# KITITAS COUNTY

### 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

"Building Partnerships - Building Communities"

# SHORELINE EXEMPTION PERMITTING

(For projects located within 200 feet of a body of water and/or associated floodway and wetlands under the jurisdiction of the Shoreline Master Program)

### REQUIRED INFORMATION / ATTACHMENTS

A scaled site plan is required showing location of all structures, driveways, well, septic, fences, etc. and
proposed uses and distances from property lines, river, and Horizontal distance from OHWM. To show
the Horizontal distance a profile view from the OHWM to the edge of structure/activity shall also be
shown.
Include JARPA or HPA forms if required for your project by a state or federal agency.
SEPA Checklist, if not exempt per WAC 197-11-800.

\* JARPA and HPA are not required because no work is being done in the stream and the work is not being done by a state agency.

\*\*\*Please note a Shoreline Variance or Shoreline Conditional Use Permit may also be required. See Kittitas County Shoreline Master Program\*\*\*

\* Neither is required because the proposed work, an addition to the side of the building opposite the river, does not increase the level of non-compliance of the existing building

### **APPLICATION FEES:**

\$540.00	Kittitas County Community Development Services
\$550.00	Kittitas County Public Works
\$1,090.00	Fees due for this application when SEPA is not required
\$2,220.00	Fees due for this application when SEPA is required (One check made payable to KCCDS)

FOR STAFF USE ONLY

DATE:
7:30.18

RECEIPT #
SX.18.00018

JUL 30 2018

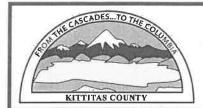
Kittitas Process

## **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:	Jerry Fulks	Jay Morris		
	Mailing Address:	1122 E Pike Street #1421	1518 8th Avenue W		
	City/State/ZIP:	Seattle, WA 98122	Seattle, WA 98119		
	Day Time Phone:	509-300-3006			
	Email Address:	jerryfulks@gmail.com	jaymorris@aol.com		
2.		and day phone of authorized a indicated, then the authorized as			
	Agent Name:	Stone River Engineering Co Craig Si	II, P.E.		
	Mailing Address:	111 N Wright Ave. Suite B			
	City/State/ZIP:	Cle Elum, WA 98922			
	Day Time Phone:	509-674-5080			
	Email Address:	stoneriver@inlandwireless.com			
3.	Name, mailing address and day phone of other contact person  If different than land owner or authorized agent.				
	Name:	Jeff Slothower , Attorney			
	Mailing Address:	201 West Seventh Ave.			
	City/State/ZIP:	Ellensburg, WA 98926			
	Day Time Phone:	509-925-6916			
	Email Address:	office@LWHSD.com			
4.	Street address of prope	erty:			
	Address:	150 North Fork Ranch Road			
	City/State/ZIP:	Cle Elum, WA 98922			
5.	Legal description of pr ACRES 1.92, CD. 6960-A; S	operty: (attach additional shee SEC. 31; TWP. 21; RGE. 16; PTN N1/2 8	ts as necessary) & PTN NW1/4 SE1/4 (LOT 4, B33/P98)		
	m 1 1 (2)	707635			
6.	Tax parcel number(s):			(1,000)	
7.	Property size: 1.92 acre	es .		_(acres)	

# **Project Description**

1.	Briefly summarize the purpose of the project: Remodel portion of existing structure					
	Add laundry/utility room and covered entry on east side of	of existing	ouilding			
	demolish existing garage and portion of existing residence					
2.	What is the primary use of the project (e.g. Re recreation	esidentia	l, Commercial, P	ublic, Rec	reation)?	
3.	What is the specific use of the project (e.g. single family home, subdivision, boat launch, restoration project): single family home					
4.	Fair Market Value of the project, including m	aterials	labor, machine i	rentals, etc	estimate \$30,000	
5.	Anticipated start and end dates of project con	structio	n: Start 2019		End _2019	
	<u>A</u> 1	uthoriza	<u>tion</u>			
Application is hereby made for permit(s) to authorize the activities described herein. I certify that I am familia with the information contained in this application, and that to the best of my knowledge and belief such inform is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activitie hereby grant to the agencies to which this application is made, the right to enter the above-described location t inspect the proposed and or completed work.					te and belief such information at the proposed activities. I	
	rrespondence and notices will be transmitted to the tact person, as applicable.	he Land	Owner of Record	and copie.	s sent to the authorized agen	
	ure of Anthorized Agent: WRED if indicated on application)		Date:			
X_	y W	5	7-50-7019			
	/ /	Date:	7-50-7019			
(Requi	ired for application submittal):		7/17	_		



### **KITTITAS COUNTY** COMMUNITY DEVELOPMENT SERVICES

Receipt Number: CD18-01851

411 N. Ruby St., Suite 2 Ellensburg, WA 98926 509-962-7506 / https://www.co.kittitas.wa.us/cds/ /

Payer/Payee: TEANAWAY LLC 1518 8TH AVE W SEATTLE WA 98119

Cashier: CALVANA CARPER

Date: 07/30/2018

Payment Type: CHECK (1314)

SX-18-00018	Shorelines Exemption	150 N FORK I	RANCH RD CLE		
Fee Desc	ription		Fee Amount	<b>Amount Paid</b>	Fee Balance
Public Wo	orks Shoreline Exemption		\$550.00	\$550.00	\$0.00
Shoreline	Exemption		\$540.00	\$540.00	\$0.00
		SX-18-00018 TOTALS:	\$1,090.00	\$1,090.00	\$0.00
		TOTAL PAID:		\$1,090.00	