

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

NOTICE OF APPLICATION

To:

Kittitas County Sheriff's Department

Kittitas County Fire District 2

Kittitas County Environmental Health Kittitas County Solid Waste Programs

Kittitas County Public Works

Kittitas County Enforcement and Investigation

Kittitas County Fire Marshal Kittitas School District Fairpoint Communications Kittitas Reclamation District Adjacent Property Owners

Applicant

From:

Mike Elkins, Staff Planner

Date:

February 13, 2008

Publish:

February 15, 2008 (Daily Record)

Subject:

Kittitas Heights Short Plat, File Number SP-07-69

Chuck Cruse of Cruse & Associates, authorized agent for Chason Farms LLC, landowner, submitted an application for a 4 lot Short Plat pursuant to Kittitas County Code 16.32 on approximately 8 acres of land that is zoned Rural Residential and Urban Residential, located immediately northwest of the City of Kittitas, 1/3 mile north of Kittitas Highway, ¼ mile east of Fairview Road, Ellensburg, WA, 98926, located in a portion of Section 2, T17N, R19E, WM, in Kittitas County. Map Number 17-19-02000-0030.

Please find enclosed the Short Plat application for the above referenced project and a vicinity map. The submitted application and related filed documents may be examined by the public at the Kittitas County Community Development Services office at 411 N. Ruby, Suite 2, Ellensburg, WA. 98926. Phone (509)962-7506.

Please send comments regarding the application and potential adverse environmental impacts by February 29, 2008 @5:00pm to Kittitas County Community Development Services, 411 N. Ruby, Suite 2, Ellensburg, WA., 98926, Attention: Mike Elkins, Staff Planner.

Conditional preliminary approval may be granted based on timely comments received prior to February 29, 2008.



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

SP-07-69

SHORT PLAT APPLICATION

(To divide lot into 2-4 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 <u>NOT</u> 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
Five large copies of short plat with all preliminary drawing requirements complete (reference KCC Title 16 Subdivision Code for plat drawing requirements) and one small 8.5"x11"copy.
Address list of all landowners within 300 feet of the site's tax parcel. If adjoining parcels are owned by the applicant, the 300 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.
OPTIONAL ATTACHMENTS (Optional at preliminary submittal, but required at the time of final submittal)
Certificate of Title (Title Report)
Computer lot closures
FEES:

\$190 plus \$10 per lot for Public Works Department; \$376.88 plus \$75/hr. over 4 hrs. for Environmental Health Department; \$450 for Community Development Services Department (One check made payable to KCCDS)

	FOR STAFF USE	ONLY	
I CERTIFY THAT I RECEIVED SIGNATURE:	THIS APPLICATION AND IT IS CONDATE:	MPLETE. RECEIPT#	DATE STAMP
× KU	59.07	050970	PAY OF EST
NOTES:			KITTITAS COUNTY
	Figure Comment of the		mention without at the second

1.	Name, mailing address and day phone of land owner(s) of record:			
	Name: Chason Farms	r LLC		
	Mailing Address: 110 W. 6th A	tre PMB #295		
	City/State/ZIP: Ellensburg, wi	A 98926		
	Day Time Phone: (509) 925-6			
	Email Address:	-		
2.	Name, mailing address and day phone of authorized agent (if different from land owner of record			
	Agent Name: Chuch Crose / G	inve & Assoc.		
	Mailing Address: f. 6. Box 959	·		
	City/State/ZIP: Ellensbuz, WA	4 98526		
	Day Time Phone: (509) 962-87			
	Email Address:			
3.	Contact person for application (select one): ☐ Owner of record Authorized agent All verbal and written contact regarding this application we	will be made only with the contact person.		
4.	Street address of property:			
	Address: Fair view Road City/State/ZIP: Ellensborg, was			
	City/State/ZIP: Ellensborg, w	4 98426		
5.	Legal description of property:	Parcel 4, 8tc 31 of Survey, pgs 208-209		
6.	Tax parcel number(s):			
7.	Property size: 8.60 Az.	(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):			
	4 lot short plat w/	I individual wells i repties		
9.	Are Forest Service roads/easements involved with accordes No (Circle) If yes, explain:	cessing your development?		
10.	What County maintained road(s) will the developmen	nt be accessing from?		

the information contained in this application, and the	at to the best of my knowledge and benef 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 applicat	ion is made, the right to enter the above-described location to
inspect the proposed and or completed work.	
	a a
Signature of Authorized Agent:	Date:
x	4-17-07
Signature of Land Owner of Record:	
(Required for application submittal)	Date:
V	

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

11.



