

KITTITAS COUNTY COMMUNITY DEV

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.

Unified Site Plan of existing lot lines and proposed lot lines with distances of all existing structures, as							
•	well heads and septic drainfields.						
	Signatures of all property owners.						
361	Legal descriptions of the proposed lots.						
Zmc	Project narrative description including at minimum the following information: project size, location, water supply,						
	sewage disposal and all qualitative features of the proposal; include every element of the proposal in the description.						
3m/2	Tax Receipt (full-year taxes must be paid in full)						
MA 🗆	SEPA Checklist (if not exempt per KCC 15.04 or WAC 197-11-800)						
	o Please pick up a copy of the SEPA Checklist if required)						
OPTIONAL ATTACHMENTS							

parcels until after preliminary approval has been issued.)
Assessor Compas Information about the parcels.

An original survey of the current lot lines. (Please do not submit a new survey of the proposed adjusted or new

APPLICATION FEE:

\$550.00 Community Development Services \$150.00 Public Works Total fees due for this application (Check made payable to KCCDS) \$700.00

FOR STAFF USE ONLY

APPLICATION RECEIVED BY: (CDS STAFF SIGNATURE)

DATE:

CD20-016-21



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:	Michael and Marybeth Johnston				
	Mailing Address:	414 Upland Rd				
	City/State/ZIP:	Medina, WA 98039				
	Day Time Phone:					
	Email Address:	mj@steelhead.com; mbj64@hotmail.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:	Matthew Mawer				
	Mailing Address:	11034 SE 31st St				
	City/State/ZIP:	Bellevue, WA 98004				
	Day Time Phone:	425.417.7817				
	Email Address:	matt@mmrd.net				
3.		ss and day phone of other contact person owner or authorized agent.				
	Name:					
	Mailing Address:					
	City/State/ZIP:					
	Day Time Phone:					
	Email Address:					
4.	Street address of pro	perty:				
	Address:	41 Hard Scrabble Lane; 81 Hard Scrabble Lane				
	City/State/ZIP:	Cle Elum, WA				
5.	Legal description of property (attach additional sheets as necessary):					
6.	Tax parcel numbers:	950219; 950218				
7.	Property size: 1.09	Acres (47,432sf); 0.67 acres (28,987sf) (acres)				
8.	Land Use Informatio	n:				
	Zoning: Master Plar	nned 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)	
	Exist 950219 (1.09 acres)	New 950219 (1.76 acres)	_
	Exist 950218 (0.67 acres)		-
	v		
	APPLICANT IS: X OWNER PUR	CHASEROTHER	
	AUT	HORIZATION	
	with the information contained in this application is true, complete, and accurate. proposed activities. I hereby grant to the agabove-described location to inspect the proposed	thorize the activities described herein. I certify that I am fa cation, and that to the best of my knowledge and belief I further certify that I possess the authority to undertal gencies to which this application is made, the right to ented and or completed work. **Add to the Land Owner of Record and copies sent to the authority to the sent to t	f such ke the er the
	ure of Authorized Agent:	Date:	
REQU	JIRED if indicated on application)		
x//	VEH WOOP	7.2-20	
	ure of Land Owner of Record red for application submittal):	Date:	
Х	Man 15 Z	7/2/20	
	Market of last	7/2/20	
		/ /	
Tax Sta		er's Office Review Date:	
i ax sid	atus: By:	Date:	2

Kittitas County Treasurer's Office

9.	Existing and Proposed Lot Info	rmation:					
	Original Parcel Numbers & Acrea	age	New Acreage (1 parcel	number per line)			
			(Survey Vol, I	?g)			
	Exist 950219 (1.09 acres)		New 950219 (1.	76 acres)			
	Exist 950218 (0.67 acres	s)					
							
	APPLICANT IS: X OWNE	ERPURCHASE	ERLESSI	EE(OTHER		
		Author	ZATION				
	Application is hereby made fo with the information contains information is true, complete proposed activities. I hereby above-described location to instance of correspondence and notices were to recontact person, as application.	ed in this application a, and accurate. I fur grant to the agencies spect the proposed and ill be transmitted to the	, and that to the best of the certify that I post to which this application or completed work.	t of my knowledge a ssess the authority to ation is made, the rig	and belief such o undertake the ght to enter the		
	nre of Authorized Agent: /IRED if indicated on applicat	ion)	Date:				
X							
Signature of Land Owner of Record (Required for application submittal):			Date:				
X James Michael Johnston Marybeth Johnston		inston	6/25/2020				
			6/25/2020				
		Treasurer's O	ffice Review				
Tax Sta	tus:	Ву:		Date:			
	Kittitas County Treasurer's Office						

Payment contact

Please contact Murad Khan for credit card payment:

Murad Khan

Steelhead Partners, LLC 800 – 5th Avenue, Suite 3700 Seattle, WA 98104 206.307.0912 direct 206.307.0910 main phone Murad@steelhead.com