

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"

SHORT PLAT APPLICATION

(To divide lot into 2-4 lots)

KITTITAS 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;
 \$720 for Community Development Services Department
 \$130 for Fire Marshal
 (One check made payable to KCCDS)

RECEIVED
 MAR 15 2010
 Kittitas County
 CDS

FOR STAFF USE ONLY

APPLICATION RECEIVED BY:
(CDS STAFF SIGNATURE)

X Mamary Weed

DATE:

3/15/10

RECEIPT #

00007213

RECEIVED
 DATE STAMP
 DATE HERE
 MAR 15 2010

Kittitas County
 CDS

NOTES: _____

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

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

Name: Manuel Magana / Jose Munguia-Bernal
Mailing Address: 905 W Cascade Ct. Unit 40
City/State/ZIP: Ellensburg
Day Time Phone: 899-3004
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: PO Box 959
City/State/ZIP: Ellensburg
Day Time Phone: 962-8242
Email Address: _____

3. **Street address of property:**

Address: Colockum Rd
City/State/ZIP: Ellensburg

4. **Legal description of property:**

N 1/2 of SE 1/4 of SE 1/4 of S6, T18N, R20E, W.M.

5. **Tax parcel number(s):** 18-20-06000-0013

6. **Property size:** 20 (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):

2 lot Short Plat with onsite sewage as per application map

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?
Colockum 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 J Jason MUIGUIA B

3/11/2010

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

Date:

X Manuel Magomac

VICINITY MAP



APPROVALS

KITTITAS COUNTY DEPARTMENT OF PUBLIC WORKS
 EXAMINED AND APPROVED THIS _____ DAY OF _____ A.D., 201____

KITTITAS COUNTY ENGINEER
 KITTITAS COUNTY HEALTH DEPARTMENT
 PRELIMINARY INSPECTION INDICATED SOIL CONDITIONS MAY ALLOW USE OF ON SITE SEWAGE SYSTEMS AS TEMPORARY MEANS OF SEWAGE DISPOSAL FOR SOME BUT NOT NECESSARILY ALL BUILDING SITES WITHIN THIS SHORT PLAT. PROSPECTIVE PURCHASERS OF LOTS ARE URGED TO MAKE INQUIRIES AT THE COUNTY HEALTH DEPARTMENT ABOUT ISSUANCE OF ON SITE SEWAGE DISPOSAL PERMITS FOR LOTS.

DATED THIS _____ DAY OF _____ A.D., 201____

KITTITAS COUNTY HEALTH OFFICER
 CERTIFICATE OF COUNTY PLANNING DIRECTOR
 I HEREBY CERTIFY THAT THE MAGANA SHORT PLAT HAS BEEN EXAMINED BY ME AND FIND THAT IT CONFORMS TO THE COMPREHENSIVE PLAN OF THE KITTITAS COUNTY PLANNING COMMISSION.

DATED THIS _____ DAY OF _____ A.D., 201____

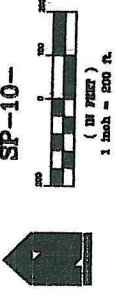
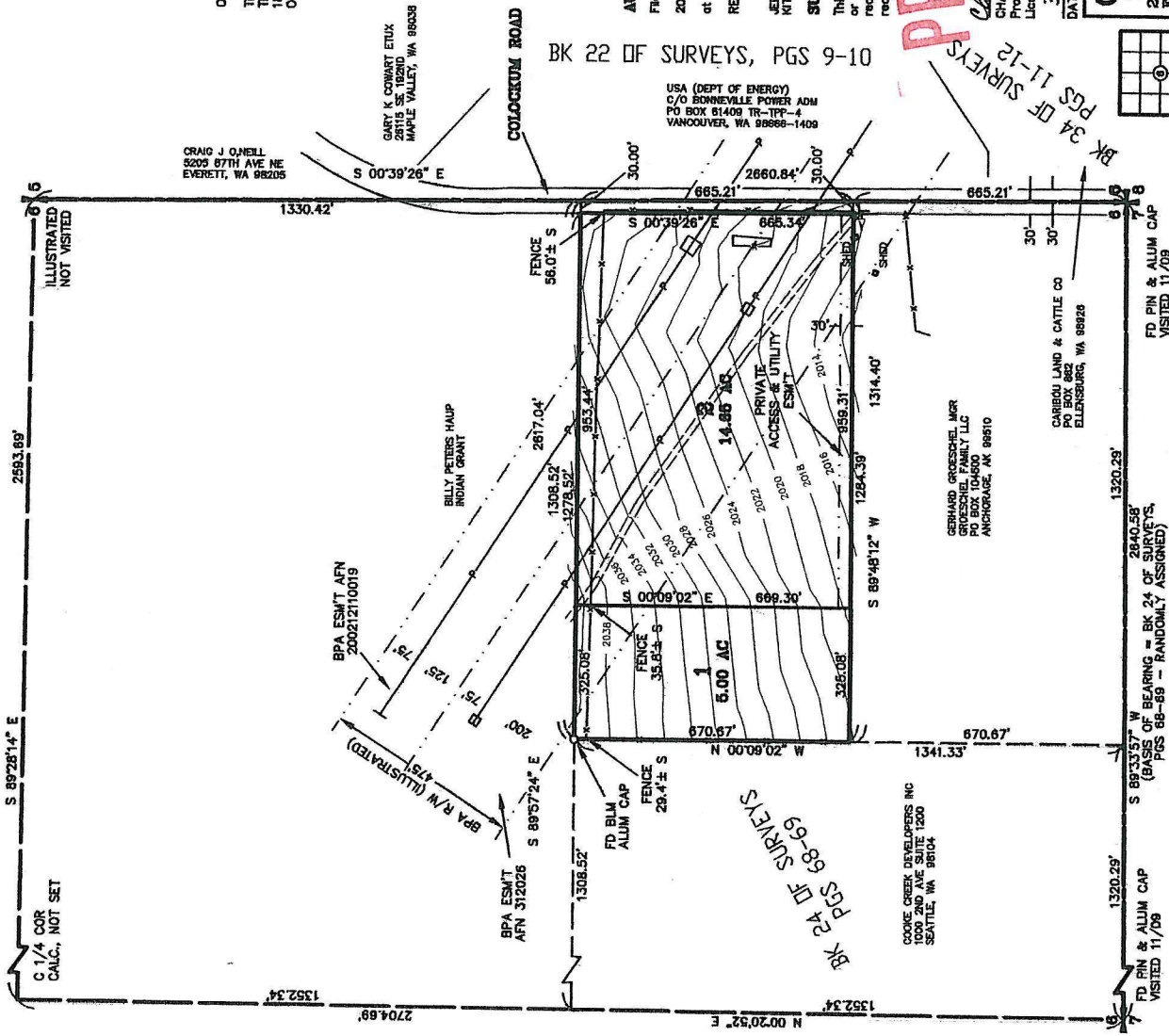
KITTITAS COUNTY PLANNING DIRECTOR
 CERTIFICATE OF KITTITAS COUNTY TREASURER
 I HEREBY CERTIFY THAT THE TAXES AND ASSESSMENTS FOR THE PRECEDING YEARS AND FOR THIS YEAR IN THIS SHORT PLAT IS NOW TO BE FILED.
 PARCEL NO. 10-20-00000-0015

DATED THIS _____ DAY OF _____ A.D., 201____

KITTITAS COUNTY TREASURER
 NAME AND ADDRESS - ORIGINAL TRACT OWNERS
 NAME: MANUEL MAGANA
 ADDRESS: JOSE J. MANUELA-BERNAL, UNIT 40, 905 W CASCADE CT., ELLENBURG, WA 98028
 PHONE: (509) 899-3004
 EXISTING ZONE: AD-20
 SOURCE OF WATER: INDIVIDUAL WELLS
 SEWER SYSTEM: ON SITE SEWAGE SYSTEMS
 STORM WATER: NO IMPROVEMENTS PER THIS APPL.
 WIDTH AND TYPE OF COUNTY ROAD PLAT: 40' PRIVATE ACCESS ROAD PLAT
 NO. OF SHORT PLATTED LOTS: TWO (2)
 SCALE: 1" = 200'

SUBMITTED ON _____
 AUTOMATIC APPROVAL DATE: _____
 RETURNED FOR CAUSE ON _____

MAGANA SHORT PLAT
 PART OF SECTION 6, T. 18 N., R. 20 E., W.M.
 KITTITAS COUNTY, WASHINGTON



- LEGEND**
- SET 5/8" REBAR W/ YELLOW CAP - "CRUISE 18078"
 - FOUND PIN & CAP
 - FENCE
 - OVERHEAD POWER LINE
 - EASEMENT

ORIGINAL PARCEL DESCRIPTION
 THE NORTH HALF OF THE SOUTHEAST QUARTER OF THE SOUTHEAST QUARTER OF SECTION 6, TOWNSHIP 18 NORTH, RANGE 20 EAST, W.M., IN THE COUNTY OF KITTITAS, STATE OF WASHINGTON.

GARY K COWART ETUX
 28115 SW 182ND
 MAPLE VALLEY, WA 98038

CRAIG J O'NEILL
 8209 97TH AVE NE
 EVERETT, WA 98203

USA (DEPT OF ENERGY)
 C/O BONNEVILLE POWER ADM
 PO BOX 61408 TR-1TP-4
 VANCOUVER, WA 98668-1408

BILLY PETERS HAUP
 INDIAN GRANT

GERHARD GROSCHTEL MGR
 GROSCHTEL FAMILY LLC
 PO BOX 104600
 ANCHORAGE, AK 99510

COOKE CREEK DEVELOPERS INC
 1000 2ND AVE SUITE 1200
 SEATTLE, WA 98104

CARROLL LAND & CATTLE CO
 PO BOX 862
 ELLENBURG, WA 98928

AUDITOR'S CERTIFICATE
 Filed for record this _____ day of _____, 2010, at _____, in Book K of Short Plats at page(s) _____ at the request of Cruise & Associates. RECEIVING NO. _____

SURVEYOR'S CERTIFICATE
 This map correctly represents a survey made by me or under my direction in conformance with the requirements of the Survey Recording Act at the request of MANUEL MAGANA in NOVEMBER of 2009.



CRUISE & ASSOCIATES
 PROFESSIONAL LAND SURVEYORS
 217 E. Fourth St.
 Ellensburg, WA 98928 (509) 962-8242
MAGANA SHORT PLAT