KITTITAS COUNTY

KITTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

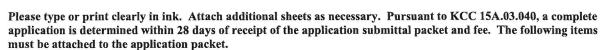
411 N. Ruby St., Suite 2, Ellensburg, WA 98926 CDS@CO.KITTITAS.WA.US Office (509) 962-7506

Fax (509) 962-7682

SP.11-1001S

"Building Partnerships - Building Communities"

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



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)

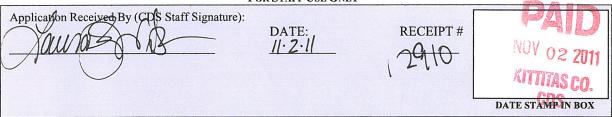
Computer lot closures



APPLICATION FEES:

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

FOR STAFF USE ONLY



COMMUNITY PLANNING • BUILDING INSPECTION • PLAN REVIEW • ADMINISTRATION • PERMIT SERVICES • CODE ENFORCEMENT

FORM LAST REVISED:04-21-11 Page 1 of 3

GENERAL APPLICATION INFORMATION

1.		nailing address and day phone of land owner(s) of record: ner(s) signature(s) required on application form.			
	Name:	Paul Carlson			
	Mailing Address:	700 Camozzy Road			
	City/State/ZIP:	Ellensburg, WA 98926			
	Day Time Phone:	968-3516			
	Email Address:				
2.		iling address and day phone of authorized agent, if different from landowner of record: rized 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 a If different than land owner	nd day phone of other contact person er or authorized agent.			
	Name:	Pam Haggin			
	Mailing Address:	700 Pheasant Crest Dr.			
	City/State/ZIP:	Yakima, WA 98908			
	Day Time Phone:	509-961-8910			
	Email Address:	PHaggin@whopper.com			
4.	Street address of propert	ty:			
	Address:	700 Camozzy Road			
	City/State/ZIP:	Ellensburg, WA 98926			
5.	Legal description of prop Portion of the SE 1/4	perty (attach additional sheets as necessary): of \$7, 1.17 N., R. 20 E., W.M. See application m	ap for full description.		
6.	Tax parcel number(s): _1	7-20-07040-0010			
7.	Property size: 10.36		(acres)		
8.	Land Use Information:				
	Zoning: AG-20	Comp Plan Land Use Designation: Rura	al		

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 information on application map
- 10. Are Forest Service roads/easements involved with accessing your development? If yes, explain.
- What County maintained road(s) will the development be accessing from?

 AUTHORIZATION 11.

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:	Date:		
(REQUIRED if indicated on application)	10/31/2011		
Signature of Land Owner of Record	Date:		
(Required for application submittal):	alda		

KITTITAS COUNTY ENGINEER

KITTITAS COUNTY HEALTH DEPARTMENT

PREJUMARY INSPECTION INDICATED SOIL CONDITIONS MALLOW USE OF ON SITE SEWAGE SYSTEMS AS A TEMPORARY MEANS OF SEWAGE DISPOSAL FOR SOME BUT NOT INCESSABILY 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___

KITTITAS COUNTY HEALTH OFFICER

CERTIFICATE OF COUNTY PLANNING DIRECTOR

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

DATED THIS ____ DAY OF ______ A.D., 201_

KITTITAS COUNTY PLANNING DIRECTOR

CERTIFICATE OF KITTITAS 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. 17-20-07040-0010

DATED THIS ____ DAY OF ______ A.D., 201___

KITTITAS COUNTY TREASURER

NAME AND ADDRESS - ORIGINAL TRACT OWNERS

NAME: PAUL CARLSON & PATSY CARLSON
ADDRESS: 700 CAMOZZY ROAD

700 CAMOZZY ROAD ELLENSBURG, WA 98926

PHONE: (509) 988-3516

EXISTING ZONE: AG-20
SOURCE OF WATER: INDIVIDUAL WELLS
SEWER SYSTEM: ON SITE SEWACE 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" = 200'

SHEET 1 OF 2

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

CARLSON SHORT PLAT PART OF SECTION 7, T. 17 N., R. 20 E., W.M. KITTITAS COUNTY, WASHINGTON

License No. 38815





LEGEND

— SET 5/8" REBAR W/ CAP

PROFESSIONAL LAND SURVEYORS

CARLSON SHORT PLAT

P.O. Box 959

(509) 962-8242

217 E. Fourth St.

Ellensburg, WA 98926

C 1/4 COR CALC.		N 89"45'00" E		·642.25*			- FOUND PIN & CAP - FOUND ENCASED MONUMENT - FENCE
7					encontrol encontrol	7 1301.29	
1275,27' N 01'32'45"		S 89'41'21" E		2647.30'	H DELTA	S 01'44'13"	
A				C1 2960.00' 443.00 C2 2960.00' 434.4' C3 2960.00' 8.59	08'34'30" 08'24'32" 00'09'58" DISTANCE 130.60'	3" E	
MW 0+92.26 LE 1682+05 - MW 0+01.32 1275.27 2580.53'	MW 7+54.38	337 P1	K A A 91.69+7681	NOTE: THE LOCATIONS OF I—9 AND CAMOZZY ROAD (MW LINE ON THE EXSTING I—90 (LE LIN AND WSDOT PLANS — SR 90, ROAD TO RENSLOW — APPROV	16.32' 70,23' 208.04' O (LE LINE)) ARE BASED E) MONUMENTS SR 82 BULL RO ED FEB. 8, 1967	2602.58' 1301.29'	
205'R-	N 85'36'00' E 654.36'	20' OFFSET	C OCCUPATION	OAD (MW LINE) 7	•		
20.02' L1 L 18 0 1/2" REBAR SITED 2/10	8.00 AC 1152.43'	N 89°07′50″ W	4.36 AC 826.16'	SHEDIS ILLA 1720 DRAINFIELD LA 1720 2852.60'	654.00*		O CONC PILLAR SITED 2/10
RECE NOV O	IVED 35 OF SURVEYS	, Pus 17-18	A		File 20 at		day of
KITTITA:S CD	SURVEYOR'S CERTIFIED This map correctly represent our dear my direction in requirements of the Surrequest of PAUL CARLS	CATE sents a survey made by me conformance with the vey Recording Act at the pN in OCTOBER of 2011.		AK Y	JEF KIT	RALD V. PETRIT BY. TRITAS COUNTY AUDITOR CRUSE: &	



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

RECEIPT NO.:

00012910

COMMUNITY DEVELOPMENT SERVICES

(509) 962-7506

PUBLIC HEALTH DEPARTMENT (509) 962-7698

DEPARTMENT OF PUBLIC WORKS

(509) 962-7523

Account name:

021592

Date: 11/2/2011

Applicant:

CARLSON, PAUL L &

Type:

check # 4691

Permit Number	Fee Description	Amount
SP-11-00015	CDS FEE FOR SHORT PLAT	720.00
SP-11-00015	EH SHORT PLAT FEE	380.00
SP-11-00015	PUBLIC WORKS SHORT PLAT FEE	220.00
SP-11-00015	FIRE MARSHAL SHORT PLAT FEE	130.00
	Total:	1,450.00