



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"

PARCEL COMBINATION APPLICATION (The process of combining two or more parcels, per KCC Title 16)

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

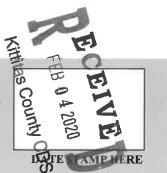
Note: a separate application must be filed for each combination request.

888/AA	well he Signate Legal of Project sewage Tax Re	d Site Plan of existing lot lines and proposed lot lines with distances of all existing structures, access points, eads and septic drainfields. ures of all property owners. descriptions of the proposed lots. t narrative description including at minimum the following information: project size, location, water supply, e disposal and all qualitative features of the proposal; include every element of the proposal in the description. ecceipt (full-year taxes must be paid in full) Checklist (if not exempt per KCC 15.04 or WAC 197-11-800) Please pick up a copy of the SEPA Checklist if required)						
	OPTIONAL ATTACHMENTS							
0	parcels until after preliminary approval has been issued.)							
		APPLICATION FEE:						
\$550.00 Community Development Services								
\$	150.00	Public Works						
\$	700.00	Total fees due for this application (Check made payable to KCCDS)						
		FOR STAFF USE ONLY						

APPLICATION RECEIVED BY: (CDS STAFF SIGNATURE)

DATE:

RECEIPT#



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

GENERAL APPLICATION INFORMATION

1.		nd day phone of land owner(s) of record: required on application form.				
	Name:	Peter & Janice McNeal				
	Mailing Address:	1911 Southwest Campus Drive Unit 696				
	City/State/ZIP:	Federal Way, WA 98023				
	Day Time Phone:	253-640-6087 (Janice) 253-606-5871 (Peter)				
	Email Address:	janicemcneal@janicemcneal.com				
2.		nd day phone of authorized agent, if different from land adicated, then the authorized agent's signature is required for				
	Agent Name:					
	Mailing Address:					
	City/State/ZIP:					
	Day Time Phone:					
	Email Address:					
3.	Name, mailing address a If different than land owne	nd day phone of other contact person r or authorized agent.				
	Name:	Encompass Engineering & Surveying				
	Mailing Address:	407 Swiftwater Blvd.				
	City/State/ZIP:	Cle Elum, WA 98922				
	Day Time Phone:	(509) 674-7433				
	Email Address:	LJackson@Encompasses.net				
4.	Street address of property:					
	Address:	Kokanee Loop				
	City/State/ZIP:	Cle Elum, WA 98922				
5.	Lot 35 & Lot 36, River F	perty (attach additional sheets as necessary): Ridge Suncadia - Phase 2, Division 3, in the County of I rded in Book 12 of Plats, Pages 190 thru 200, records				
6.		0499 (20-15-18053-0035) & 960500 (20-15-18053-003				
7.	Property size: Both are 0.38 acres each (acres)					
8.	Land Use Information:					
	Zaning: Master Planned	Resort Comp Plan Land Use Designation	Rural Recreation			

9.	Existing and Proposed Lot Information:		
	Original Parcel Numbers & Acreage	New Acreage (1 parcel number per line)	
		(Survey Vol, Pg)	
	960499 (20-15-18053-0035) 0.38 Ac.	0.76 Ac.	
	960500 (20-15-18053-0036) 0.38 Ac.		
		ε.	
	APPLICANT IS: OWNER PU	URCHASER LESSEE OTHER	
	<u>A</u> 1	<u>THORIZATION</u>	
	with the information contained in this apprinformation is true, complete, and accurate proposed activities. I hereby grant to the above-described location to inspect the proposed	authorize the activities described herein. I certify that I am fam blication, and that to the best of my knowledge and belief set. I further certify that I possess the authority to undertake agencies to which this application is made, the right to enterposed and or completed work. Seed to the Land Owner of Record and copies sent to the authority to the sent to the authority to the land of the land	such the the
(REQU	ure of Authorized Agent: JIRED if indicated on application)	Date:	
	ure of Land Owner of Record red for application submittal):	Date:	
	Janice McNeal	01/27/2020	
9	eter McNeal 27,0020,1:22:56 PM PST	01/27/2020	
	Treasi	rer's Office Review	
Tax Star		Date:	
		itas County Treasurer's Office	