

KITTITAS COUNTY DEPARTMENT OF PUBLIC WORKS

TRANSPORTATION CONCURRENCY MANAGEMENT APPLICATION

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Required attachments:		ž	
Site map showing access locations		OCT 1 5 2014	
		KITTITAS COUN	IT
	FOR STAFF USE ONLY:	CDS	
APPLICATION RECEIVED BY:	DATE:	DATE STAMP HERE	
1. Name, mailing address and day phone o	f land owner(s) of record:		
Name: PHOENIX UNITED PROPERTIES L	.LP		
Mailing Address: 1302 HIGHWAY 28			
City/State/ZIP: EPHRATA WA 98823			
Day Time Phone: (509) 754-4176		<u></u>	
Email Address: joe.whalen@unitedrightofwa	ay.com		
2. Name, mailing address and day phone of Agent Name: ENCOMPASS ENGINEERING 8			
Mailing Address: 108 EAST SECOND S			
City/State/ZIP: CLE ELUM, WA 98922	11(22)		
Day Time Phone: 509-674-7433		-	
Email Address: DPNELSON@ENCOMF	PASSES.NET		
3. Contact person for application (select or	ne): Owner of record	Authorized agent	
4. Street address of property: ROZA VIEW	DRIVE, YAKIMA, WA		
5. Tax parcel number(s): 244133 (15-19-21	000-0016) & 604133 (15-19-	22000-0027)	
6. Roads serving project: ROZA VIEW DR	IVE		
7. Plat or project name: SUN DOG SHORT	PLAT		
411 North Ruby Street, Suite 1		TEL (509) 962-7523	

Kittitas County Department of Public Works
8. Proposed Land Use: Residential Commercial Agricultural
9. Proposed Land Use Project: Short Plat Long Plat Building Permit Other:
10. Total number of lots/dwelling units: 4
11. Commercial/Agricultural building area in square feet: N/A
12. Narrative project description:
4 LOT SHORT PLAT
13. Describe present use of property: RESIDENTIAL USE
13. 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 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.
14. Are there any other pending applications or issues associated with this property?
☐ Yes ☐ No If yes, describe:
Signature of Authorized Agent: Date:
Signature of Land Owner of Record (Required for application submittel):
x / 1 managing 10/8/2014
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