



KITTITAS COUNTY DEPARTMENT OF PUBLIC WORKS

ACCESS PERMIT REQUEST FOR EXEMPTION

Permit # _____

Owner Name _____

Mailing Address _____

Phone Number _____

Applicant Name _____

Mailing Address _____

Phone Number _____

Email Address _____



DATE STAMP

Access Permit # _____	Building Permit # _____
Map # _____	Situs Address _____

Provide a site map indicating approved access location in relation to other physical features in the area.

Briefly provide facts for consideration in determination of exemption:

Applicant declares he is the owner or owner's agent of the real property whose access is under construction.

Applicant _____ Date _____

NOTE: In approximately two weeks, Kittitas County will notify the applicant indicating whether or not the exemption has been approved. If the exemption is not approved, a permit will be required.

FOR STAFF USE ONLY		
APPROVED _____	NOT APPROVED _____	REASON _____

BY _____	TITLE _____	DATE _____