



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-07-120

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 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

- 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)

RECEIVED
 AUG 23 2007
 Kittitas County
 CDS

RECEIVED
 AUG 23 2007
 Kittitas County
 CDS

FOR STAFF USE ONLY

PAID

| | | | |
|---|-------------------|----------------------|--|
| APPLICATION RECEIVED BY SIGNATURE: | DATE: 11/01/07 | RECEIPT #: 052342 | |
| 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: Lynn Romans
 Mailing Address: 12180 Teanaway Road
 City/State/ZIP: Cle Elum, WA 98922
 Day Time Phone: 425-736-6920
 Email Address: lrwa@att.net

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

Agent Name: George Faucher
 Mailing Address: 311 CONNERS AV
 City/State/ZIP: NAPLES, FL 34108
 Day Time Phone: 239 269 9687
 Email Address: GPFaucher@EARTHLink.NET

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: _____
 City/State/ZIP: _____

5. Legal description of property:

See attached

6. Tax parcel number(s): 20-17-30030-0014

7. Property size: 12.01 Ac. (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):

See attached

9. Are Forest Service roads/casements involved with accessing your development? Yes (explain) No

10. What County maintained road(s) will the development be accessing from?
N/A

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.

Signature of Authorized Agent:

Date:

X

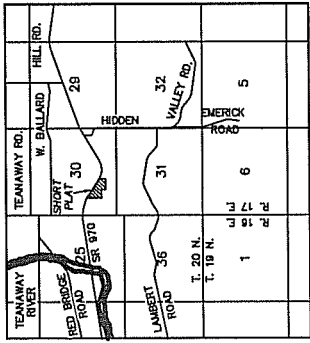
Signature of Land Owner of Record:
(Required for application submittal)

Date:

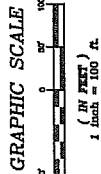
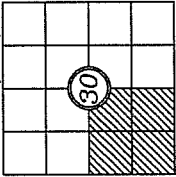
X

LOW RIDGE SHORT PLAT

SP-07-XX



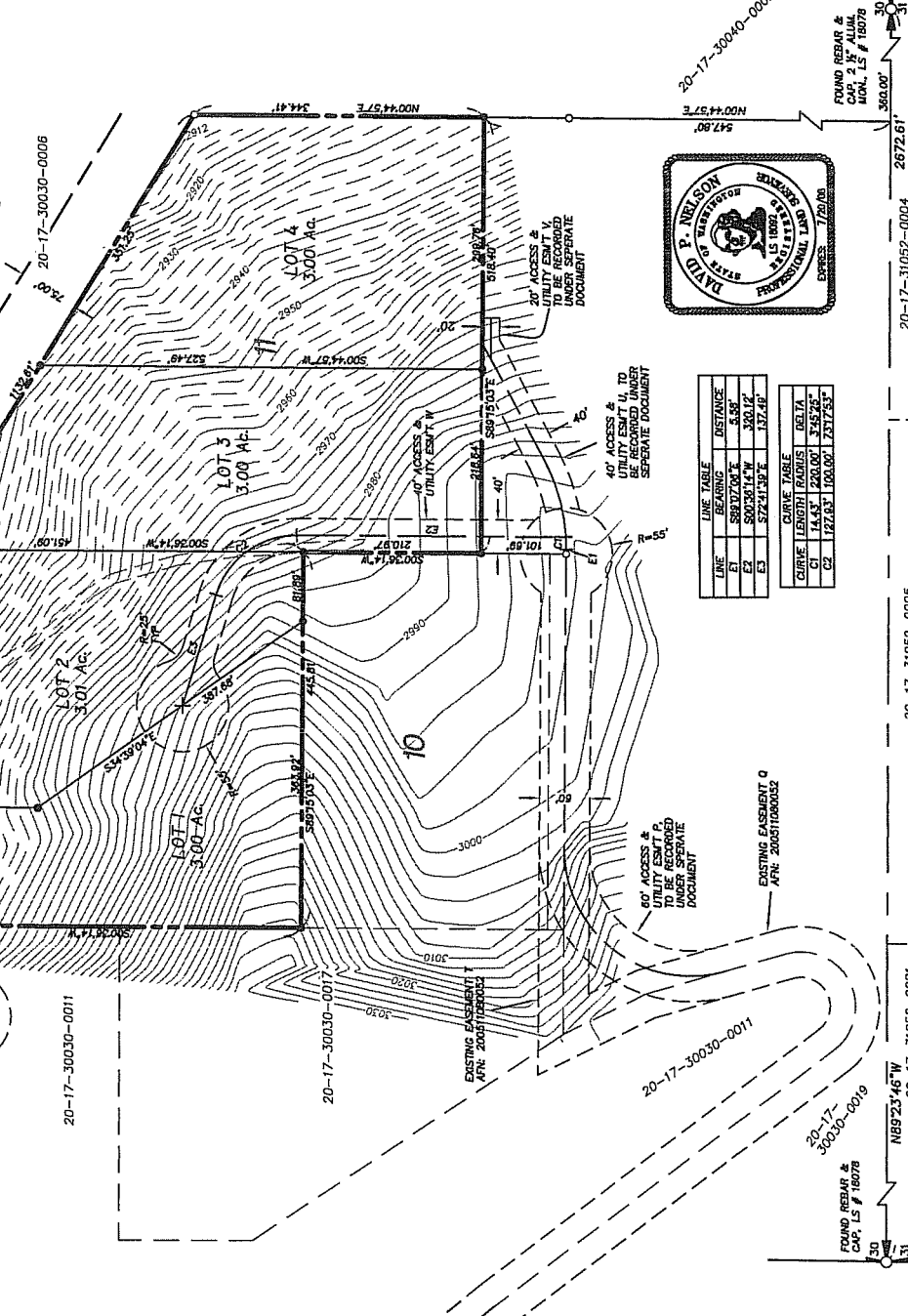
INDEX LOCATION:
SEC. 30 T. 20N. R. 17E. W.M.



LEGEND
 CLOSING CORNER, AS NOTED
 QUARTER CORNER, AS NOTED
 SET 1/2" REBAR & CAP
 FOUND REBAR & CAP

VICINITY MAP ~ NTS

SP 870
 SP 872
 SP 874
 SP 876
 SP 878
 SP 880
 SP 882
 SP 884
 SP 886
 SP 888
 SP 890
 SP 892
 SP 894
 SP 896
 SP 898
 SP 900



| LINE | TABLE | DISTANCE |
|------|-------------|----------|
| E1 | S80°37'20"E | 5.94' |
| E2 | S00°30'14"W | 320.12' |
| E3 | S72°41'25"E | 137.48' |

| CURVE | LENGTH | RADIUS | DELTA |
|-------|---------|----------|-----------|
| C1 | 14.53' | 220.00' | 3.54°33" |
| C2 | 127.48' | 1168.00' | 17.57°35" |

APPROVALS

KITTITAS COUNTY PUBLIC WORKS

EXAMINED AND APPROVED This ____ day of _____ A.D., 20____

Kittitas County Engineer

COUNTY PLANNING DIRECTOR

I hereby certify that the "LOW RIDGE" Short Plat has been examined by me and find that it conforms to the comprehensive plan of the Kittitas County Planning Commission. Dated this ____ day of _____ A.D., 20____

Kittitas County Planning Director

KITTITAS COUNTY HEALTH DEPARTMENT

Preliminary inspection indicates that the plat allows use of existing sewer lines and areas of sewage disposal for some, but not necessarily all building sites within this short plat. Prospective purchasers of lots are urged to make inquiries at the County Health Department about issuance of septic tank permits for lots. Dated this ____ day of _____ A.D., 20____

Kittitas County Health Officer

CERTIFICATE OF COUNTY TREASURER

I hereby certify that the taxes and assessments are paid for the preceding years and for this year in which the plat is now to be filed. Dated this ____ day of _____ A.D., 20____

Kittitas County Treasurer

ORIGINAL TAX PARCEL NO. 20-17-30030-0014 (949641)

RECORDER'S CERTIFICATE

Filed for record this ____ day of _____ 20____ at _____ M in book _____ of _____ at page _____ at the request of
 DAVID P. NELSON
 Surveyor's Name
 HERALD V. PEITZ
 Deputy County Auditor

RECORDER'S CERTIFICATE

RECORDER'S CERTIFICATE

DAVID P. NELSON
 Certificate No. 181082

SURVEYOR'S CERTIFICATE

This map correctly represents a survey made by me or under my direction in conformance with the requirements of the Survey Recording Act at the request of... TOWN ROMANS... in... JULY... 2007.

DAVID P. NELSON
 Certificate No. 181082

K.C.S.P. NO. 07-XX

A PORTION OF THE SOUTHWEST 1/4 SEC. 30, TOWNSHIP 20 NORTH, RANGE 17 EAST, W.M. KITTITAS COUNTY, WASHINGTON

DWN BY D. PIERCE DATE 7/2007 JOB NO. 08153

CHKD BY D. NELSON SCALE 1"=100' SHEET 1 OF 2



108 EAST 2ND STREET
 CLE ELUM, WA 98922
 PHONE: (509) 674-7433
 FAX: (509) 674-7419

FOUND REBAR & CAP, 1/2" ALUM. W/CL, LS # 18078

EXISTING EASEMENT 0 AFR. 200811060052

FOUND REBAR & CAP, 1/2" ALUM. W/CL, LS # 18078

20-17-30030-0002
 20-17-30030-0004
 20-17-31052-0005
 20-17-31052-0001
 20-17-30030-0016
 20-17-30030-0017
 20-17-30030-0018
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 20-17-30030-0030