

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-11-0005

SHORT PLAT APPLICATION

(To divide a lot into no more than 4 lots, according to KCC 16.32)

Please type or print clearly in ink. Attach additional sheets as necessary. Pursuant to KCC 15A.03.040, 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.
- Project Narrative responding to Questions 9-11 on the following pages.

OPTIONAL ATTACHMENTS

(Optional at submittal, required at the time of final submittal)

- Certificate of Title (Title Report)
- Computer lot closures



APPLICATION FEES:

\$720.00	Kittitas County Community Development Services (KCCDS)
\$220.00	Kittitas County Department of Public Works
\$130.00	Kittitas County Fire Marshal
\$380.00	Public Health Proportion (Additional fee of \$75/hour over 4 hours)
\$1,450.00	Total fees due for this application (One check made payable to KCCDS)

FOR STAFF USE ONLY

Application Received By (CDS Staff Signature):

[Handwritten Signature]

DATE:

05-27-11

RECEIPT #

11093

PAID

**MAY 27 2011
KITTITAS CO.
CDS**

DATE STAMP IN BOX

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

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: KITTITAS FRUIT CO./ROLAND JANKELSON
Mailing Address: P.O. BOX 98210
City/State/ZIP: LYNNWOOD, WA 98498-0210
Day Time Phone: 253-582-2297
Email Address: _____

2. **Name, mailing address and day phone of authorized agent, if different from landowner 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: P.O. Box 959 - 217 E. 4th
City/State/ZIP: ELLENSBURG, WA 98926
Day Time Phone: 509-962-8242
Email Address: cruseandassoc@kvalley.com

3. **Name, mailing address and day phone of other contact person**
If different than land owner or authorized agent.

Name: _____
Mailing Address: _____
City/State/ZIP: _____
Day Time Phone: _____
Email Address: _____

4. **Street address of property:**

Address: 1280 4th PARALLEL RD.
City/State/ZIP: ELLENSBURG, WA 98926

5. **Legal description of property (attach additional sheets as necessary):**

Parcel B - BK 32 SURVEYS, pgs 177-180 - part of NE 1/4
2-16-19

6. **Tax parcel number(s):** 16-19-02010-0004

7. **Property size:** 10.0 (acres)

8. **Land Use Information:**

Zoning: COMMERCIAL AG Comp Plan Land Use Designation: RURAL

PROJECT NARRATIVE
(INCLUDE RESPONSES AS AN ATTACHMENT TO THIS APPLICATION)

9. Narrative project description (include as attachment): Please include at minimum 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. **2 LOT SHORT PLAT. SHARED AND INDIVIDUAL WELLS. SEPTIC TANKS, CO. RD. ACCESS**
10. Are Forest Service roads/easements involved with accessing your development? If yes, explain.
NO
11. What County maintained road(s) will the development be accessing from?
4TH PARALLEL ROAD
AUTHORIZATION

12. 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 transmitted to the Land Owner of Record and copies sent to the authorized agent or contact person, as applicable.

Signature of Authorized Agent:
(REQUIRED if indicated on application)

x Charles A. Cuneja

Date:

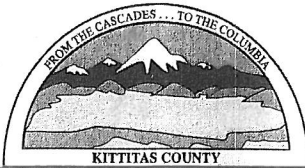
5/26/2011

Signature of Land Owner of Record
(Required for application submitted):

x K. H. Fox Fruit Company
[Signature]

Date:

5/26/2011



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"Building Partnerships – Building Communities"

February 27, 2009

Chuck Cruse
Cruse & Associates
PO Box 959
Ellensburg, WA 98926

RE: Kittitas Fruit Company
Parcel History PA-09-00001
Assessor's Map Number 16-19-02010-0004

Dear Mr. Cruse:

Kittitas County Community Development Services has completed the subject Parcel History. Pursuant to discussion with the Kittitas County Assessor's office regarding the exact acreage of the parcel, it has been determined that the parcel, zoned Commercial Agriculture, is eligible for a one time split.

The parcel currently appears to be 9.70 acres in size. However, an easement has been removed from the property, making it 10.04 acres in size. The final paperwork has been approved by the Assessor's office and once the tax rolls for 2009 are complete, the changes in the parcel will be finalized. (refer to the enclosed email from the Kittitas County Assessor's Office).

As a result, the parcel does meet the minimum 10 acre parcel size to be eligible for a one time split. Please contact me if you have any questions.

Sincerely,

Allison Kimball
Planner II

encl. Assessor email correspondence

c: Kittitas Fruit Company.

