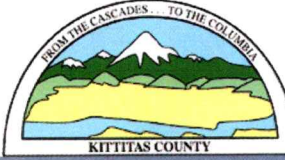


CP-18-00001



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

"Building Partnerships – Building Communities"

COMPREHENSIVE PLAN AMENDMENTS DOCKETING

(Proposing a text or map amendment as part of annual docketing, pursuant to KCC 15A.10 and KCC 17.98)

CHECK THE APPROPRIATE BOX(ES) SHOWING WHICH TYPE OF AMENDMENT IS REQUESTED:

COMP PLAN MAP

COMP PLAN TEXT

NOTE: If the amendment you are applying for is within an URBAN GROWTH AREA or you are proposing a UGA expansion of the Ellensburg, Cle Elum, or Roslyn UGA you are required to docket your item with that City as well. You must contact the appropriate City for filing deadlines, fees, application, and costs.

Please type or print clearly in ink. Attach additional sheets as necessary. Pursuant to KCC 15A.03.040, 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

- Site plan of the property with the following features (as applicable): all buildings, points of access, roads, parking areas, septic tank, drainfield, drainfield replacement area, areas to be cut and/or filled, natural features such as contours, streams, gullies, cliffs, etc.
- SEPA Checklist (if not exempt per KCC 15.04 or WAC 197-11-800)
- Project Narrative responding to Questions 9-12 on the following pages.

APPLICATION FEES:

~~\$3,170.00~~ **TEXT AMENDMENT:** Kittitas County Community Development Services (KCCDS) **-OR-**
~~\$3,460.00~~ **MAP AMENDMENT:** Kittitas County Community Development Services (KCCDS)
~~\$600.00~~ **SEPA Checklist:** Kittitas County Community Development Services (KCCDS)

Based on **Total fees due for this application** (One check made payable to KCCDS)
amendment

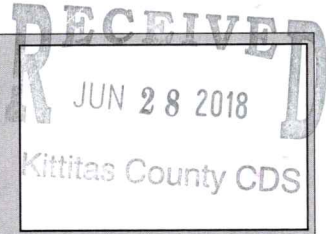
FOR STAFF USE ONLY

Application Received By (CDS Staff Signature):

DATE: 6/28/18

RECEIPT #

~~0180~~
N/A



COMMUNITY PLANNING • BUILDING INSPECTION • PLAN REVIEW • ADMINISTRATION • PERMIT SERVICES • CODE ENFORCEMENT

GENERAL APPLICATION INFORMATION

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

Landowner(s) signature(s) required on application form.

Name: Hutchinson Properties LLC
Mailing Address: P.O. Box 938
City/State/ZIP: Ellensburg WA 98926
Day Time Phone: 509 933 7050
Email Address: _____

2. Name, mailing address and day phone of authorized agent, if different from landowner of record:

If an authorized agent is indicated, then the authorized agent's signature is required for application submittal.

Agent Name: Lenny Morrison / Jeff Hutchinson
Mailing Address: P.O. Box 938
City/State/ZIP: Ellensburg WA 98926
Day Time Phone: 509 933 7050
Email Address: lmorrison@ellensburgcement.com

3. Name, mailing address and day phone of other contact person

If different than land owner or authorized agent.

Name: Jeff Slothower
Mailing Address: P.O. Box 1088
City/State/ZIP: Ellensburg WA 98926
Day Time Phone: 509 925-6916
Email Address: jslothower@lwhsd.com

4. Street address of property:

Address: 1191 Highway 10
City/State/ZIP: Ellensburg Washington 98926

5. Legal description of property (attach additional sheets as necessary):

See Attached

6. Tax parcel number: 261033 (18-18-28030-0005)

7. Property size: 58 Acres (acres)

8. Land Use Information:

Zoning: URBAN Residential Comp Plan Land Use Designation: URBAN

PROJECT NARRATIVE

(INCLUDE RESPONSES AS AN ATTACHMENT TO THIS APPLICATION)

9. Narrative **project description:** For **all** proposed Comp Plan amendments, provide the following information:
- a. Why is the amendment needed and being proposed?
 - b. How does the proposed amendment consistent with the County-Wide Planning Policies for Kittitas County?
 - c. How is the proposed amendment consistent with the Kittitas County Comprehensive Plan?
 - d. How have conditions changed that warrant a comprehensive plan amendment?
10. **Transfer of Development Rights:** According to KCC 17.13.080.2 some comprehensive plan amendments require a transfer of development rights. This process is described in KCC 17.13. Please describe whether this amendment will require transferred development rights, and if they are required, describe how this requirement will be met.
11. For **map amendments** attach the following additional information for **each** parcel involved:
- a. Parcel Information
 - i. Tax parcel number(s)
 - ii. Total Acreage
 - iii. Site Address
 - iv. Owner
 - v. Mailing Address
 - vi. Owner's Home Phone Number
 - b. Land Use Information
 - i. Current and proposed comprehensive plan designation
 - ii. Current and proposed zoning designation
 - iii. (Note: Rezone requests require separate Rezone application and fee).
 - iv. Present use of the property
 - v. Surrounding land use
 - c. Services:
 - i. Whether the site is currently served by sewer or septic
 - ii. Name of sewer purveyor (if on public sewer system).
 - iii. Whether the site is currently served by a public water system or well
 - iv. Name of water purveyor (if on public water system)
 - v. Whether the site is located on a public road or private road.
 - vi. Name of road
 - vii. Fire District
12. For **text amendments**, attach the following additional information
- a. Identify the sections of the Comprehensive Plan and Zoning Ordinance that you are proposing to change and provide the proposed wording.

AUTHORIZATION

13. Application is hereby made for A COMPREHENSIVE PLAN AMENDMENT 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.

All correspondence and notices will be transmitted to the Land Owner of Record and copies sent to the authorized agent or contact person, as applicable.

Signature of Authorized Agent:
(REQUIRED if indicated on application)

X

Date:

6/27/18

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

X

Date:

6/27/18