

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

LARGE LOT APPLICATION

LL-08-00066

("Large lot subdivision" means any subdivision of land into two or more lots or parcels the smallest of which is twenty (20) acres or greater.)

KITTITAS COUNTY ENCOURAGES THE USE OF PRE-APPLICATION MEETINGS. PLEASE CONTACT COMMUNITY DEVELOPMENT SERVICES TO SET UP A PRE-APPLICATION MEETING TO DISCUSS A PROPOSED PROJECT.

PLEASE TYPE OR PRINT CLEARLY IN INK. ATTACH ADDITIONAL SHEETS AS NECESSARY. PURSUANT TO KCC 15A.03.030, 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.
- Address list of all landowners within 500 feet of the subject parcel(s). If adjoining parcels are owned by the applicant, then the 500 foot area shall extend from the farthest parcel. If the parcel is within a subdivision with a Homeowners or Road Association, then please include the mailing address of the association.

OPTIONAL ATTACHMENTS

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

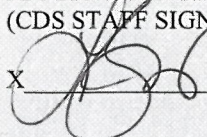
- Certificate of Title (Title Report)
- Computer lot closures

APPLICATION FEES:

\$190 plus \$10 per lot for Public Works Department;
\$380 plus \$75 per hour over 4 hrs. for Environmental Health Department;
\$450 for Community Development Services
(One check made payable to KCCDS)

FOR STAFF USE ONLY

APPLICATION RECEIVED BY
(CDS STAFF SIGNATURE)

X 

DATE:

4.11.08

RECEIPT #

RECEIVED

APR 11 2008
DATE STAMP
Kittitas County
CDS

NOTES: _____

DARRYL PIERCY, DIRECTOR

ALLISON KIMBALL, ASSISTANT DIRECTOR

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

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

Landowner(s) signature(s) required on application form.

Name: LODGE CREEK LAND CO LLC
Mailing Address: PO BOX 497
City/State/ZIP: EASTON WA 98925
Day Time Phone: (509) 656-2460 VIC MONAHAN (HOME)
Email Address: (509) 674-9006 VIC MONAHAN (CELL)

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: NO SITUS PER ASSESSOR'S RECORDS
City/State/ZIP: _____

4. **Legal description of property:**

PARCEL 2 OF SURVEY BOOK 35, PAGES 4 THROUGH 6, AFN 200804040028,
BEING A PORTION OF SECTION 8, TOWNSHIP 20 NORTH, RANGE 13 EAST, W.
M., KITTITAS COUNTY, WASHINGTON

5. **Tax parcel number(s):** 20-13-08000-0001 (368934)

6. **Property size:** 154.32 (acres)

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):

7 LOT LARGE LOT SUBDIVISION; ZONED: FOREST AND RANGE; WATER:
INDIVIDUAL WELLS; SEWER: SEPTIC/DRAINFIELDS

8. **Are Forest Service roads/easements involved with accessing your development?**

Yes No (Circle) If yes, explain:

9. What County maintained road(s) will the development be accessing from?

CABIN CREEK ROAD

10. 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 mailed to the Land Owner of Record and copies sent to the authorized agent.

Signature of Authorized Agent:
REQUIRED if indicated on application

Date:

X _____

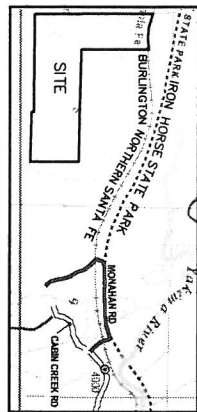
Signature of Land Owner of Record:
(Required for application submittal)

Date:

X *W. E. Morahan*

4-10-08

CABIN MOUNTAIN TREE FARM TRACTS LARGE LOT SUBDIVISION
A PORTION OF SECTION 8, TOWNSHIP 20N., RANGE 13E., WM.
KITITAS COUNTY, WASHINGTON



APPROVALS

KITITAS COUNTY PUBLIC WORKS
 EXAMINED AND APPROVED This ___ day of _____ A.D., 20__

Kitittas County Engineer

COUNTY PLANNING DIRECTOR
 I hereby certify that the "CABIN MOUNTAIN TREE FARM TRACTS" Large Lot Subdivision has been examined by me and find that the same conforms to the Comprehensive Plan of the Kitittas County Planning Commission.

Dated this ___ day of _____ A.D., 20__

Kitittas County Planning Director

KITITAS COUNTY HEALTH DEPARTMENT
 Preliminary inspections indicated soil conditions may allow use of septic tanks as a temporary means of sewage disposal for some, but not necessarily all building sites within this short plot. Prospective purchasers of lots are urged about issuance of septic tank permits for lots.

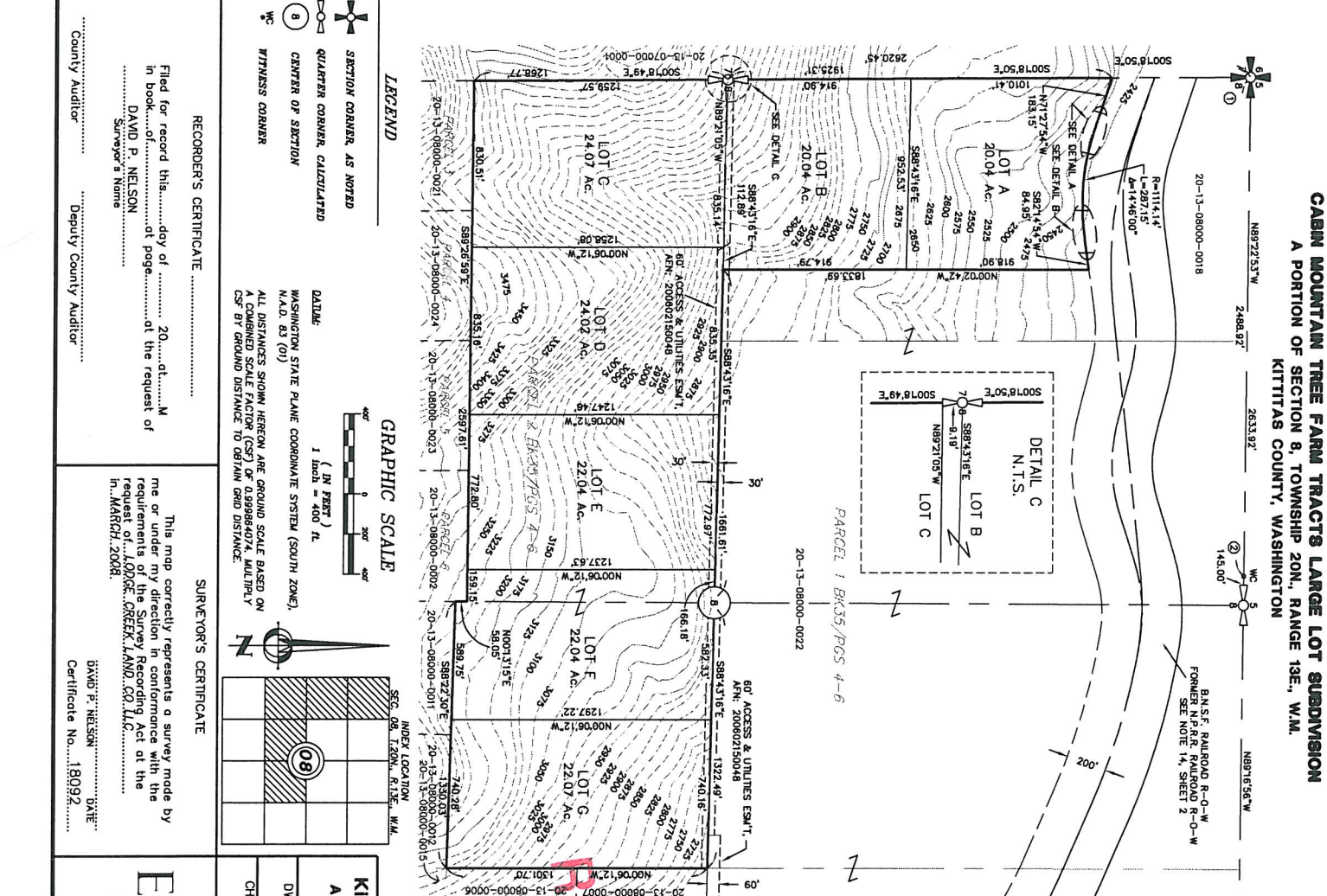
Dated this ___ day of _____ A.D., 20__

Kitittas County Health Officer

CERTIFICATE OF COUNTY TREASURER
 I hereby certify that the taxes and assessments are paid for the preceding years and for this year in which this plat is now to be filed.

Dated this ___ day of _____ A.D., 20__

Kitittas County Treasurer



LEGEND

- SECTION CORNER AS NOTED
- QUARTER CORNER CALCULATED
- CHIEF OF SECTION
- WITNESS CORNER

GRAPHIC SCALE
 1 inch = 400 ft

INDEX LOCATION

RECORDER'S CERTIFICATE

Filed for record this ___ day of _____ 20__ at _____ M in book _____ of _____ at page _____ at the request of _____ DAVID P. NELSON Surveyor's Name

SURVEYOR'S CERTIFICATE

This map correctly represents a survey made by me or under my direction in conformance with the requirements of the Survey Recording Act at the request of _____ DAVID P. NELSON in _____ MAR 2008. Certificate No. 18092

CORNER NOTES:

- NORTHWEST CORNER SEC. 8, T. 20 N., R. 13 E., WM.
- FOUND ALUM CAP MONUMENT, DEA, M.C.
- L.C.R. BOOK 5, PAGE 80
- NORTH QUARTER CORNER SEC. 8, T. 20 N., R. 13 E., WM.
- FOUND WITNESS CORNER, 3" BRASS CAP MONUMENT, DEA, LS 14743
- L.C.R. BOOK 6, PAGE 22

SPIRAL CHORD LINE TABLE

LINE	BEARING	DISTANCE
L7	S71°59'03"E	19.33'
L8	S71°55'57"E	19.84'
L9	S71°49'47"E	20.21'
L10	S72°10'31"E	20.61'
L11	S72°58'10"E	21.01'
L12	S73°12'44"E	21.41'
L13	S73°24'12"E	21.81'
L14	S73°34'55"E	22.22'
L15	S73°45'52"E	22.62'
L16	S73°57'08"E	23.02'
L17	N82°22'08"E	23.42'
L18	N82°24'53"E	23.82'
L19	N82°29'55"E	24.22'
L20	N83°34'44"E	24.61'
L21	N83°52'10"E	25.01'
L22	N84°25'31"E	25.41'
L23	N84°58'47"E	25.81'
L24	N85°28'47"E	26.21'
L25	N85°54'57"E	26.61'
L26	N86°21'03"E	27.01'



Kitittas Co. Large Lot Subdivision NO. 08-XX
A Portion of Section 8, Township 20N., Range 13E., WM.
 Kitittas County, Washington

DWN BY: **G. WEISER** DATE: **04/08** JOB NO.: **05602-2**
 CHKD BY: **D. NELSON** SCALE: **1"=400'** SHEET: **1 OF 2**

108 EAST 2ND STREET
 CLE ELIUM, WA 98922
 PHONE: (509) 674-7233
 FAX: (509) 674-7419