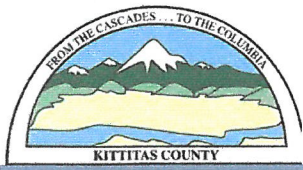


SP-11-00010



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"



SHORT PLAT APPLICATION
(To divide a lot into no more than 4 lots, according to KCC 16.32)

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

- 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.
- Project Narrative responding to Questions 9-11 on the following pages.

OPTIONAL ATTACHMENTS

(Optional at submittal, required at the time of final submittal)

- Certificate of Title (Title Report)
- Computer lot closures

APPLICATION FEES:

\$720.00	Kittitas County Community Development Services (KCCDS)
\$220.00	Kittitas County Department of Public Works
\$130.00	Kittitas County Fire Marshal
\$380.00	Public Health Proportion (Additional fee of \$75/hour over 4 hours)
\$1,450.00	Total fees due for this application (One check made payable to KCCDS)

FOR STAFF USE ONLY

Application Received By (CDS Staff Signature): 	DATE: 	RECEIPT # 	
DATE STAMP IN BOX			

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: Roger Hoff
Mailing Address: 4410 Thorp Cemetery Rd
City/State/ZIP: Thorp, WA 98946-9573
Day Time Phone: (360) 317-8250
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: Chuck Cruise/ Cruise Assoc.
Mailing Address: P.O. Box 959
City/State/ZIP: Ellensburg, WA 98926
Day Time Phone: (509) 962-8242
Email Address: _____

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: 4410 Thorp Cemetery Rd.
City/State/ZIP: Thorp, WA 98946

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

pt. N 1/2 of Section 9, T. 18 N., R. 17 E., W.M.

6. **Tax parcel number(s):** 335933 & 101836

7. **Property size:** 35.21 Ac. (acres)

8. **Land Use Information:**

Zoning: Ag-20 Comp Plan Land Use Designation: Rural

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.
3 lot short plat w/ individual wells & septic
10. **Are Forest Service roads/easements involved with accessing your development?** If yes, explain. *No*
11. **What County maintained road(s) will the development be accessing from?**

Thorp Cemetery Rd.

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 *Charles A. Cuneo*

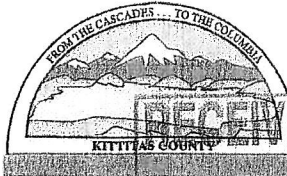
9-16-11

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

Date:

X *Royce Hoff*

9-19-11



KITTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

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

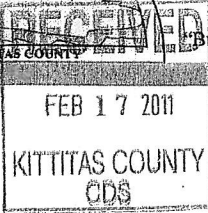
CDS@CO.KITTITAS.WA.US

Office (509) 962-7506

Fax (509) 962-7682

SP-11-00010

"Building Partnerships - Building Communities"



PA-11-00003

DATE: 02-17-11

FEE: \$125.00



REQUEST FOR PARCEL HISTORY

Name: Roger Hoff c/o Cause & Assoc.

Address: PO Box 959
Ellensburg WA 98926

Phone Number: 962-8242

Parcel Number: 101836 & 335933-18-17-09010-0008 + 18-17-09010-0002

Information Needed: Can this be split

For Staff Use:

Card Number(s): 7160 & 7160-3

Zoning Classification: AGRICULTURE Z0

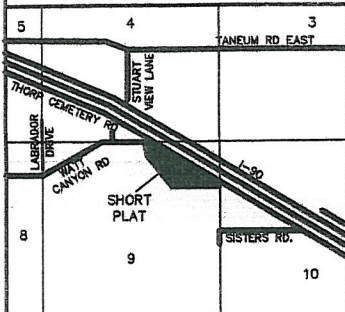
Staff Notes:
 Neither parcel has been segregated or short plotted according to Assessor's records both parcels over 3 acres
 Both parcels are eligible for one-time split provision allowed for in KCC 17.29.040 (A)(1)

Staff Reviewer: [Signature] Date: 3/9/2011

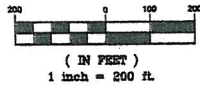
The Kittitas County Community Development Services Department does not guarantee a parcel eligible for development until such time as a complete and accurate application is submitted

CDS FORMS\PLANNING\LAND USE APP\NEW 2008 LAND USE APP\REQUEST FOR PARCEL HISTORY
UPDATED: 10/17/08

VICINITY MAP



HOFF SHORT PLAT
PART OF SECTION 9, T. 18 N., R. 17 E., W.M.
KITITAS COUNTY, WASHINGTON



- LEGEND**
- SET 5/8" REBAR W/ YELLOW CAP - "CRUSE 18078"
 - FOUND PIN & CAP
 - ⊕ FOUND ENCASED MONUMENT
 - ⊙ FOUND NAIL & WASHER
 - x— FENCE
 - ⊙ WELL

APPROVALS

KITITAS COUNTY DEPARTMENT OF PUBLIC WORKS
EXAMINED AND APPROVED THIS _____ DAY OF _____ A.D., 201__

KITITAS COUNTY ENGINEER

KITITAS COUNTY HEALTH DEPARTMENT
PRELIMINARY INSPECTION INDICATED SOIL CONDITIONS MAY ALLOW USE OF ON SITE SEWAGE SYSTEMS AS A TEMPORARY MEANS 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 ON SITE SEWAGE DISPOSAL PERMITS FOR LOTS.

DATED THIS _____ DAY OF _____ A.D., 201__

KITITAS COUNTY HEALTH OFFICER

CERTIFICATE OF COUNTY PLANNING DIRECTOR
I HEREBY CERTIFY THAT THE HOFF SHORT PLAT HAS BEEN EXAMINED BY ME AND FIND THAT IT CONFORMS TO THE COMPREHENSIVE PLAN OF THE KITITAS COUNTY PLANNING COMMISSION.

DATED THIS _____ DAY OF _____ A.D., 201__

KITITAS COUNTY PLANNING DIRECTOR

CERTIFICATE OF KITITAS 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. PARCEL NO. 18-17-09010-0008 & 18-17-09010-0002

DATED THIS _____ DAY OF _____ A.D., 201__

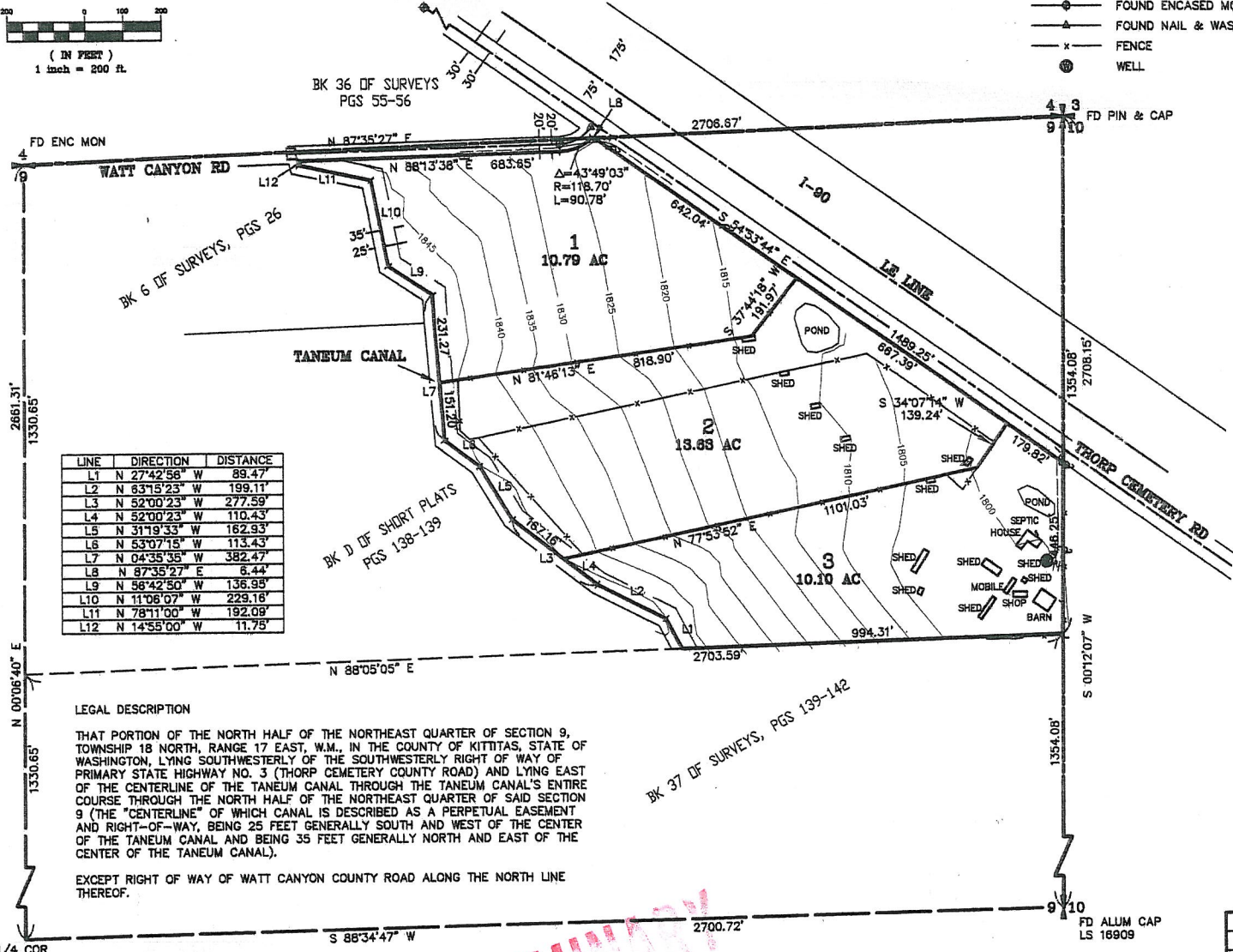
KITITAS COUNTY TREASURER

NAME AND ADDRESS - ORIGINAL TRACT OWNERS

NAME: ROGER HOFF
ADDRESS: 4410 THORP CEMETERY ROAD
THORP, WA 98946-9573
PHONE: (509) 984-2100

EXISTING ZONE: AG-20
SOURCE OF WATER: INDIVIDUAL WELLS
SEWER SYSTEM: ON SITE SEWAGE SYSTEMS
STORM WATER: NO IMPROVEMENTS PER THIS APP.
WIDTH AND TYPE OF ACCESS: COUNTY ROAD R/W
NO. OF SHORT PLATTED LOTS: THREE (3)
SCALE: 1" = 200'

SUBMITTED ON: _____
AUTOMATIC APPROVAL DATE: _____
RETURNED FOR CAUSE ON: _____



LINE	DIRECTION	DISTANCE
L1	N 27°42'58" W	89.47'
L2	N 63°15'23" W	199.11'
L3	N 52°00'23" W	277.59'
L4	N 52°00'23" W	110.43'
L5	N 31°19'33" W	162.93'
L6	N 53°07'15" W	113.43'
L7	N 04°35'35" W	382.47'
L8	N 87°35'27" E	6.44'
L9	N 56°42'50" W	136.95'
L10	N 11°08'07" W	229.16'
L11	N 78°11'00" W	192.09'
L12	N 14°55'00" W	11.75'

LEGAL DESCRIPTION

THAT PORTION OF THE NORTH HALF OF THE NORTHEAST QUARTER OF SECTION 9, TOWNSHIP 18 NORTH, RANGE 17 EAST, W.M., IN THE COUNTY OF KITITAS, STATE OF WASHINGTON, LYING SOUTHWESTERLY OF THE SOUTHWESTERLY RIGHT OF WAY OF PRIMARY STATE HIGHWAY NO. 3 (THORP CEMETERY COUNTY ROAD) AND LYING EAST OF THE CENTERLINE OF THE TANEUM CANAL THROUGH THE TANEUM CANAL'S ENTIRE COURSE THROUGH THE NORTH HALF OF THE NORTHEAST QUARTER OF SAID SECTION 9 (THE "CENTERLINE" OF WHICH CANAL IS DESCRIBED AS A PERPETUAL EASEMENT AND RIGHT-OF-WAY, BEING 25 FEET GENERALLY SOUTH AND WEST OF THE CENTER OF THE TANEUM CANAL AND BEING 35 FEET GENERALLY NORTH AND EAST OF THE CENTER OF THE TANEUM CANAL).

EXCEPT RIGHT OF WAY OF WATT CANYON COUNTY ROAD ALONG THE NORTH LINE THEREOF.

C 1/4 COR
FD ALUM CAP
LS 16909

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 ROGER HOFF in MARCH of 2011.

Charles A. Cruse, Jr. 9-16-11
CHARLES A. CRUSE, JR. License No. 18078
Professional Land Surveyor DATE

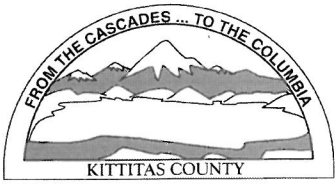


AUDITOR'S CERTIFICATE

Filed for record this _____ day of _____
2011, at _____ M., in Book K of Short Plats
at page(s) _____ at the request of Cruse & Associates.
RECEIVING NO. _____
JERALD V. PETTIT by _____
KITITAS COUNTY AUDITOR

CRUSE & ASSOCIATES
PROFESSIONAL LAND SURVEYORS
217 E. Fourth St. Ellensburg, WA 98926
P.O. Box 959 (509) 982-8242

HOFF SHORT PLAT



KITTITAS COUNTY PERMIT CENTER
411 N. RUBY STREET, ELLENSBURG, WA 98926

RECEIPT NO.: 00012251

COMMUNITY DEVELOPMENT SERVICES
(509) 962-7506

PUBLIC HEALTH DEPARTMENT
(509) 962-7698

DEPARTMENT OF PUBLIC WORKS
(509) 962-7523

Account name: 017839

Date: 9/20/2011

Applicant: ROGER HOFF

Type: check # 9230

<u>Permit Number</u>	<u>Fee Description</u>	<u>Amount</u>
SP-11-00010	CDS FEE FOR SHORT PLAT	720.00
SP-11-00010	EH SHORT PLAT FEE	380.00
SP-11-00010	PUBLIC WORKS SHORT PLAT FEE	220.00
SP-11-00010	FIRE MARSHAL SHORT PLAT FEE	130.00
	Total:	1,450.00