

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: _____

Mailing Address: _____

City/State/ZIP: _____

Day Time Phone: _____

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

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: _____

Mailing Address: _____

City/State/ZIP: _____

Day Time Phone: _____

Email Address: _____

4. Street address of property:

Address: _____

City/State/ZIP: _____

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

6. Tax parcel number: _____

7. Property size: _____ (acres)

8. Land Use Information:

Zoning: _____

Comp Plan Land Use Designation: _____

PROJECT NARRATIVE

(INCLUDE RESPONSES AS AN ATTACHMENT TO THIS APPLICATION)

- 9. **Narrative project description (include as attachment):** Please include at minimum 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.
- 10. **Describe how this proposal will provide for the transfer of any required transferrable development rights:** According to KCC 17.98.020.7.h, petitions for rezones must comply with KCC 17.13 Transfer of Development Rights. Development rights must be transferred to the rezone area at a rate proportionate to the size of the project area (see 17.13.080.6). These rights must be transferred prior to final approval. Please describe how this requirement will be met by the proposed rezone.
- 11. **Applicant for rezone must demonstrate that the following criteria are met (attach additional sheets as necessary):**
 - A. The proposed amendment is compatible with the comprehensive plan.
 - B. The proposed amendment bears a substantial relation to the public health, safety or welfare.
 - C. The proposed amendment has merit and value for Kittitas County or a sub-area of the county.
 - D. The proposed amendment is appropriate because of changed circumstances or because of a need for additional property in the proposed zone or because the proposed zone is appropriate for reasonable development of the subject property.
 - E. The subject property is suitable for development in general conformance with zoning standards for the proposed zone.
 - F. The proposed amendment will not be materially detrimental to the use of properties in the immediate vicinity of the subject property.
 - G. The proposed changes in use of the subject property shall not adversely impact irrigation water deliveries to other properties.
 - H. The proposed amendment is in full compliance with Chapter 17.13 KCC, Transfer of Development Rights.

AUTHORIZATION

- 12. 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.

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)

Date:

X  _____

7-3-2018

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

Date:

X _____
