

KITITIAS COUNTY COMMUNITY DEVELOPMENT SERVICES

411 N. Ruby St., Suite 2, Ellensburg, WA 98926
CDS@CO.KITITIAS.WA.US
Office (509) 962-7506
Fax (509) 962-7682

"Building Partnerships - Building Communities"

SHORT PLAT APPLICATION

(To divide a lot into no more than 4 lots, according to KCC 16.32)

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

- Five large copies of short plat with all preliminary drawing requirements complete (reference KCC Title 16 Subdivision Code for plat drawing requirements) and one small 8.5"x11" copy.
- Project Narrative responding to Questions 9-11 on the following pages.

OPTIONAL ATTACHMENTS

(Optional at submittal, required at the time of final submittal)

- Certificate of Title (Title Report)
- Computer lot closures

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MAR 28 2014

KITITIAS COUNTY
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APPLICATION FEES:

\$720.00	Kittitas County Community Development Services (KCCDS)
\$220.00	Kittitas County Department of Public Works
\$130.00	Kittitas County Fire Marshal
\$570.00	Public Health Proportion (Additional fee of \$75/hour over 4 hours)
\$1,640.00	Total fees due for this application (One check made payable to KCCDS)

FOR STAFF USE ONLY

Application Received By (CDS Staff Signature):

[Handwritten Signature]

DATE: 3/28/14

RECEIPT # 20610

PAID

MAR 28 2014

KITITIAS CO.
CDS

DATE STAMP IN BOX

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

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: Kathleen Anderson
Mailing Address: 410 Game Farm Road
City/State/ZIP: Ellensburg, WA 98926
Day Time Phone: (509) 925-3157
Email Address: ktwings@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: Angela Risner
Mailing Address: 3470 Pedley Ave.
City/State/ZIP: Norco, CA 92860
Day Time Phone: (951) 751-7766 - (951) 751-7733
Email Address: risnerranch@aol.com

3. **Name, mailing address and day phone of other contact person**
If different than land owner or authorized agent.

Name: _____
Mailing Address: _____
City/State/ZIP: _____
Day Time Phone: _____
Email Address: _____

4. **Street address of property:**

Address: 410 Game Farm Road
City/State/ZIP: Ellensburg, WA 98926

5. **Legal description of property (attach additional sheets as necessary):**

See Attached

6. **Tax parcel number(s):** 18-19-31020-0033

7. **Property size:** 9.17 acres (acres)

8. **Land Use Information:**

Zoning: Urban Residential Comp Plan Land Use Designation: Urban

PROJECT NARRATIVE

(INCLUDE RESPONSES AS AN ATTACHMENT TO THIS APPLICATION)

9. **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. YES NO
10. Are Forest Service roads/easements involved with accessing your development? If yes, explain.
11. What County maintained road(s) will the development be accessing from? GAME FARM ROAD

AUTHORIZATION

12. 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 correspondence and notices will be transmitted to the Land Owner of Record and copies sent to the authorized agent or contact person, as applicable.

Signature of Authorized Agent:
(REQUIRED if indicated on application)

Date:

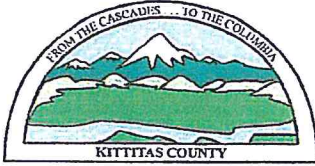
X Angela Risner

Signature of Land Owner of Record
(Required for application submittal):

Date:

X Kathleen P. Anderson

2-20-14



KITTITAS COUNTY
DEPARTMENT OF PUBLIC WORKS

**TRANSPORTATION CONCURRENCY MANAGEMENT
APPLICATION**

Required attachments:

Site map showing access locations

FOR STAFF USE ONLY:

APPLICATION RECEIVED BY:

DATE:

DATE STAMP HERE

1. Name, mailing address and day phone of land owner(s) of record:

Name: Kathleen Anderson

Mailing Address: 410 Game Farm Rd.

City/State/ZIP: Ellensburg, WA 98926

Day Time Phone: 509-925-3157

Email Address: ktwings@hotmail.com

2. Name, mailing address and day phone of authorized agent, if different from land owner of record:

Agent Name: Steve & Angela Risner

Mailing Address: 3470 Pedley Ave.

City/State/ZIP: Norco, CA 92860

Day Time Phone: (951) 751-7766 - (951) 751-7733

Email Address: risnerranch@aol.com

3. Contact person for application (select one): Owner of record Authorized agent

4. Street address of property: 410 Game Farm Rd.

5. Tax parcel number(s): 18-19-31020-0033

6. Roads serving project: Game Farm Road

7. Plat or project name: Risner Ranch Short Plat

411 North Ruby Street, Suite 1
Ellensburg, WA 98926

TEL (509) 962-7523
FAX (509) 962-7663

Last Revised on April 9, 2013

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Kittitas County Department of Public Works

8. Proposed Land Use: Residential Commercial Agricultural

9. Proposed Land Use Project: Short Plat Long Plat Building Permit Other: _____

10. Total number of lots/dwelling units: 2

11. Commercial/Agricultural building area in square feet: N/A

12. Narrative project description: See Attached

13. Describe present use of property: Residential and Agriculture

13. 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.

14. Are there any other pending applications or issues associated with this property?

Yes No If yes, describe: _____

Signature of Authorized Agent:

X *Angela Kinney*

Date:

2/18/14

Signature of Land Owner of Record

(Required for application submittal):

X *Kathleen P. Anderson*

Date:

2/20/14



RISNER RANCH SHORT PLAT PROJECT NARRATIVE

OVERVIEW:

The proposed project is a subdivision of tax parcel 674734 in to two (2) separate lots by Short Plat.

WATER:

The proposed parcels shall have individual wells

SEWER:

The proposed parcels will dispose of waste water via individual septic and drain field

TRANSPORTATION:

The proposed parcels will access Game Farm Road via a shared driveway.

OTHER:

Attached are copies of the proposed Short Plat for your review.

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