



### 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"

# SHORELINE EXEMPTION PERMITTING

(For projects located within 200 feet of a body of water and/or associated floodway and wetlands under the jurisdiction of the Shoreline Master Program)

#### **REQUIRED INFORMATION / ATTACHMENTS**

A scaled site plan is required showing location of all structures, driveways, well, septic, fences, etc. and proposed uses and distances from property lines, river, and Horizontal distance from OHWM. To show the Horizontal distance a profile view from the OHWM to the edge of structure/activity shall also be shown.

Include JARPA or HPA forms <u>if required</u> for your project by a state or federal agency.

SEPA Checklist, if not exempt per WAC 197-11-800.

VSP sponsored fish hatchery enhancement project: please provide documentation signed by the current VSP coordinator for verification. (CDS & PW fees are waived for these projects\*\*)

\*\*\*Please note a Shoreline Variance or Shoreline Conditional Use Permit may also be required. See Kittitas County Shoreline Master Program\*\*\*

#### **APPLICATION FEES:**

\$560.00 Kittitas County Community Development Services\*\*

\$550.00 Kittitas County Public Works\*\*

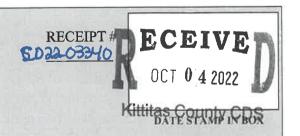
\$1,110.00 Fees due for this application when SEPA is not required\*\*

\$2,935.00 Fees due for this application when SEPA (\$1,825.00) is required\*\* (One check made payable to KCCDS)

FOR STAFF USE ONLY

Application Received By (CDS Staff Signature):

104-27



### **General Application Information**

1.		s and day phone of applicant: (s) required on application form.	
	Name:	Jody Joldersma / Mathew Jenk	MS
	Mailing Address:	4707 Augusta Pl. S	
	City/State/ZIP:	Seattle, WA 98108	
	Day Time Phone:	(708) 703-0893	
	Email Address:	jjjoldersma@gmail.com, jenkins488@gmail.com	
2.		and day phone of landowner: indicated, then the authorized agent's signature is required for	or application submittal.
	Name:	Forterra NW	
	Mailing Address:	PO Box 4189	
	City/State/ZIP:	Seattle, WA 98194	
	Day Time Phone:	(206) 905-6893	
	Email Address:	cmaclean@forterra.org	
3.	Name, mailing address If different than land ow	and day phone of other contact person ner or authorized agent.	
	Name:		
	Mailing Address:		
	City/State/ZIP:		
	Day Time Phone:		
	Email Address:		
4.	Street address of prope	erty:	
	Address:	187 Snowshoe Lane	
	City/State/ZIP:	Snoqualmie Pass, WA 98068	
5.	5. Legal description of property: (attach additional sheets as necessary)  ACRES 5.35, BOB HANSEN SHORT PLAT 94-16; PTN OF LOTS 1, 2 & 3 (LOT 2, B36/P203); SEC 11, TWP  RGE 11		
6.	Tax parcel number(s):	433337	
7.	Property size: 5.35		(acres)

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# **Project Description**

1.	Briefly summarize the purpose of the project:						
	Between September 15-30 shoring up Gold Creek Bank to prevent further erosion and property damage, move some						
	wood downstream to allow water to flow. Place root wat and large stones along creek. Follow through 2023 to reassess with engineer and make permanent plan.						
	- I was a second of the second	one plant					
2.	e, Recreation)?						
3.	Restoration project.  4. Fair Market Value of the project, including materials, labor, machine rentals, etc. 2,000-3,000						
4.							
	Oct igth Oct 24th						
5.	Anticipated start and end dates of proje	ct constructi	on: Start September 1	End September 30			
	<u>Authorization</u>						
	Application is hereby made for permit(s) to authorize the activities described herein. I certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief such information is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activities. I hereby grant to the agencies to which this application is made, the right to enter the above-described location to inspect the proposed and or completed work.						
All cor	respondence and notices will be transmitte		d Owner of Record and	coniac sant to the authorized agent			
	tact person, as applicable.	u iv ine Luni	i Owner of Record and	copies sent to the uninorized agent			
	ure of Authorized Agent: UIRED if indicated on application)		Date:				
X		_					
Signat	ure of Applicant (Required	Date:					
	plication submittal):						
A (	DocuSigned by:		9/28/2022				
( )	ody Joldersma		<del></del>				
Signa	ecg=23Eg505C4F0 ture of Land Owner of Record —DocuSigned by:	Date:					
X	Midulle Connor		10/3/2022				

## FOR STAFF USE ONLY

1.	Yrovide section, township  1/4 Section			Range E., W.M	•
2.	<ul> <li>2. Latitude and longitude coordinates of project location (e.g. 47.03922 N lat. / -122.89142 W long.):</li></ul>				
3.					
	☐ Private	☐ Federal	☐ State	☐ Local	☐ Tribal
4.	Land Use Information:				
Zo	ning:		Comp Plan Land U	se Designation:	
5.	Shoreline Designation:	(check all that app	ly)		
	☐ Urban Conservanc	y Shore	line Residential	☐ Rural Conserv	ancy
	☐ Natural		□ Aq	☐ Aquatic	
6.	6. Requested Shoreline Exemption per WAC 173.27.040:				
		7	<b>egetation</b>		
7.	Will the project result in	n clearing of tree o	r shrub canopy?		
	□ Ye	es	□ No		
If	'Yes', how much clearing	will occur?		(square	e feet and acres)
8.	Will the project result in	n re-vegetation of t	ree or shrub canopy	?	
	□ Ye	es	□ No		
If	'Yes', how much re-veget	ation will occur?_		(squar	e feet and acres)
			Wetlands		
9.	Will the project result in	n wetland impacts?	•		
	□ Ye	es	□ No		
If	'Yes', how much wetland	will be permanent	ly impacted?	(squar	re feet and acres)
10	. Will the project result in	n wetland restorati	on?		
	□ Ye	es	□ No		
If	'Yes', how much wetland	will be restored?		(square feet and acro	es)

	<b>Impervious</b>	Surfaces			
11. Will the project resu	lt in creation of over 500 sq	uare feet of impervious surfaces?	,		
	l Yes	□ No			
If 'Yes', how much impe	rvious surface will be creat	ed?	_(square feet and acres)		
12. Will the project resu	lt in removal of impervious	surfaces?			
	l Yes	□ No			
If 'Yes', how much impe	rvious surface will be remo	ved?	_(square feet and acres)		
	Shoreline St	<u>abilization</u>			
13. Will the project resu (revetment/bulkhead	lt in creation of structural s /riprap)?	horeline stabilization structures			
	l Yes	□ No			
If 'Yes', what is the net l	inear feet of stabilization st	ructures that will be created?			
14. Will the project resu (revetment/bulkhead		horeline stabilization structures			
	Yes	□ No			
If 'Yes', what is the net li	inear feet of stabilization st	ructures that will be removed? _			
	Levees/	<u>Dikes</u>			
15. Will the project resul	lt in creation, removal, or re	elocation (setting back) of levees/	dikes?		
	Yes	□ No			
If 'Yes', what is the net li	inear feet of levees/dikes tha	at will be created?			
If 'Yes', what is the net li	near feet of levees/dikes tha	at will be permanently removed?			
If 'Yes', what is the linea OHWM?	r feet of levees/dikes that w	ill be reconstructed at a location	further from the		
	Floodplain D	evelopment			
16. Will the project result in development within the floodplain? (check one)					
	Yes	□ No			
		pe constructed in the floodplain?  14.08; please contact Kittitas Cou	nty Public Works		
17. Will the project resul	t in removal of existing stru	uctures within the floodplain? (cl	heck one)		
	Yes	□ No			
If 'Yes', what is the net s	quare footage of structures	to be removed from the floodplai	in?		

		<b>Overwater Structures</b>			
18. Will the project result in construction of an overwater dock, pier, or float? (check one)					
	☐ Yes	□ No			
If 'Yes', how many ov	verwater structur	es will be constructed?_			
What is the net squar	e footage of water	r-shading surfaces that v	vill be created?		
19. Will the project result in removal of an overwater dock, pier, or float? (check one)					
	☐ Yes	□ No			
If 'Yes', how many ov	verwater structur	es will be removed?			
What is the net squar	re footage of wate	r-shading surfaces that v	will be removed?		
		Summary/Conclusion			
20. Will the proposed use be consistent with the policies of RCW 90.58.020 and the Kittitas County Shoreline Master Program? (attach additional sheets if necessary)					
	☐ Yes	☐ No			
Please explain:					
-					
21. Provide any additional information needed to verify the project's impacts to shoreline ecological functions: (attach additional sheets and relevant reports as necessary)					