

**KITTTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES**

411 N. Ruby St., Suite 2, Ellensburg, WA 98926

CDS@CO.KITTTITAS.WA.US

Office (509) 962-7506

Fax (509) 962-7682

**LARGE LOT APPLICATION**

LL-08-00007

("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.)

KITTTITAS 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)

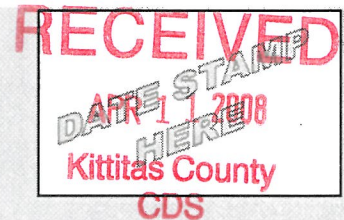
**FOR STAFF USE ONLY**

APPLICATION RECEIVED BY  
(CDS STAFF SIGNATURE)

X 

DATE:  
4.11.08

RECEIPT #  
545



NOTES: \_\_\_\_\_

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

5. **Tax parcel number(s):** 20-13-08000-0022 (950239)

6. **Property size:** 160.56 (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):

8 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

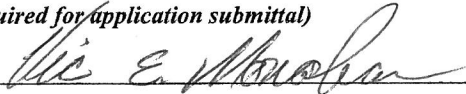
10. Application is hereby made for permit(s) to authorize the activities described herein. I certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief such information is true, complete, and accurate. I further certify that I possess 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

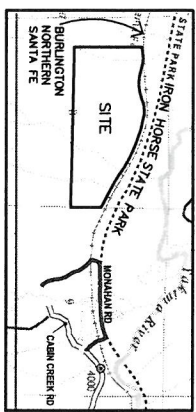
Date:  
\_\_\_\_\_

X \_\_\_\_\_

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

Date:  
4-10-8

**CABIN MOUNTAIN TRACTS LARGE LOT SUBDIVISION**  
**A PORTION OF SECTION 8, TOWNSHIP 20N., RANGE 13E., W.M.**  
**KITITAS COUNTY, WASHINGTON**



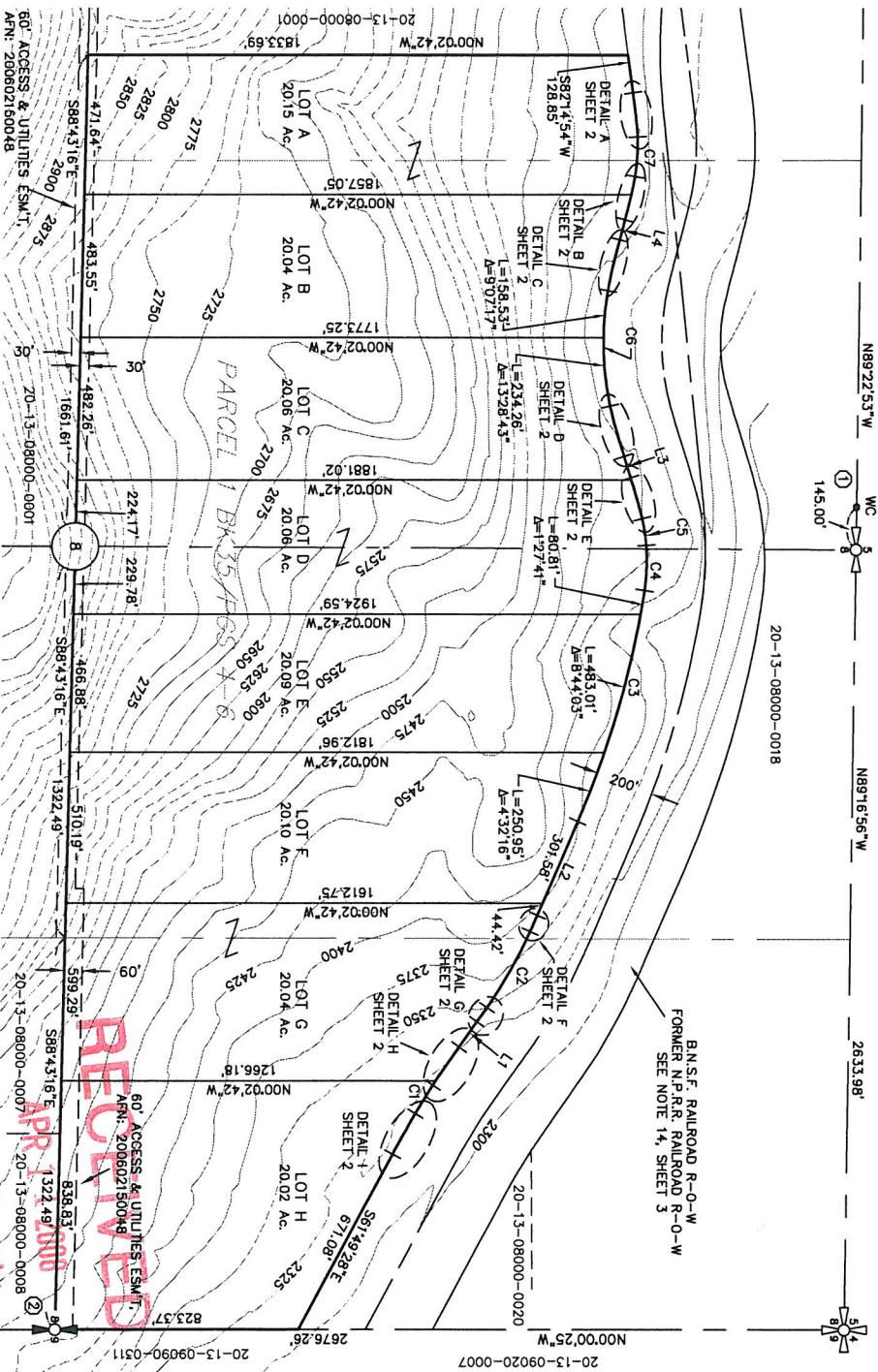
**APPROVALS**

**KITITAS COUNTY PUBLIC WORKS**  
 EXAMINED AND APPROVED this \_\_\_\_ day of \_\_\_\_\_ A.D., 20 \_\_\_\_  
 \_\_\_\_\_  
 Kititias County Engineer

**COUNTY PLANNING DIRECTOR**  
 I hereby certify that the "CABIN MOUNTAIN TRACTS" Large Lot Subdivision has been examined by me and find that it conforms to the comprehensive plan of the Kititias County Planning Commission.  
 Dated this \_\_\_\_ day of \_\_\_\_\_ A.D., 20 \_\_\_\_  
 \_\_\_\_\_  
 Kititias County Planning Director

**KITITAS COUNTY HEALTH DEPARTMENT**  
 Public health inspection indicated and 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 term. Prospective purchasers of lots are urged to consult with the health department about issuance of septic tank permits for lots.  
 Dated this \_\_\_\_ day of \_\_\_\_\_ A.D., 20 \_\_\_\_  
 \_\_\_\_\_  
 Kititias County Health Officer

**CERTIFICATE OF COUNTY TREASURER**  
 I hereby certify that the taxes and assessments due on this parcel for the year in which the plat is now to be filed.  
 Dated this \_\_\_\_ day of \_\_\_\_\_ A.D., 20 \_\_\_\_  
 \_\_\_\_\_  
 Kititias County Treasurer  
 ORIGINAL TAX LOT NO. 20-13-08000-0022 (950239)



**LEGEND**

- QUARTER CORNER, AS NOTED
- SECTION CORNER, CALCULATED
- QUARTER CORNER, CALCULATED
- CENTER OF SECTION
- WITNESS CORNER

**GRAPHIC SCALE**  
 1 inch = 300 ft

**DATUM:**  
 WASHINGTON STATE PLANE COORDINATE SYSTEM (SOUTH ZONE), N.A.D. 83 (01)

**INDEX LOCATION:**  
 SEC. 08, T20N., R13E., W.M.

**RECORDER'S CERTIFICATE**

**SURVEYOR'S CERTIFICATE**

Filed for record this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_ M. in book \_\_\_\_ of \_\_\_\_\_ at page \_\_\_\_ of the request of **DAVID P. NELSON**, Surveyor's Name  
 \_\_\_\_\_  
 County Auditor  
 \_\_\_\_\_  
 Deputy County Auditor

This map correctly represents a survey made by me or under my direction in conformance with the requirements of the Survey Recording Act of the request of **LODGE, CREEK, LAND, CO. LLC**, in **MARCH, 2008**.  
**DAVID P. NELSON**, DATE  
 Certificate No. **18092**.

<b>Kititias Co. Large Lot Subdivision NO. 08-XX</b>			
<b>A Portion of Section 8, Township 20N., Range 13E., W.M.</b>			
<b>Kititias County, Washington</b>			
DRAWN BY	DATE	JOB NO.	
<b>G. WEISER</b>	<b>04/08</b>	<b>05502-2</b>	
CHECKED BY	SCALE	SHEET	
<b>D. NELSON</b>	<b>1"=300'</b>	<b>1 OF 3</b>	



108 EAST 2ND STREET  
 CLE ELUM, WA 98922  
 PHONE: (509) 674-7433  
 FAX: (509) 674-7419