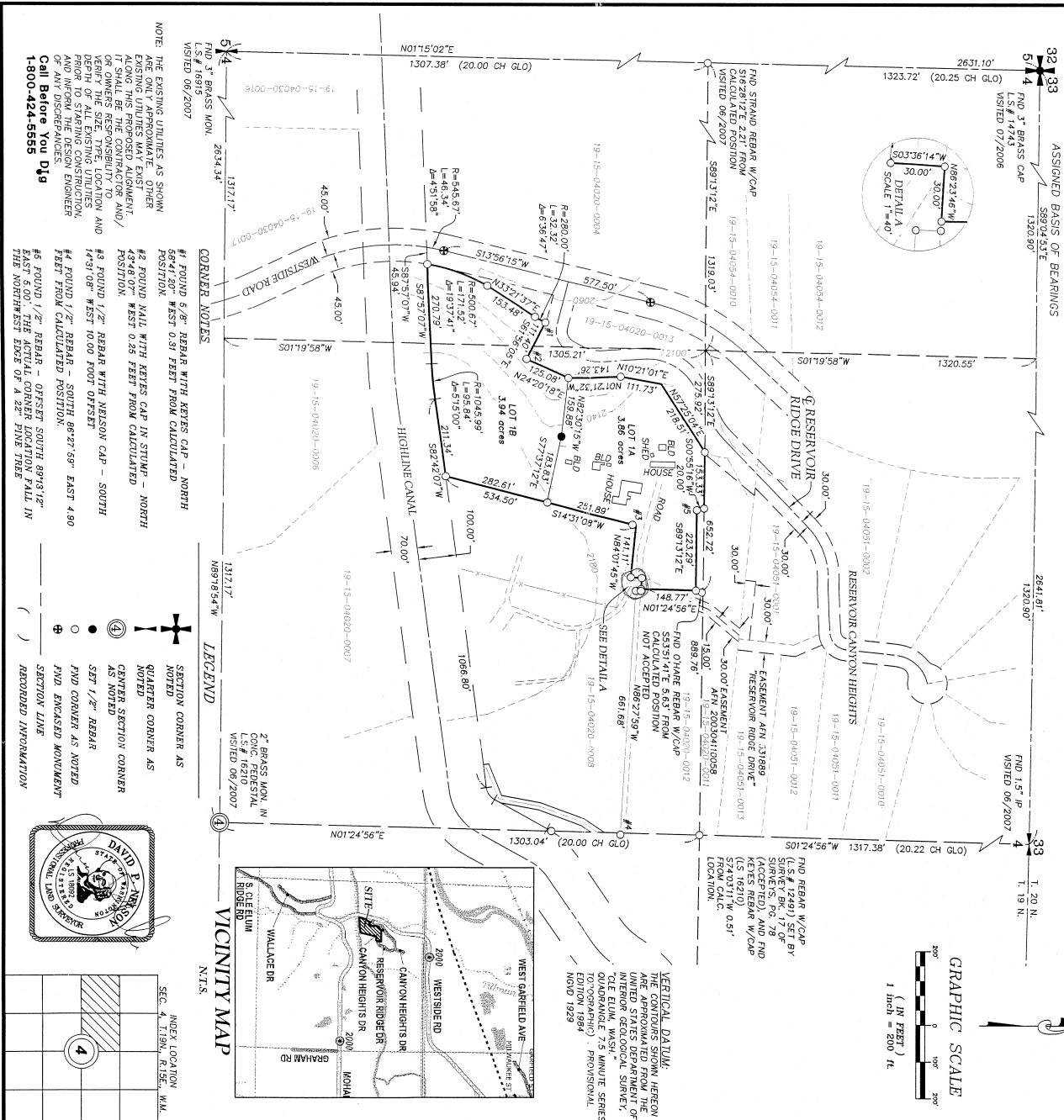


# ISOTALO SHORT PLAT

## K.C.S.P. # 08

PORTIONS OF THE SE 1/4 & SW 1/4 OF THE NW 1/4 OF SECTION 4,  
TOWNSHIP 19 NORTH, RANGE 15 EAST, W.M.,  
KITITAS COUNTY, WASHINGTON.



|                                       |   |         |      |         |  |           |         |       |  |         |       |       |  |          |         |        |  |
|---------------------------------------|---|---------|------|---------|--|-----------|---------|-------|--|---------|-------|-------|--|----------|---------|--------|--|
| <h2 style="margin: 0;">APPROVALS</h2> | <p style="text-align: center;">KITITAS COUNTY PUBLIC WORKS</p> <p style="text-align: center;">Examined and Approved this ____ day of _____ A.D., 20____</p> <p style="text-align: center;">_____<br/>Kititas County Engineer</p>  |         |      |         |  |           |         |       |  |         |       |       |  |          |         |        |  |
| <h2 style="margin: 0;">APPROVALS</h2> | <p style="text-align: center;">COUNTY PLANNING DIRECTOR</p> <p style="text-align: center;">I hereby certify that the "ISOTALO" Short Plat has been examined by me and find that it conforms to the comprehensive plan of the Kititas County Planning Commission.</p> <p style="text-align: center;">Dated this ____ day of _____ A.D., 20____</p> <p style="text-align: center;">_____<br/>Community Development Services Director</p>  |         |      |         |  |           |         |       |  |         |       |       |  |          |         |        |  |
| <h2 style="margin: 0;">APPROVALS</h2> | <p style="text-align: center;">KITITAS COUNTY HEALTH DEPARTMENT</p> <p style="text-align: center;">Preliminary inspection indicated soil conditions may allow use of on-lot septic systems on lots with this plat. However, for some lots, on-lot septic systems are not recommended. Prospective purchasers of lots are urged to make inquiries of the County Health Department about issuance of septic tank permits for lots on this plat.</p> <p style="text-align: center;">Dated this ____ day of _____ A.D., 20____</p> <p style="text-align: center;">_____<br/>Kititas County Health Officer</p> |         |      |         |  |           |         |       |  |         |       |       |  |          |         |        |  |
| <h2 style="margin: 0;">APPROVALS</h2> | <p style="text-align: center;">CERTIFICATE OF COUNTY TREASURER</p> <p style="text-align: center;">I hereby certify that the taxes and assessments are paid for the filed preceding years and for this year in which the plat is now to be filed.</p> <p style="text-align: center;">Dated this ____ day of _____ A.D., 20____</p> <p style="text-align: center;">_____<br/>Kititas County Treasurer</p>   |         |      |         |  |           |         |       |  |         |       |       |  |          |         |        |  |
| <h2 style="margin: 0;">APPROVALS</h2> | <p style="text-align: center;">RECORDER'S CERTIFICATE</p> <p style="text-align: center;">Filed for record this ____ day of _____, 20____ at _____ M in book _____ of page _____ of the request of _____</p> <p style="text-align: center;">_____<br/>DAVID P. NELSON<br/>Surveyor's Name</p> <p style="text-align: center;">_____<br/>RALPH V. PETTIT<br/>Deputy County Auditor</p>   |         |      |         |  |           |         |       |  |         |       |       |  |          |         |        |  |
| <h2 style="margin: 0;">APPROVALS</h2> | <p style="text-align: center;">SURVEYOR'S CERTIFICATE</p> <p style="text-align: center;">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 State of Washington, 1908.</p> <p style="text-align: center;">In WITNESS WHEREOF, I have hereunto set my hand and seal this ____ day of _____, 20____</p> <p style="text-align: center;">_____<br/>DAVID P. NELSON<br/>Surveyor</p> <p style="text-align: center;">Certificate No. 18092</p>   |         |      |         |  |           |         |       |  |         |       |       |  |          |         |        |  |
| <h2 style="margin: 0;">APPROVALS</h2> | <p style="text-align: center;">K.C.S.P. NO. 08-<br/>PRIN OF THE NW 1/4 OF SEC. 4, T. 19N., R. 15E., W.M.<br/>Kititas County, Washington</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DWN BY</td> <td style="width: 20%;">DATE</td> <td style="width: 20%;">JOB NO.</td> <td style="width: 40%;"></td> </tr> <tr> <td>T ROLETTO</td> <td>12/2008</td> <td>07005</td> <td></td> </tr> <tr> <td>CHKD BY</td> <td>SCALE</td> <td>SHEET</td> <td></td> </tr> <tr> <td>D NELSON</td> <td>1"=200'</td> <td>1 OF 2</td> <td></td> </tr> </table>           | DWN BY  | DATE | JOB NO. |  | T ROLETTO | 12/2008 | 07005 |  | CHKD BY | SCALE | SHEET |  | D NELSON | 1"=200' | 1 OF 2 |  |
| DWN BY                                | DATE  | JOB NO. |      |         |  |           |         |       |  |         |       |       |  |          |         |        |  |
| T ROLETTO                             | 12/2008   | 07005   |      |         |  |           |         |       |  |         |       |       |  |          |         |        |  |
| CHKD BY                               | SCALE   | SHEET   |      |         |  |           |         |       |  |         |       |       |  |          |         |        |  |
| D NELSON                              | 1"=200'   | 1 OF 2  |      |         |  |           |         |       |  |         |       |       |  |          |         |        |  |

Encompass

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NOTES: THE EXISTING UTILITIES AS SHOWN ARE ONLY APPROXIMATE. THE CONTRACTOR SHALL BE RESPONSIBLE FOR VERIFYING THE LOCATION AND DEPTH OF ALL EXISTING UTILITIES PRIOR TO STARTING CONSTRUCTION, AND INFORM THE DESIGN ENGINEER OR ANY DISCREPANCIES.

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