



**GENERAL APPLICATION INFORMATION**

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

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

Name: Thomas Needham  
Mailing Address: 35919 11th Ave SW  
City/State/ZIP: Federal Way, WA 98023  
Day Time Phone: 509-881-5249  
Email Address: Sixpointelk@gmail.com

**2. Name, mailing address and day phone of authorized agent, if different from landowner 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. Name, mailing address and day phone of other contact person**

*If different than land owner or authorized agent.*

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Day Time Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**4. Street address of property:**

Address: 351 Ridge Loop Rd  
City/State/ZIP: Cle Elum WA, 98922

**5. Legal description of property (attach additional sheets as necessary):**

Sunlight Waters #2 Lot 14, Block F, Sec 24, TWP 19, RGE 16  
Sunlight Waters #2 Lot 15, Block F, Sec 24, TWP 19, RGE 16

**6. Tax parcel numbers:** 097334 & 297334

**7. Property size:** .31 & .44 (acres)

**8. Land Use Information:**

Zoning: \_\_\_\_\_ Comp Plan Land Use Designation: \_\_\_\_\_

9. Existing and Proposed Lot Information:

Original Parcel Numbers & Acreage

New Acreage (1 parcel number per line)

(Survey Vol. \_\_\_\_, Pg \_\_\_\_)

097334 .31 acres  
297334 .44 acres

\_\_\_\_\_  
\_\_\_\_\_

APPLICANT IS:  OWNER  PURCHASER  LESSEE  OTHER

AUTHORIZATION

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 transmitted to the Land Owner of Record and copies sent to the authorized agent or contact person, as applicable.

Signature of Authorized Agent:  
(REQUIRED if indicated on application)

Date:

X \_\_\_\_\_

\_\_\_\_\_

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

Date:

X T Needham

3-20-19

Treasurer's Office Review

Tax Status: \_\_\_\_\_

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

Kittitas County Treasurer's Office