

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"

BOUNDARY LINE ADJUSTMENT

(Adjustment of lot lines resulting in no new lots, as defined by KCC 16.10.010)

NOTE: If this Boundary Line Adjustment is between multiple property owners, seek legal advice for conveyance of property. This form <u>does not</u> legally convey property.

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

Note: The following are required per KCC 16.10.020 Application Requirements. A separate application must be filed for <u>each</u> boundary line adjustment request.

V	Unified Site Plan of existing lot lines and proposed lot lines with distances of all existing structures,
,	access points, well heads and septic drainfields to scale.
V	Signatures of all property owners.

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.

Provide existing and proposed legal descriptions of the affected lots. Example: Parcel A – The North 75 feet of the West 400 feet of the Southwest quarter of the Southwest quarter of the Southwest quarter of Section 02; Township 20 North; Range 16 East; W.M.; Except the West 30 feet thereof for roads.

A certificate of title issued within the preceding one hundred twenty (120) days.

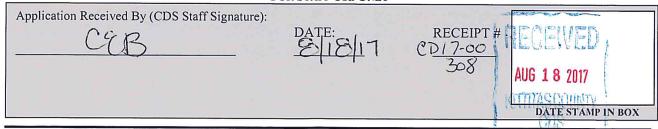
For <u>final approval</u> (not required for initial application submittal):

- Full year's taxes to be paid in full.
- Recorded Survey.

APPLICATION FEES:

\$1,500.00	Total fees due for this application (One check made payable to KCCDS)
\$280.00	Kittitas County Public Health Department Environmental Health
\$145.00	Kittitas County Fire Marshal
\$275.00	Kittitas County Department of Public Works
\$800.00	Kittitas County Community Development Services (KCCDS)

FOR STAFF USE ONLY



OPTIONAL	ATTACHMENTS
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An original survey of the current lot lines. (Please do not submit a new survey of the proposed adjusted or new parcels until after preliminary approval has been issued.)

Assessor COMPAS Information about the parcels.

	ure(s) required on application form		
Name:	*PETER KOHL **GARY G MEYERS & KAREN E WOSLEY MEYERS		
Mailing Address:	* 2212 QUEEN ANNE AVE N #707 **11002 NE 104TH ST		
City/State/ZIP:	*SEATTLE WA 98109 **KIRKLAND WA 98033-4779		
Day Time Phone:	PETER KOHL 206-947-7383		
Email Address:	PGKOHL@MAC.COM		
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:			
Name, mailing add	ress and day phone of other contact person owner or authorized agent.		
Name, mailing add			
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Name, mailing adding addington than land Name: Mailing Address: City/State/ZIP:	owner or authorized agent. SAMUEL WARD 407 SWIFTWATER BLVD		
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8.	Existing and Proposed Lot Information	
	Original Parcel Number(s) & Acreage (1 parcel number per line)	New Acreage (Survey Vol, Pg)
	* 950750 19-15-04010-0017 23.13 AC	21.19 AC
	**095534 19-15-04010-0012 3.01 AC	4.95 AC
	APPLICANT IS: OWNERPURCHASE	ER LESSEE OTHER
9.	with the information contained in this application information is true, complete, and accurate. I fu	the activities described herein. I certify that I am familiar in, and that to the best of my knowledge and belief such orther certify that I possess the authority to undertake the sto which this application is made, the right to enter the
NOTIC parcel r	E: Kittitas County does not guarantee a buildal receiving approval for a Boundary Line Adjustmen	ole site, legal access, available water or septic areas, for nt.
<u>All</u> age	correspondence and notices will be transmitted to the ent or contact person, as applicable.	ne Land Owner of Record and copies sent to the authorized
Signatu	re of Authorized Agent:	Signature of Land Owner of Record
(REQU	IRED if indicated on application)	(Required for application submittal):
x	(date)	X (date) Luz 18, 20
THIS F		OPMENT SERVICES AND THE TREASURER'S OFFICE
	PRIOR TO SUBMITTAL TO	THE ASSESSOR'S OFFICE.
	TREASURER'S	OFFICE REVIEW
Tax Stat	tus: By:	Date:
	COMMUNITY DEVELOPM	ENT SERVICES REVIEW
()	This BLA meets the requirements of Kittitas County	
	Deed Recording Vol Page Date	
	rd #:	Parcel Creation Date:
	t Split Date:	Current Zoning District:
	liminary Approval Date:	By:
rina	al Approval Date:	By:

8.	Existing and Proposed Lot Information	
	Original Parcel Number(s) & Acreage (1 parcel number per line)	New Acreage (Survey Vol, Pg)
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	**095534 19-15-04010-0012 3.01 AC	4.95 AC
	APPLICANT IS: OWNER PUR	CHASER LESSEEOTHER
9,	Application is hereby made for permit(s) to au- with the information contained in this applic information is true, complete, and accurate.	thorize the activities described herein. I certify that I am familiar cation, and that to the best of my knowledge and belief such I further certify that I possess the authority to undertake the encies to which this application is made, the right to enter the ed and or completed work.
NOTIC parcel r	E: Kittitas County does not guarantee a bu ecciving approval for a Boundary Line Adjus	tildable site, legal access, available water or septic areas, for stment.
All ages	correspondence and notices will be transmitted nt or contact person, as applicable,	to the Land Owner of Record and copies sent to the authorized
Signatu	re of Authorized Agent:	Signature of Land Owner of Record
(REQUI	RED if indicated on application)	(Required for application submittal):
X	(date)	X (date)
THIS FO	ORM MUST BE SIGNED BY COMMUNITY DE	EVELOPMENT SERVICES AND THE TREASURER'S OFFICE
	PRIOR TO SUBMITTAL	TO THE ASSESSOR'S OFFICE.
	TREASURE	R'S OFFICE REVIEW
Tax Statu	us: By:	Date:
	COMMINITY DEVEL	OPMENT SERVICES REVIEW
()	This BLA meets the requirements of Kittitas Co	unty Code (Ch. 16.08.055),
		**Survey Required: Yes No
Card	1#:	Parcel Creation Date:
	Split Date:	Current Zoning District:
	minary Approval Date:	Ву:
	Approval Date:	Ray