KITTITAS COUNTY

KITTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

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

ZONING STRUCTURAL SETBACK VARIANCE APPLICATION

VA-09-00013

(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. PURSUANT TO KCC 15A.03.030, A COMPLETE APPLICATION IS DETERMINED WITHIN 30 DAYS OF RECEIPT OF THE APPLICATION SUBMITTAL PACKET AND FEE. THE FOLLOWING ITEMS MUST BE ATTACHED TO THIS APPLICATION PACKET:

REQUIRED ATTACHMENTS

- □ ADDRESS LIST OF ALL LANDOWNERS WITHIN 500 FEET OF THE SITE'S TAX PARCEL. IF ADJOINING PARCELS ARE OWNED BY THE APPLICANT, THE 500 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:

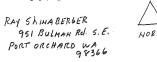
\$495.00 to Kittitas County Community Development Services \$65.00 for Fire Marshal *One check made payable to KCCDS

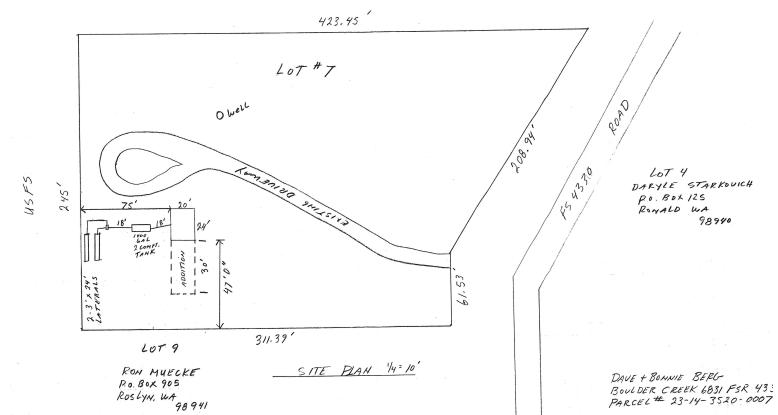
FOR STAFF USE ONLY

APPLICATION RECEIVED BY SIGNATURE:	DATE:	RECIEPT #:	PAID
MMay weed	7/8/09	00005198	KITTITA 2009
NOTES:			CDS CO.

1.	Landowner(s) signature(s) required on application form.
	Name: DAVE + BONNIE BERG
	Mailing Address: 1101 SAINT Hilgine Rd.
	City/State/ZIP: YAKIMA, WA 9890/
	Day Time Phone: 509 952 - 781/
	Email Address: BERG- 36ZY & ChANTER. NET
2.	Name, mailing address and day phone of authorized agent, if different from land owner of record: If an authorized agent is indicated, then the authorized agent's signature is required for application submittal.
	Agent Name:
	Mailing Address:
	City/State/ZIP:
	Day Time Phone:
	Email Address:
3.	Street address of property:
	Address: 6831 FSR 4330
	City/State/ZIP: ROMALD CLA
	1 65
4.	Legal Description of Property: 2.05ACRES
5.	Tax parcel number: 23-14-3520-0007
6.	Property size: 245 × 423
7.	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): **Existing Cabin 47' From South Property line**
	Existing CABIN 47' FROM SOUTH PROPERTY LINE 11 ORANG FIELD 30' FROM SOUTH PROPERTY LINE 11 UATER LINE THE MIDDLE OF PROPERTY
	PROPOSED ADDITION WILL BE 17' From SOUTH
	Proposen AppiTion will Be 17' From South Property Like
8.	Provision of zoning code for which this variance is requested and the way in which you wish to vary from the code:
PN	STRUCTURE 15 location in commence Forset Zare +

9.	A variance may be granted only when criteria is met for this particular request	the following criteria are met. Please describe in detail how each t (attach additional sheets as necessary):
A.	other property in the same vicinity or distri	ying to the property and/or the intended use that do not apply generally to ict, such as topography. De CAMMOT MEET 200' SOTBACK
В.	possessed by the owners of other propertie	·
	CABIN ADDITION BI	= 30' x 20'
C.	in the vicinity.	ot be materially detrimental to the public welfare or injurious to property
D.	That the granting of such variance will pattern. CORN OCT	not adversely affect the realization of the comprehensive development
10.	the information contained in this application true, complete, and accurate. I further conhereby grant to the agencies to which this inspect the proposed and or completed work.	
-	<u>I correspondence and notices will be mailed to the correspondence and the correspondence are correspondence are correspondence and the correspondence are correspond</u>	to the Land Owner of Record and copies sent to the authorized agent. Date:
	UIRED if indicated on application)	
X		
	ture of Land Owner of Record: UIRED for application submittal)	Date:
X	LX Beig	7-8-09







KITTITAS COUNTY PERMIT CENTER 411 N. RUBY STREET, ELLENSBURG, WA 98926

RECEIPT NO.:

00005198

COMMUNITY DEVELOPMENT SERVICES

(509) 962-7506

PUBLIC HEALTH DEPARTMENT

(509) 962-7698

DEPARTMENT OF PUBLIC WORKS

(509) 962-7523

Account name:

002308

Date: 7/8/2009

Applicant:

BERG, DAVID L ETUX

Type:

check

1006

Permit Number	
VA-09-00013	
VA-09-00013	

Fee Description		Amount
ADMINISTRATIVE VARIANCE		495.00
ADMIN VARIANCE FM FEE		65.00
	Total:	560.00