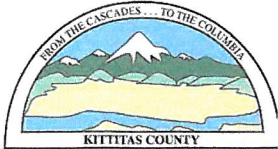


JP-11-00014



**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"

10/19/11 ok for  
submittal by  
Dan. (M)

**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)
<b>\$1,450.00</b>	<b>Total fees due for this application (One check made payable to KCCDS)</b>

**FOR STAFF USE ONLY**

Application Received By (CDS Staff Signature): 	DATE: <u>10/19/11</u>	RECEIPT # <u>12680</u>	<div style="border: 2px solid black; padding: 5px; width: fit-content; margin: auto;"> <p style="font-size: 1.2em; margin: 0;"><b>RECEIVED</b></p> <p style="margin: 0;">OCT 19 2011</p> <p style="margin: 0;">KITTTITAS COUNTY</p> <p style="margin: 0; font-size: 0.8em;">CDS</p> <p style="margin: 0; font-size: 0.8em;">DATE STAMP IN BOX</p> </div>
--	--------------------------	---------------------------	--

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: Godzilla Thorp LLC  
Mailing Address: P.O. Box 1397  
City/State/ZIP: Tacoma, WA 98401  
Day Time Phone: 925-3827  
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: Chris Cruse  
Mailing Address: P.O. Box 959  
City/State/ZIP: Ellensburg, WA 98926  
Day Time Phone: 962-8242  
Email Address: cruseandassoc@kvalley.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):**

Portion of the NW 1/4 of S 13, T 18 N, R 17 E, WM as per book 37 of surveys at page 133

**6. Tax parcel number(s):** 18-17-13020-0003

**7. Property size:** 3.53 Acres (acres)

**8. Land Use Information:**

Zoning: Highway-Commercial      Comp Plan Land Use Designation: Commercial

**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. *All defined on application map.*
- 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?** *Gladmar 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)

X Chris Cruise

Date:

8/18/2011

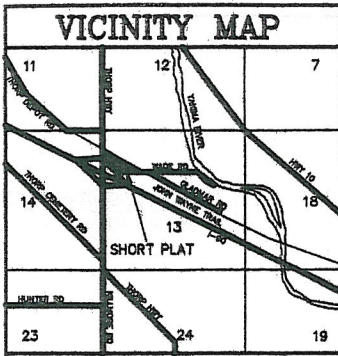
Signature of Land Owner of Record  
(Required for application submittal):

X William Rowley

Date:

10/17/11

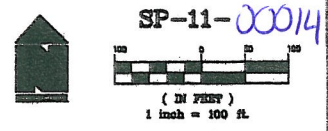




# GODZILLA SHORT PLAT

## PART OF SECTION 13, T. 18 N., R. 17 E., W.M.

### KITTTAS COUNTY, WASHINGTON



- LEGEND**
- SET 5/8" REBAR W/ CAP - "CRUSE 38815"
  - FOUND PIN & CAP
  - FENCE

### APPROVALS

KITTTAS COUNTY DEPARTMENT OF PUBLIC WORKS  
 EXAMINED AND APPROVED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ A.D., 201\_\_

KITTTAS COUNTY ENGINEER

KITTTAS 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\_\_

KITTTAS COUNTY HEALTH OFFICER

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

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ A.D., 201\_\_

KITTTAS COUNTY PLANNING DIRECTOR

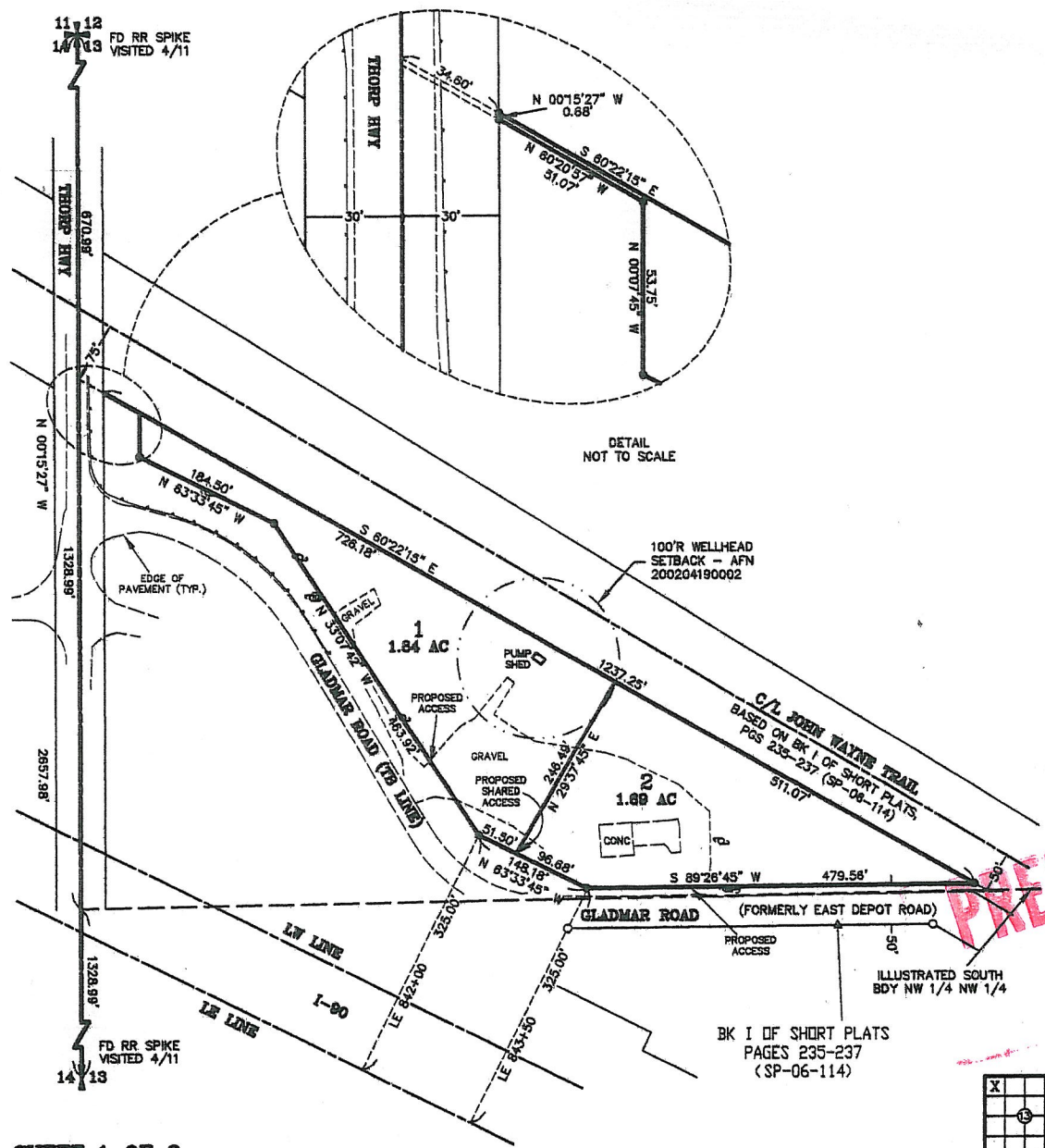
CERTIFICATE OF KITTTAS COUNTY TREASURER  
 I HEREBY CERTIFY THAT THE TAXES AND ASSESSMENTS ARE PAID FOR THE PRECEDING YEARS AND FOR THIS YEAR IN WHICH THE PLAT IS NOW TO BE FILED. PARCEL NO. 18-17-13020-0003

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ A.D., 201\_\_

KITTTAS COUNTY TREASURER

NAME AND ADDRESS - ORIGINAL TRACT OWNERS  
 NAME: GODZILLA THORP LLC  
 ADDRESS: P.O. BOX 1397 TACOMA, WA 98401  
 PHONE: (509) 925-3927  
 EXISTING ZONE: HIGHWAY COMMERCIAL  
 SOURCE OF WATER: SHARED WELL  
 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: TWO (2)  
 SCALE: 1" = 100'

SUBMITTED ON: \_\_\_\_\_  
 AUTOMATIC APPROVAL DATE: \_\_\_\_\_  
 RETURNED FOR CAUSE ON: \_\_\_\_\_



**RECEIVED**

OCT 19 2011

KITTTAS COUNTY  
CDS

**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: \_\_\_\_\_  
 KITTTAS COUNTY AUDITOR

**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 GODZILLA THORP LLC in AUGUST of 2011.

PRELIMINARY

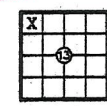
*Chris Cruse*  
 CHRISTOPHER C. CRUSE  
 Professional Land Surveyor  
 License No. 38815  
 10/19/2011

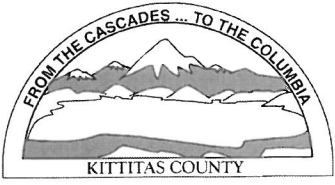
DATE



**CRUSE & ASSOCIATES**  
 PROFESSIONAL LAND SURVEYORS  
 217 E. Fourth St. P.O. Box 959  
 Ellensburg, WA 98928 (509) 982-8242

**GODZILLA SHORT PLAT**





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

**RECEIPT NO.:** 00012680

COMMUNITY DEVELOPMENT SERVICES  
(509) 962-7506

PUBLIC HEALTH DEPARTMENT  
(509) 962-7698

DEPARTMENT OF PUBLIC WORKS  
(509) 962-7523

**Account name:** 024803

**Date:** 10/19/2011

**Applicant:** GODZILLA THORP LLC

**Type:** check # 15645

<u>Permit Number</u>	<u>Fee Description</u>	<u>Amount</u>
SP-11-00014	CDS FEE FOR SHORT PLAT	720.00
SP-11-00014	EH SHORT PLAT FEE	380.00
SP-11-00014	PUBLIC WORKS SHORT PLAT FEE	220.00
SP-11-00014	FIRE MARSHAL SHORT PLAT FEE	130.00
	Total:	1,450.00