **Legal description of property:**

E1/2 NE1/4 of Section 15, Township 22, North Range 11 East, W M, Kittitas County WA  
(See attached Exhibit A for detailed legal description which does not fit this form)

6. **Tax parcel number(s):** #22-11-15010-0001(R93782

7. **Property size:** 76.8 acres (acres)

8. **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):

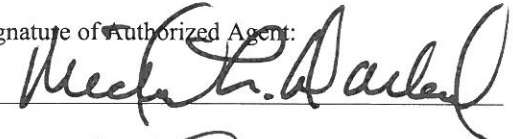
Please see the attached Exhibit B  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Are Forest Service roads/easements involved with accessing your development?  Yes  No (Circle)  
If yes, explain: The southern access road, now a 20 foot ROW links to the USFS road and will in the future.

10. What County maintained road(s) will the development be accessing from? Not Applicable

11. 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.

12. Are there any other pending applications associated with the property associated with this application?  
 Yes  No

Signature of Authorized Agent:  
X 

Date:  
Nov. 13, 2007

Signature of Land Owner of Record  
(Required for application submittal):  
X 

Date:  
Nov. 13, 2007

U.S. GOVERNMENT

U.S. GOVERNMENT

### Dedicated Open Space

GOLD CREEK  
THIS AREA TO BE COMMUNITY AREA

### Dedicated Condo Area

GOLD CREEK ROAD

### Dedicated SF Units Area

Commercial Support

Commercial Support

MOUNTAIN SPANDREA, INC.  
P.O. BOX 19170, WELSHARD ST.  
SEATTLE, WA 98119

## SNOCADIA ON GOLD CREEK



DATE	3/10/07
SCALE	AS SHOWN
LEGAL DESCRIPTION	UNDIVIDED PART OF LOT 12, SUBDIVISION NO. 138, WASHINGTON COUNTY, WASHINGTON
PLAN PARTS	AS SHOWN
NUMBER OF LOTS	12
SEWER SYSTEM	AS SHOWN
WATER SYSTEM	AS SHOWN
SURVEY	AS SHOWN
LANDMARKS	AS SHOWN
DESIGNER/OWNER	SNOCADIA, INC.
REVISIONS	AS SHOWN



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