

# KITTTAS COUNTY COMMUNITY DEVELOPMENT SERVICES

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

CDS@CO.KITTTAS.WA.US

Office (509) 962-7506

Fax (509) 962-7682

## SHORT PLAT APPLICATION

*(To divide lot into 2-4 lots)*

KITTTAS 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.

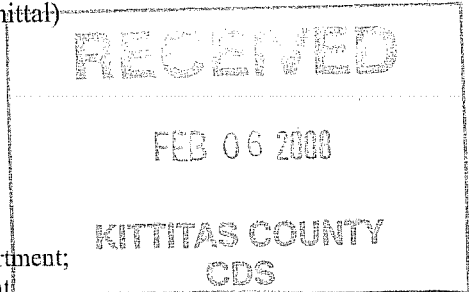
### OPTIONAL ATTACHMENTS

(Optional at submittal, 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/hr. over 4 hrs. for Environmental Health Department;  
 \$630 for Community Development Services Department  
 (One check made payable to KCCDS)



### FOR STAFF USE ONLY

APPLICATION RECEIVED BY:  
(CDS STAFF SIGNATURE)

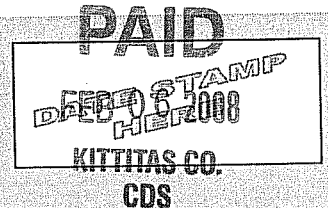
*Lisa M. Gwenz*

DATE:

*2-6-08*

RECEIPT #

*055859*



NOTES:

1. **Name, mailing address and day phone of land owner(s) of record:**  
*Landowner(s) signature(s) required on application form.*

Name: DANNY C. GRIFFIN ETUX  
Mailing Address: 8280 UPPER PEOH POINT ROAD  
City/State/ZIP: CLE ELUM WA 98922  
Day Time Phone: (509) 674-8650  
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: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Day Time Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

3. **Street address of property:**

Address: 8280 UPPER PEOH POINT ROAD  
City/State/ZIP: CLE ELUM WA 98922

4. **Legal description of property:**

PARCEL B OF SURVEY BOOK 37, PAGE 13, AFN 482109, RECORDS OF KITTITAS COUNTY, STATE OF WASHINGTON (PTN OF THE SE1/4 OF THE NE1/4 OF SECTION 8, TOWNSHIP 19 NORTH, RANGE 16 EAST, W.M., KITTITAS COUNTY, WASHINGTON

5. **Tax parcel number(s):** 19-16-08010-0008 (436936)

6. **Property size:** 11.62 ACRES (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):

3 LOT SHORT PLAT  
ZONE: RURAL 3 (R-3)  
WATER: INDIVIDUAL WELLS/*Shared Well*  
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?  
UPPER PEOH POINT 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 \_\_\_\_\_

\_\_\_\_\_

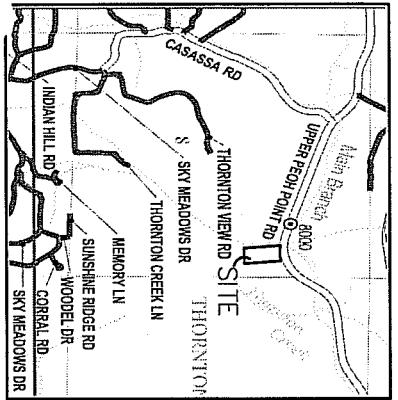
Signature of Land Owner of Record:  
(REQUIRED for application submittal)

Date:

X Danny C Duffin

2-1-08

**GRIFFIN SHORT PLAT**  
**KITTITAS COUNTY SHORT PLAT NO. 08-XX**  
**PORTION OF THE NE 1/4 OF SECTION 8, T.19N., R.16E.,**  
**KITTITAS COUNTY, WASHINGTON**



**APPROVALS**

KITTITAS COUNTY PUBLIC WORKS

Examined and approved this \_\_\_ day of  
 A.D., 20\_\_\_

Kittitas County Engineer

COUNTY PLANNING DIRECTOR

I hereby certify that the "Griffin" Short Plat has been examined by me and that the same complies with the provisions of the Short Plat Act of the Kittitas County Planning Commission.

Kittitas County Planning Director

KITTITAS COUNTY HEALTH DEPARTMENT

Provisionary inspection indicated that conditions may allow use of septic tanks as a temporary means of sewage disposal for some, but not necessarily of building sites within this short plat. Prospective purchasers of lots are urged to consult with the health department about issuance of septic tank permits for lots.

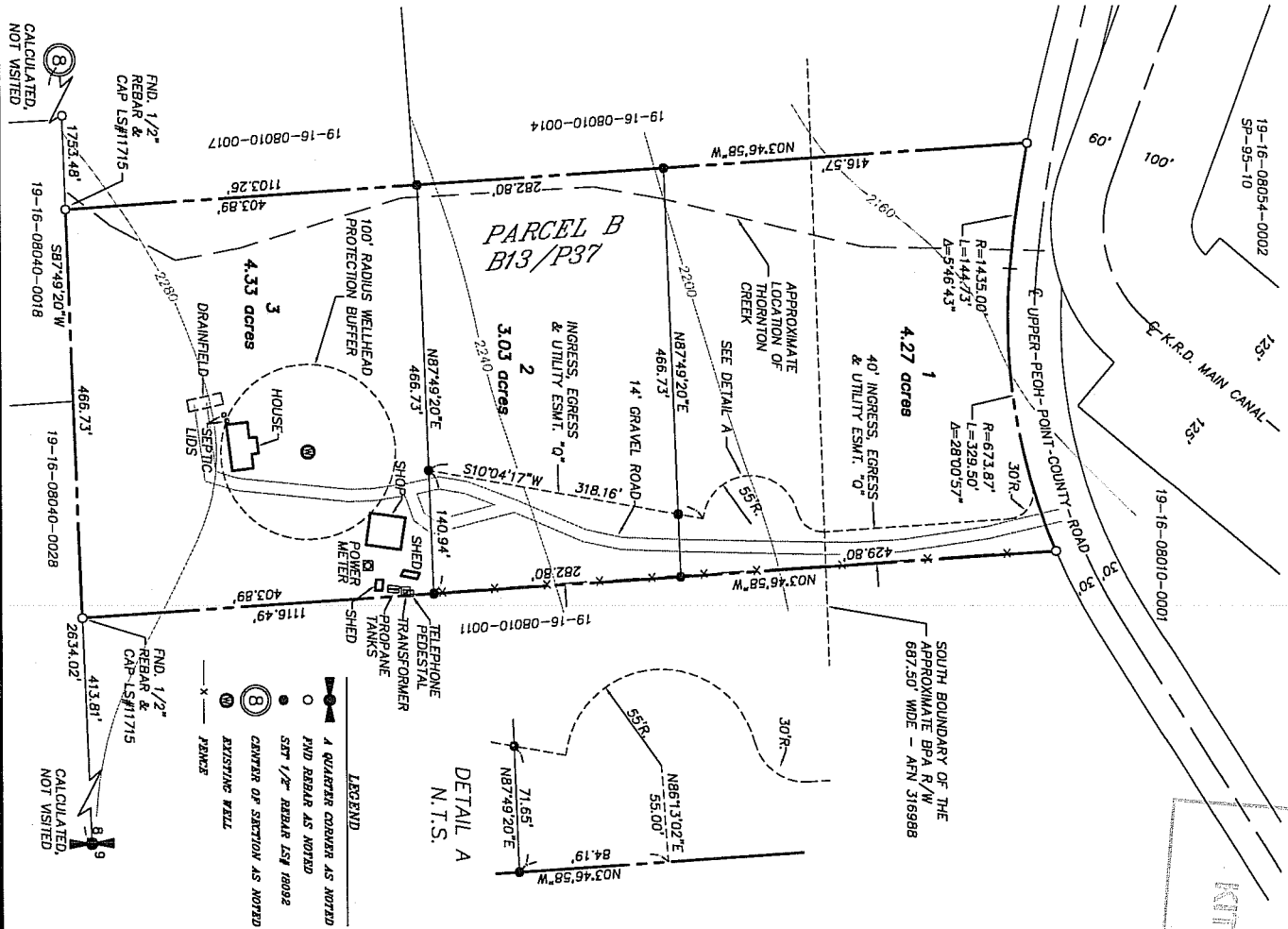
Kittitas County Health Officer

CERTIFICATE OF COUNTY TREASURER

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

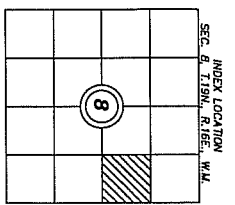
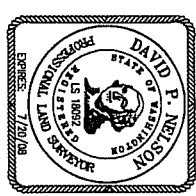
Kittitas County Treasurer

ORIGINAL TAX LOT NO. 19-16-08010-0008 (435935)



**RECEIVED**  
 RECEIVING NO. \_\_\_\_\_  
 SP-08-XX

- MAP SURVEY NOTES:**
1. BASIS OF BOUNDARIES AND SECTION BARRIERS ARE PER A SURVEY FILED IN BOOK 19 OF SURVEYS, PAGE 39, UNDER AUDITOR'S FILE NUMBER 4809, BARROWS OF KITTITAS COUNTY, STATE OF WASHINGTON.
  2. THE PURPOSE OF THIS INSTRUMENT IS TO SUBDIVIDE PARCEL B OF THAT CERTAIN SURVEY BARROWS IN BOOK 19 OF SURVEYS, PAGE 39, UNDER AUDITOR'S FILE NUMBER 4809, BARROWS OF KITTITAS COUNTY, STATE OF WASHINGTON.
  3. KITTITAS COUNTY BELIEVES ON ITS RECORD THAT A SURVEY OF PORTABLE WATER RIGHTS, THE APPROVAL OF THIS DIVISION OF LAND INCLUDING NO GRADUATED OR ASSUMED THAN THERE IS A PORTABLE WATER RIGHT TO EITHER GRADUATED WITHIN THE LAND DIVISION.
  4. ACCESS TO LOT 1 WILL COME OFF OF PARCELS 001-D, 01C OR 002B OR.



RECORDER'S CERTIFICATE

Filed for record this \_\_\_ day of \_\_\_\_\_, 20\_\_\_, at \_\_\_\_\_ M  
 in book \_\_\_\_\_, at page \_\_\_\_\_, at the office 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 conformity with the requirements of the Survey Recording Act of the request of \_\_\_\_\_, DANIEL SMITH, in \_\_\_\_\_, WA.

DAVID P. NELSON  
 Certificate No. 18092

<b>K.C.S.P. NO. 08-XX</b>			
<b>PTN OF THE NE 1/4 OF SEC. 8, T.19N., R.16E., W.M.</b>			
<b>Kittitas County, Washington</b>			
DWN BY	DATE	JOB NO.	
G. WEISER	03/08	08007	
CHKD BY	SCALE	SHEET	
D. NELSON	1"=100'	1 OF 2	

**Encompass**  
 ENGINEERING & SURVEYING

108 EAST 2ND STREET  
 CLE ELUM, WA 99222  
 PHONE: (509) 674-7433  
 FAX: (509) 674-7419