

EXECUTE:DEPARTMENT OF PUBLIC WORKS

ROAD STANDARDS VARIANCE APPLICATION

Application must be received by the last day of the month to be included on the next month's agenda.

NON REFUNDABLE FEE - \$280.00

REQUIRED ATTACHMENTS:

- SUPPORTING DOCUMENTS
- AREA MAP

	FOR STAFF USE ONLY:	
APPLICATION RECEIVED BY:	DATE:	DATE STAMP HERE
1. Name, mailing address and day phone	of land owner(s) of record:	
Name: Don Rinehart		
Mailing Address: 480 Hungry	Junction Rd.	
City/State/ZIP: Ellensburg	WA 98926	
Day Time Phone: 899-Z674		
Email Address:		
2. Name, mailing address and day phone	of authorized agent, if differen	nt from land owner of record:
Agent Name: Chris Cruse		
Mailing Address: PO Box 959		
City/State/ZIP: Ellensburg WA	98926	
Day Time Phone: 967-8747		
Email Address: Cuseand as So	c/a Kvalley.com	
	0	
3. Contact person for application (select o	ne): Owner of record	_ Authorized agent
4. Street address of property: ± 800	Hungry Junet	tion Rd.
6. Tax parcel number(s): 18-18 - 2107	0 3	
7. Nearest County road: Hungry	Junction Rd.	
3 3		
411 North Ruby Street, Suite 1 TEL		(509) 962-7523
Ellensburg, WA 98926 FAX		(509) 962-7663
Last Revised on November 21, 2011		

8. Property served by a County road? Yes _	_No_lf no, which road(s):
9. Plat or project name: Rinehart F	36-13-00006
0. Narrative project description:	
BLA to acquire adjoining	g property for irrigation
11. Provision of road standards for which this very the standards:	variance is requested and the way in which you wish to vary
KCL 12.05.030(2) - 300	access spacing
Salety concerns with Act Adjusting shared access to Pagingting shared access to 13. Application is hereby made for permit(s) to author information contained in this application, and that complete, and accurate. I further certify that I posses grant to the agencies to which this application is made proposed and or completed work. 14. Are there any other pending applications or in Yes No If yes, describe:	orize the activities described herein. I certify that I am familiar with at to the best of my knowledge and belief such information is true, ses the authority to undertake the proposed activities. I hereby de, the right to enter the above-described location to inspect the
Signature of Authorized Agent:	Date: 8/6/2013
ignature of Land Owner of Record Required for application submittal):	Date:
11 North Ruby Street, Suite 1	TEL (509) 962-7523

Dept. of Public Works









