

## KIT ... FAS COUNTY COMMUNITY L. /ELOPMENT SERVICES

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

V-07-12

# ZONING STRUCTURAL SETBACK VARIANCE APPLICATION

(To place a structure closer to the lot line than allowed)

KITTITAS COUNTY ENCOURAGES THE USE OF PRE-APPLICATION MEETINGS. PLEASE CALL THE DEPARTMENT IF YOU WOULD LIKE TO SET UP A MEETING TO DISCUSS YOUR PROJECT. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

Current Zoning Setbacks:

Zone	FRONT SETBACK	SIDE SETBACK	REAR SETBACK	Side (setback for side abutting the street)
Residential	15'	5'	25'	15'
Residential-2	15'	10' on one side and 5" on the other side	25'	15'
Suburban	25'	15'	25'	20'
Agriculture-3, Agriculture-20, and Commercial Ag	25'	5'	25'	15'
Rural-3	25'	15'	15'	-
Forest & Range	25'	10'	. 10'	15'
Commercial Forest	200'	200'	200'	-

PLEASE TYPE OR PRINT CLEARLY IN INK. ATTACH ADDITIONAL SHEETS AS NECESSARY. THE FOLLOWING ITEMS MUST BE ATTACHED TO THIS APPLICATION PACKET:

#### REQUIRED ATTACHMENTS

- ADDRESS LIST OF ALL LANDOWNERS WITHIN 300 FEET OF THE SITE'S TAX PARCEL. IF ADJOINING PARCELS ARE OWNED BY THE APPLICANT, THE 300 FEET EXTENDS FROM THE FARTHEST PARCEL. IF THE PARCEL IS WITHIN A SUBDIVISION WITH A HOMEOWNERS OR ROAD ASSOCIATION, PLEASE INCLUDE THE ADDRESS OF THE ASSOCIATION.
- SITE PLAN OF THE PROPERTY WITH ALL PROPOSED: BUILDINGS; POINTS OF ACCESS, ROADS, AND PARKING AREAS; SEPTIC TANK AND DRAINFIELD AND REPLACEMENT AREA; AREAS TO BE CUT AND/OR FILLED; AND, NATURAL FEATURES SUCH AS CONTOURS, STREAMS, GULLIES, CLIFFS, ETC.

### FEE:

\$350.00 to Kittitas County Community Development Services

#### FOR STAFF USE ONLY

I CERTIFY THAT I RECEIVED THIS APPLICATION MANAGEMENTS (IN THE PROPERTY)

SIGNATURE

LACATOR MANAGEMENT (IN THE PROPERTY)

NOTES

1 OF THE PROPERTY (IN THE PROPERTY)

NOTES

1.	Name, mailing address and day phone of land owner(s) of record:		
	Name: James D Henry		
	Mailing Address: P.O. Box 596		
	City/State/ZIP: So Cle Elum WA 98943		
	Day Time Phone: 509-674 - 5469		
	Email Address:		
2.	Name, mailing address and day phone of authorized agent, if different from land owner of record:		
2.	Agent Name: Genrald Seder		
	Mailing Address: PO Box 745		
	City/State/ZIP: KITTITAS WA 98934		
	Day Time Phone: 509 929 3 455		
	Email Address: 958eder @ Chanter : net		
3.	Contact person for application (select one):  Owner of record Authorized agent  All verbal and written contact regarding this application will be made only with the contact person.		
4.	Street address of property:		
	Address: 470 Wallace Dr		
	Address: 470 Wallace Dr City/State/ZIP: C/C E/UM WA 98922		
5.	aches 1.3, Wallace short Plat 32-02 Lot 2 Legal Description of Property: Sec 4, Twp 19, Rge 15 (19-15-04050-00		
6.	Tax parcel number: 774136 19-18-09020		
7.	Property size: 1,39 acres		
8.	Narrative project description: Please include 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 (be specific, attach additional sheets as necessary):		
Bu Fr Sie To b web web	ild 24'X26' unheated, Dry STORAGE and garage on SW unt Ox lot see Plot Plan, The othe Side of lot is a ep drop with 64" Drop in 26' this is not a good location ould, 17% of snow will fall from shad roof on to drive y 83% will go toward property line for easy snow one grade on the contract of wall will be 24" above grade property line for to building.		
9.	Provision of zoning code for which this variance is requested and the way in which you wish to vary from the		
70	ned Rural-3. 15' side set boot. Wish To change To		
2 OF	13		

10. criteri	A variance may be granted only when the folloa is met for this particular request (attach addition	owing criteria are met. Please describe in detail how each al sheets as necessary):		
A.	other property in the same vicinity or district, such a	e property and/or the intended use that do not apply generally to as topography.		
В.	Such variance is necessary for the preservation and enjoyment of a substantial property right of the applic possessed by the owners of other properties in the same vicinity.			
C.	That authorization of such variance will not be materially detrimental to the public welfare or injurious to property in the vicinity.			
D.	That the granting of such variance will not advergatern.	ersely affect the realization of the comprehensive development		
comp agenc	Application is hereby made for permit(s) to authorize a suffermation contained in this application, and that to lete, and accurate. I further certify that I possess the analysis of the suffer suffer in the suffer	e the activities described herein. I certify that I am familiar with the best of my knowledge and belief such information is true, uthority to undertake the proposed activities. I hereby grant to the ter the above-described location to inspect the proposed and or		
	nture of Authorized Agent:	Date:		
X	Tenall Sodi	7-9-07		
	nture of Land Owner of Record uired for application submittal):	Date:		
x	lames P. Flenry	6-19-07		

