



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

"Building Partnerships – Building Communities"

LP-09-5

Long Plat application

(To divide lot into 5 or more lots)

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

- Ten large copies of plat with all preliminary drawing requirements complete (reference KCC Title 16 Subdivision Code for plat drawing requirements) and one small 8.5" x 11" 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.
- SEPA Checklist (Only required if your subdivision consists of 9 lots or more.
Please pick up a copy of the Checklist if required)

RECEIVED
JUN 15 2009
Kittitas County
CDS

OPTIONAL ATTACHMENTS

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

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

FEES:

\$200 plus \$10 per lot for Public Works Department;
 \$625 plus \$75 per hour over 12.5 hours for Environmental Health Department;
 \$3305 for Community Development Services Department, PLUS \$470 if SEPA Checklist is required
 \$195 for Fire Marshal

*One check made payable to KCCDS

FOR STAFF USE ONLY

RECEIVED

APPLICATION RECEIVED BY:
(CDS STAFF SIGNATURE)

X Maryland Reed

DATE:

6/15/09

RECEIPT #

00005042

JUN 15 2009
DATE STAMP
Kittitas County
HERE
CDS

NOTES:

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

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

Name: THE HENLEY GROUP INC.
Mailing Address: 10036 VALMAY NW
City/State/ZIP: SEATTLE, WA. 98177
Day Time Phone: 206-782-4400
Email Address: _____

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: CHUCK CRUSE
Mailing Address: 217 E. 4th
City/State/ZIP: ELLENSBURG, WA 98926
Day Time Phone: 509-962-8242
Email Address: _____

3. Street address of property:

Address: LOW ROAD
City/State/ZIP: CLE ELUM, WA 98922

4. Legal description of property: LOTS 21A & 21B - HORSE CANYON EST. S.P.
BKG OF SHORT PLATS - PGS 234-235. PORTION OF SECS. 4&9-
TWP 19N., RANGE 17 E., WM KIT CO, WA.

5. Tax parcel number(s): 19-17-04051-0001 & 19-17-04051-0002

6. Property size: 49.48 (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):

9 LOT PLAT AT HORSE CANYON. INDIVIDUAL WELLS & SEPTIC
SYSTEMS. 60' PRIVATE ACCESS EASEMENTS.

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? BETTAS RD.

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:

Date:

(REQUIRED if indicated on application)

X Charles A. Cress, Jr.

6-11-09

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

Date:

X Thomas E. Roth

6/11/09