## **Letter of Transmittal**



Western Washington Division 165 NE Juniper St., Suite 201, Issaquah, WA 98027 Tel (425) 392-0250

## **Eastern Washington Division**

407 Swiftwater Blvd., Cle Elum, WA 98922 Tel (509) 674-7433

| To: KITTITAS COUNTY CDS   |            |                         |                  |   |               | Date:        | 1-6-2021 | Job No. 201 | 49-1           |                 |
|---|------------|-------------------------|------------------|---|---------------|--------------|----------|-------------|----------------|-----------------|
| ELLENSBURG WA   |            |                         |                  |   |               | Attn:        |          |             |                |                 |
| Re: PRELIMINARY BOUNDARY LINE ADJUSTMEN   |            |                         |                  |   |               |              |          |             |                | USTMENT         |
| KYPREOS-COLLINS   |            |                         |                  |   |               |              |          |             |                |                 |
| WE ARE SENDING YOU   Attached Under separate cover via overnight mail/regular mail the following items: |            |                         |                  |   |               |              |          |             |                |                 |
| PRINTS PLA  |            | NS                      | SHOP<br>DRAWINGS |   | OPY OF LETTER | CHANGE ORDER |          | SAMPLES     | SPECIFICATIONS | SUBMITTAL       |
|   |            |                         |                  |   |               |              |          |             |                |                 |
|   |            |                         |                  |   |               |              |          |             |                |                 |
| COPIES  | S DATE NO. |                         | D.               | DESCRIPTION   |               |              |          |             |                |                 |
| 2   |            | 2                       |                  | 18X24 COPY OF MAP   |               |              |          |             |                |                 |
| 1   |            | 8                       | A                | APPLICATION AND ATTACHMENT (APPLICATION FEE)                    |               |              |          |             |                |                 |
| 1   |            | 1                       | N                | NARRATIVE   |               |              |          |             |                |                 |
| 1   |            | 9 SUBDIVISION GUARANTEE |                  |   |               |              |          |             |                |                 |
| 1   |            | 7 CLOSURES              |                  |   |               |              |          |             |                |                 |
| 1   |            | 4                       | . /              | ASSESSOR INFORMATION & RECORDED SURVEY OF EXISTING LOTS         |               |              |          |             |                |                 |
|   |            |                         | •                |   |               |              |          |             |                |                 |
| THESE ARE TRANSMITTER as shooked below:   |            |                         |                  |   |               |              |          |             |                |                 |
| THESE ARE TRANSMITTED as checked below:   |            |                         |                  |   |               |              |          |             |                |                 |
| □ For approval □ App  |            |                         |                  | roved as submitted   Resubmit copies for approval   For signatu |               |              |          |             |                | □ For signature |
| For your use   App  |            |                         | □ Approved       | roved as noted  |               |              |          |             |                |                 |
| □ As requested □ Retu   |            |                         |                  | urned for corrections    Return corrected prints                |               |              |          |             |                |                 |
| X For review and comment  |            |                         |                  |   |               |              |          |             |                |                 |
| □ FOR BIDS DUE  |            |                         |                  | PRINTS RETURNED AFTER LOAN TEUS VE                              |               |              |          |             |                | VER             |
| REMARKS:  |            |                         |                  | R JAN 06 2021   |               |              |          |             |                |                 |
| //-1//  |            |                         |                  | Kittitas Co. CDS  |               |              |          |             |                |                 |
| Signature   |            |                         |                  | Title: SURVEY TECHNICIAN  |               |              |          |             |                |                 |
| Copy to: F  | −ile       |                         |                  |   |               |              |          |             |                |                 |