



KITTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

411 N. Ruby St., Suite 2, Ellensburg, WA 98926

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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 [Signature]

DATE:

12.14.07

RECEIPT #

054788



NOTES:

DARRYL PIERCY, DIRECTOR

ALLISON KIMBALL, ASSISTANT DIRECTOR

COMMUNITY PLANNING BUILDING INSPECTION PLAN REVIEW ADMINISTRATION PERMIT SERVICES CODE ENFORCEMENT FIRE INVESTIGATION

1.

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

Name: Fred Talerico

Mailing Address: Po Box 493

City/State/ZIP: Cle Elum, Wa 98922

Day Time Phone: 509-674-4095

Email Address: _____

2.

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

Agent Name: Central Cascade Land Co. Inc.

Mailing Address: Po Box 687

City/State/ZIP: Roslyn, Wa 98941

Day Time Phone: 509-649-2211

Email Address: _____

3.

Contact person for application (select one):

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

4. **Street address of property:**

Address: 1711 State Route 970

City/State/ZIP: Cle Elum, WA 98922

5.

Legal description of property:

Acres 5.00, Sec 31; Twp. 20; Rge, 16; Ptn NW
1/4 NE 1/4 & Ptn. NE1/4 NW 1/4

6.

Tax parcel number(s): 155035, 20-16-31020-0009

7.

Property size: 5.00 (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):

Divide 5 acres into five 1-acre lots. One lot has an existing house and shop. Water will be supplied by a group B water system and sewage will be individual septic. Existing access is off SR970.

9. Are Forest Service roads/easements involved with accessing your development? Yes No (Circle) If yes, explain: No

10. What County maintained road(s) will the development be accessing from? None

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 NO

Signature of Authorized Agent: Date:

X *[Signature]* 12/11/07

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

Date: X *[Signature]*