

SX-26-00009



# KITTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

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

"Building Partnerships – Building Communities"

## SHORELINE EXEMPTION PERMITTING

(For projects located within 200 feet of a body of water and/or associated floodway and wetlands under the jurisdiction of the Shoreline Master Program)

### REQUIRED INFORMATION / ATTACHMENTS

- A scaled site plan is required showing **location of all** structures (including decks), driveways/impervious surfaces, well, septic, propane tanks, fences, etc. and proposed uses and distances from property lines, river, and Horizontal distance from OHWM. To show the Horizontal distance a profile view from the OHWM to the edge of structure/activity shall also be shown.
- Include JARPA or HPA forms *if required* for your project by a state or federal agency.
- SEPA Checklist, if not exempt per WAC 197-11-800.
- VSP sponsored fish hatchery enhancement project: please provide documentation signed by the current VSP coordinator for verification. (CDS & PW fees are waived for these projects\*\*)

\*\*\*Please note a Shoreline Variance or Shoreline Conditional Use Permit may also be required. See Kittitas County Shoreline Master Program\*\*\*

### APPLICATION FEES:

\$600.00 Kittitas County Community Development Services\*\*

\$550.00 Kittitas County Public Works\*\*

\$1,150.00 Fees due for this application when SEPA is not required\*\*

\$2,960.00 Fees due for this application when SEPA (\$1,810.00) is required\*\* (One check made payable to KCCDS)

### FOR STAFF USE ONLY

Application Received By (CDS Staff Signature):

Jessie Rosenow

DATE:  
6/1/26

RECEIPT #

CD26-01080

KITTITAS CO CDS  
RECEIVED  
06/01/2026

DATE STAMP IN BOX

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

FORM LAST REVISED: 01-03-2023

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**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: Robert & Rebecca Snaddon  
Mailing Address: 460 Yakima River Dr  
City/State/ZIP: Ellensburg WA 98926  
Day Time Phone: 425-446-1981  
Email Address: rkjoyful56@gmail.com

**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: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Day Time Phone: \_\_\_\_\_  
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: 460 Yakima River Dr.  
City/State/ZIP: Ellensburg WA 98926

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

see site plan

6. Tax parcel number(s): 951888

7. Property size: 5 acres (acres)

**Project Description**

1. Briefly summarize the purpose of the project:

Camping Shelter  
\_\_\_\_\_  
\_\_\_\_\_

2. What is the primary use of the project (e.g. Residential, Commercial, Public, Recreation)?

recreation  
\_\_\_\_\_

3. What is the specific use of the project (e.g. single family home, subdivision, boat launch, restoration project)?

Single family picnic shelter  
\_\_\_\_\_

4. Fair Market Value of the project, including materials, labor, machine rentals, etc. \$100,000.

5. Anticipated start and end dates of project construction: Start July 5-2026 ~~End~~ 1 year

**Authorization**

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 \_\_\_\_\_

\_\_\_\_\_

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

Date:

X Rebecca Gradson

June 1, 2026

[Signature] 6-1-26.

FOR STAFF USE ONLY

1. Provide section, township, and range of project location:

¼ Section 1st Section 2 Township 18 N. Range 17 E., W.M.  
NW

2. Latitude and longitude coordinates of project location (e.g. 47.03922 N lat. / -122.89142 W long.):  
\_\_\_\_\_ [use decimal degrees – NAD 83]

3. Type of Ownership: (check all that apply)

Private                       Federal                       State                       Local                       Tribal

4. Land Use Information:

Zoning: residential                      Comp Plan Land Use Designation: \_\_\_\_\_

5. Shoreline Designation: (check all that apply)

Urban Conservancy                       Shoreline Residential                       Rural Conservancy  
 Natural                       Aquatic

6. Requested Shoreline Exemption per WAC 173.27.040:  
\_\_\_\_\_

Vegetation

7. Will the project result in clearing of tree or shrub canopy?

Yes                       No

If 'Yes', how much clearing will occur? \_\_\_\_\_ (square feet and acres)

8. Will the project result in re-vegetation of tree or shrub canopy?

Yes                       No

If 'Yes', how much re-vegetation will occur? \_\_\_\_\_ (square feet and acres)

Wetlands

9. Will the project result in wetland impacts?

Yes                       No

If 'Yes', how much wetland will be permanently impacted? \_\_\_\_\_ (square feet and acres)

10. Will the project result in wetland restoration?

Yes                       No

If 'Yes', how much wetland will be restored? \_\_\_\_\_ (square feet and acres)

**Impervious Surfaces**

**11. Will the project result in creation of over 500 square feet of impervious surfaces?**

- Yes  No

**If 'Yes', how much impervious surface will be created? \_\_\_\_\_ (square feet and acres)**

**12. Will the project result in removal of impervious surfaces?**

- Yes  No

**If 'Yes', how much impervious surface will be removed? \_\_\_\_\_ (square feet and acres)**

**Shoreline Stabilization**

**13. Will the project result in creation of structural shoreline stabilization structures (revetment/bulkhead/riprap)?**

- Yes  No

**If 'Yes', what is the net linear feet of stabilization structures that will be created? \_\_\_\_\_**

**14. Will the project result in removal of structural shoreline stabilization structures (revetment/bulkhead/riprap)?**

- Yes  No

**If 'Yes', what is the net linear feet of stabilization structures that will be removed? \_\_\_\_\_**

**Levees/Dikes**

**15. Will the project result in creation, removal, or relocation (setting back) of levees/dikes?**

- Yes  No

**If 'Yes', what is the net linear feet of levees/dikes that will be created? \_\_\_\_\_**

**If 'Yes', what is the net linear feet of levees/dikes that will be permanently removed? \_\_\_\_\_**

**If 'Yes', what is the linear feet of levees/dikes that will be reconstructed at a location further from the OHWM? \_\_\_\_\_**

**Floodplain Development**

**16. Will the project result in development within the floodplain? (check one)**

- Yes  No

**If 'Yes', what is the net square feet of structures to be constructed in the floodplain? \_\_\_\_\_**

*\*Note: A floodplain development is required per KCC 14.08; please contact Kittitas County Public Works*

**17. Will the project result in removal of existing structures within the floodplain? (check one)**

- Yes  No

**If 'Yes', what is the net square footage of structures to be removed from the floodplain? \_\_\_\_\_**

