



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"

SP-10-00005

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)



FOR STAFF USE ONLY

APPLICATION RECEIVED BY:
(CDS STAFF SIGNATURE)

X 

DATE:

03-23-10

RECEIPT #

7271

DATE STAMP
HERE

NOTES:

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

Name: LUTHER G. PARKER ETUX
Mailing Address: PO BOX 13
City/State/ZIP: SNOQUALMIE WA 98065
Day Time Phone: (425) 222-7700 (GLEN)
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: 394 BACK COUNTRY DR
City/State/ZIP: ELLENSBURG WA 98926

4. **Legal description of property:**

HOWARD'S END NO 4 SHORT PLAT 93-24, LOT C2, SECTION 31, TOWNSHIP 19 NORTH, RANGE 18 EAST, W.M.

5. **Tax parcel number(s):** 19-18-31054-0002 (181536)

6. **Property size:** 20.00 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):

2 LOT SHORT PLAT, ZONE: AG-20, WATER: INDIVIDUAL WELLS, SEWER: SEPTIC AND DRAINFIELD

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?**
HOWARD 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 

23 Mar 10

Letter of Transmittal

Western Washington Division
 165 NE Juniper St., Suite 201, Issaquah, WA 98027
 Tel (425) 392-0250 Fax (425) 391-3055

Eastern Washington Division
 108 East 2nd Street, Cle Elum, WA 98922
 Tel (509) 674-7433 Fax (509) 674-7419

To: Kittitas CO CDS Date: 3-22-10 Job No. 07137
Attn: Dan Valoff Attn: Dan Valoff
Re: G&M PARKER SHORT PLAT

WE ARE SENDING YOU Attached Under separate cover via overnight mail/regular mail the following items:

| PRINTS | PLANS | SHOP DRAWINGS | COPY OF LETTER | CHANGE ORDER | SAMPLES | SPECIFICATIONS | SUBMITTAL |
|--------|-------|---------------|----------------|--------------|---------|----------------|-----------|
| | | | | | | | |

| COPIES | DATE | NO. | DESCRIPTION |
|--------|------|-----|--|
| 5 | | 2 | COPIES w/ contours |
| 1 | | 2 | 8 1/2 x 11 map |
| 1 | | | Application & County fee |
| 1 | | | Public Disclosure Statement |
| 3 | | | Overview Ltr (1 for CDS, 1 for PW, 1 for Health) |
| 1 | | | Subdivision Guarantee & Closures |
| 1 | | | 500' Radius map & List of Owners |
| 1 | | | WTR Availability Ltr for Health Dept. |

THESE ARE TRANSMITTED as checked below:

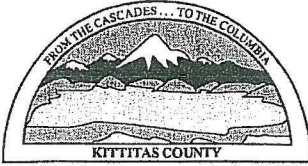
- For approval Approved as submitted Resubmit ____ copies for approval For signature
- For your use Approved as noted Submit ____ copies for distribution
- As requested Returned for corrections Return ____ corrected prints
- For review and comment _____
- FOR BIDS DUE _____ PRINTS RETURNED AFTER LOAN TO US

REMARKS:



Signature: Emy Wansen Title: Engr. & Surv. Tech.

Copy to: File



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PUBLIC DISCLOSURE REQUEST FORM

All records maintained by state and local agencies are available for public inspection unless they are specifically exempted by law. You are entitled to access to public records, under reasonable conditions, and to copies of those records upon paying the costs of making the copy. In most cases, you do not have to explain why you want the records. An agency may require information necessary to establish if disclosure would violate certain provisions of law.

| | | | | | |
|--------------|-----------------------------------|----------|-------|----------|---|
| Name | Encompass Engineering & Surveying | | | | 1 |
| | First | Last | MI | | |
| Address | 108 East 2nd Street | Cle Elum | WA | 98922 | 2 |
| | Street or P.O. Box | City | State | Zip Code | |
| Phone Number | (509) 674-7433 | | | | 3 |

You should make your request as specific as possible; it helps the agency to identify specific records you wish to inspect.

I am requesting public disclosure of

All past and future County correspondence related to this project that is normally sent to the applicant.
 PLEASE EMAIL ALL DOCUMENTS TO information@encompasses.net AS WELL AS HARD COPIES TO ADDRESS ABOVE.



Job# 07137 GEM Parker Short PLAT

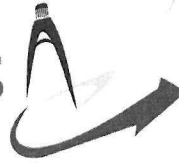
DARRYL PIERCY, DIRECTOR

ALLISON KIMBALL, ASSISTANT DIRECTOR

COMMUNITY PLANNING • BUILDING INSPECTION • PLAN REVIEW • ADMINISTRATION • PERMIT SERVICES • CODE ENFORCEMENT • FIRE INVESTIGATION

Encompass

ENGINEERING & SURVEYING



Together with
Baima & Holmberg

G & M PARKER SHORT PLAT PROJECT OVERVIEW

OVERVIEW:

The attached proposal is to Short Plat Lot C-2 of the Howard's End No. 4 Short Plat SP-93-24, consisting of 20.00 acres, into two 10.00 acre lots. The property is located within the AG-20 zoning of Kittitas County.

UTILITIES:

The project's proposed sewer shall be individual septic and proposed water will be individual wells.

TRANSPORTATION:

An access easement exists to access the subject property along parcel boundaries to the North. However, we are requesting direct access to Howard Road for each lot. Access will be constructed according to Kittitas County Access Requirements.

COMMENTS:

Attached are copies of the proposed plat and Subdivision Guarantee for your review and comment.

PLEASE SEND A COPY OF ALL CORRESPONDENCE TO ENCOMPASS ENGINEERING AND SURVEYING

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