

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-11-00011

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)

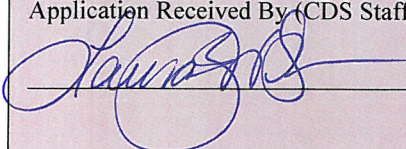
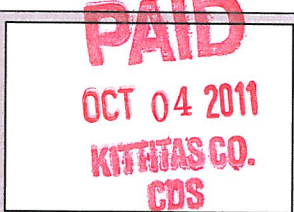
- Certificate of Title (Title Report)
- Computer lot closures

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): 	DATE: <u>10-04-11</u>	RECEIPT # _____	<div style="text-align: center;">  <p>DATE STAMP IN BOX</p> </div>

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

FORM LAST REVISED:04-21-11

Page 1 of 3

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: H&C TRUST
Mailing Address: 1290 CHRISTENSEN ROAD
City/State/ZIP: ELLENSBURG WA 98926
Day Time Phone: HENRY HEEREN (509) 968-9625
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: PHIL CARDWELL
Mailing Address: 21517 62ND ST NE
City/State/ZIP: GRANITE FALLS WA 98252
Day Time Phone: (360) 691-0239 (425) 387-0843
Email Address: threeblackdogs@netscape.com

3. Name, mailing address and day phone of other contact person

If different than land owner or authorized agent.

Name: ENCOMPASS ENGR. AND SURV.
Mailing Address: 108 EAST 2ND ST
City/State/ZIP: CLE ELUM WA 98922
Day Time Phone: (509) 674-7433
Email Address: ginger@encompasses.net

4. Street address of property:

Address: 1290 CHRISTENSEN RD (LOT 1) & CHRISTENSEN RD (LOT 2)
City/State/ZIP: ELLENSBURG WA 98922

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

LOT 1 AND LOT 2 OF SURVEY BOOK 37, PAGE 185. BEING A PORTION OF THE NE 1/4 OF SECTION 33, TOWNSHIP 18 N., RANGE 20 E.

6. Tax parcel number(s): 18-20-33000-0001 (235134) & 18-20-33000-0018 (957383)

7. Property size: LOT 1 AND LOT 2 ARE BOTH 28.72 ACRES EACH (acres)

8. Land Use Information:

Zoning: AG-20 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.
- 10. **Are Forest Service roads/easements involved with accessing your development?** If yes, explain.
- 11. **What County maintained road(s) will the development be accessing from?**

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)

Date:

X _____

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

Date:

X Henry C. Heenan III

5-8-11

PROJECT NARRATIVE

(INCLUDE RESPONSES AS AN ATTACHMENT TO THIS APPLICATION)

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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)

Date:

X Phil Amshuehl

6-8-11

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

Date:

X _____



H&C TRUST SHORT PLAT PROJECT OVERVIEW

OVERVIEW:

The purpose of this application is to create 4 lots consisting of 14.36 acres each from parcel 18-20-33000-0001 (235134) which consist of 28.72 acres and parcel 18-20-33000-0018 (957383) which also consist of 28.72 acres. The subject property is located within the Agriculture 20 (AG-20) Zone and Rural Land Use of Kittitas County.

UTILITIES:

The project's proposed sewer shall be individual septic tanks & drain fields and proposed water supply will be individual wells.

TRANSPORTATION:

Access is via Christensen Road and Parke Creek Road.

COMMENTS:

Attached are copies of the proposed Short Plat for your review and comment.

PLEASE PROVIDE ENCOMPASS ENGINEERING AND SURVEYING WITH COPIES OF ALL CORRESPONDENCE REGARDING THIS SHORT PLAT APPLICATION.

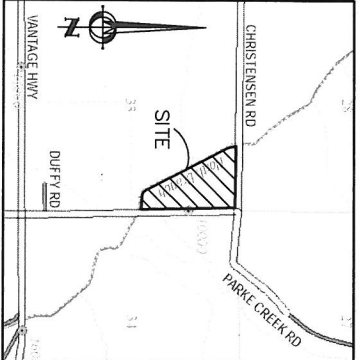


Western Washington Division

165 NE Juniper St., Ste 201, Issaquah, WA 98027
Phone: (425) 392-0250 Fax: (425) 391-3055

Eastern Washington Division

108 East 2nd Street, Cle Elum, WA 98922
Phone: (509) 674-7433 Fax: (509) 674-7419



APPROVALS

KITTITAS COUNTY PUBLIC WORKS
 EXAMINED AND APPROVED THIS ____ DAY OF ____ A.D., 20__
 KITTITAS COUNTY ENGINEER

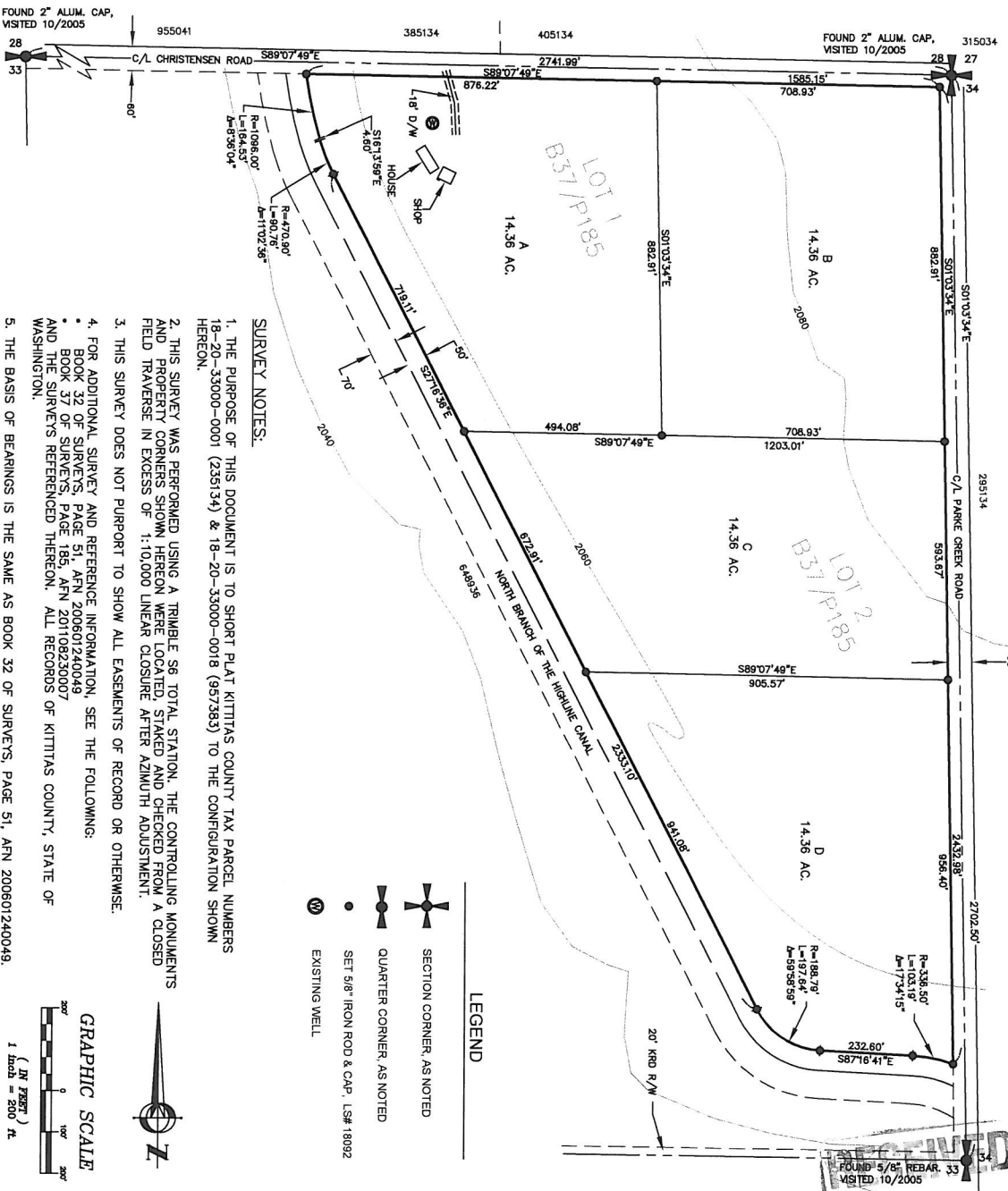
COUNTY PLANNING DIRECTOR
 I HEREBY CERTIFY THAT THE "H&C TRUST" SHORT PLAT HAS BEEN EXAMINED BY ME AND FOUND THAT IT CONFORMS TO THE COMPREHENSIVE PLAN OF THE KITTITAS COUNTY PLANNING COMMISSION.
 DATED THIS ____ DAY OF ____ A.D., 20__
 KITTITAS COUNTY PLANNING DIRECTOR

KITTITAS COUNTY HEALTH DEPARTMENT
 PRELIMINARY INSPECTION INDICATED SOIL CONDITIONS MEET THE REQUIREMENTS FOR SETTING TANKS AS A TEMPORARY MEANS OF SEWER DISPOSAL. THERE ARE NO BUILDINGS OR 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 SETTING TANK PERMITS FOR LOTS.
 DATED THIS ____ DAY OF ____ A.D., 20__
 KITTITAS COUNTY HEALTH OFFICER

CERTIFICATE OF COUNTY TREASURER
 I HEREBY CERTIFY THAT THE TAXES AND ASSESSMENTS ARE PAID FOR THE PRECEDING YEARS AND FOR THIS YEAR IN WHICH THE PLAT IS NOW TO BE FILED.
 DATED THIS ____ DAY OF ____ A.D., 20__
 KITTITAS COUNTY TREASURER
 ORIGINAL TAX LOT NUMBERS: 18-20-33000-0001 (235134) & 18-20-33000-0018 (957383)

RECORDER'S CERTIFICATE
 FILED FOR RECORD THIS ____ DAY OF ____ 20__ AT ____ M.
 IN BOOK ____ OF ____ AT PAGE ____ AT THE REQUEST OF
 DAVID P. NELSON
 SURVEYOR'S NAME
 ERNOLD V. FETIT
 County Auditor Deputy County Auditor

H&C TRUST SHORT PLAT
 A PORTION OF THE NORTHEAST 1/4 OF SECTION 33,
 TOWNSHIP 18 NORTH, RANGE 20 EAST, W.M.,
 KITTITAS COUNTY, WASHINGTON

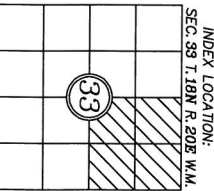
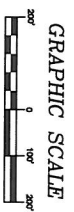


SURVEY NOTES:

1. THE PURPOSE OF THIS DOCUMENT IS TO SHORT PLAT KITTITAS COUNTY TAX PARCEL NUMBERS 18-20-33000-0001 (235134) & 18-20-33000-0018 (957383) TO THE CONFIGURATION SHOWN HEREON.
2. THIS SURVEY WAS PERFORMED USING A TRIMBLE S6 TOTAL STATION. THE CONTROLLING MONUMENTS AND PROPERTY CORNERS SHOWN HEREON WERE LOCATED, STAKED AND CHECKED FROM A CLOSED FIELD TRAVERSE IN EXCESS OF 1:10,000 LINEAR CLOSURE AFTER AZIMUTH ADJUSTMENT.
3. THIS SURVEY DOES NOT PURPORT TO SHOW ALL EASEMENTS OF RECORD OR OTHERWISE.
4. FOR ADDITIONAL SURVEY AND REFERENCE INFORMATION, SEE THE FOLLOWING:
 • BOOK 32 OF SURVEYS, PAGE 51, APN 200601240049
 • BOOK 37 OF SURVEYS, PAGE 185, APN 2011082250007
 AND THE SURVEYS REFERENCED THEREON. ALL RECORDS OF KITTITAS COUNTY, STATE OF WASHINGTON.
5. THE BASIS OF BEARINGS IS THE SAME AS BOOK 32 OF SURVEYS, PAGE 51, APN 200601240049.

LEGEND

- SECTION CORNER, AS NOTED
- QUARTER CORNER, AS NOTED
- SET 5/8" IRON ROD & CAP, L.S.# 18092
- EXISTING WELL



SP-11-XXXXX

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 H&C TRUST
 IN OCT. 2011.
 DAVID P. NELSON
 CERTIFICATE NO. 18092
 DATE

165 NE Juniper Street, Suite 201 • Issaquah, WA 98027 • Phone: (425) 392-0250 • Fax: (425) 391-3055
 Western Washington Division
Encompass
 ENGINEERING & SURVEYING
 Eastern Washington Division
 108 East 2nd Street • Cle Elum, WA 98922 • Phone: (509) 674-7433 • Fax: (509) 674-7419

SHORT PLAT PREPARED FOR H&C TRUST		JOB NO. 11047	
KITTITAS COUNTY		WASHINGTON	
A PORTION OF THE NORTHEAST 1/4, SECTION 33, TOWNSHIP 18 NORTH, RANGE 20 EAST, W.M.			
OWN BY G. WEISER	DATE 10/2011		
CHKD BY D. NELSON	SCALE 1"=200'		
		SHEET 1	OF 2

Letter of Transmittal



Together with
Baima & Holmberg

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 COUNTY CDS
ELLENSBURG, WA 98926

Date: OCTOBER 3, 2011 **Job No.** 11047

Attn:

Re: H&C TRUST 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 WITH CONTOURS
			COUNTY FEES
*3			OVERVIEW LETTER - *1 FOR CDS, 1 FOR PUBLIC WORKS & 1 FOR HEALTH
1			APPLICATION & PUBLIC DISCLOSURE STATEMENT
1			8 ½ X 11 MAP
1			SUBDIVISION GUARANTEE & CLOSURES

THESE ARE TRANSMITTED as checked below:

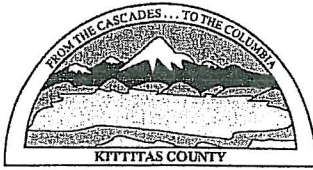
- For approval Approved as submitted Resubmit ____ copies for approval For signature
- For your use Approved as noted Submit ____ copies for distribution
- As requested Returned for corrections Return ____ corrected prints
- For review and comment _____
- FOR BIDS DUE _____ PRINTS RETURNED AFTER LOAN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

REMARKS:



Signature: Gregg Jensen Title: ENGR. & SURV. TECH.

Copy to: File



KITTTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

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

CDS@CO.KITTTITAS.WA.US

Office (509) 962-7506

Fax (509) 962-7682

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			
	First	Last	MI	
Address	108 East 2nd Street	Cle Elum	WA	98922
	Street or P.O. Box	City	State	Zip Code
Phone Number	(509) 674-7433			

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.

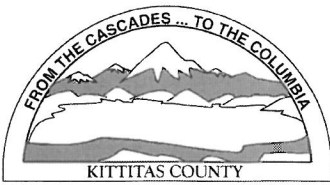


Job # 11047 H&C Trust Short PLAT

DARRYL PIERCY, DIRECTOR

ALLISON KIMBALL, ASSISTANT DIRECTOR

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



KITTITAS COUNTY PERMIT CENTER
411 N. RUBY STREET, ELLENSBURG, WA 98926

RECEIPT NO.: 00012457

COMMUNITY DEVELOPMENT SERVICES
(509) 962-7506

PUBLIC HEALTH DEPARTMENT
(509) 962-7698

DEPARTMENT OF PUBLIC WORKS
(509) 962-7523

Account name: 024084

Date: 10/4/2011

Applicant: H&C TRUST

Type: check # 3404

<u>Permit Number</u>	<u>Fee Description</u>	<u>Amount</u>
SP-11-00011	CDS FEE FOR SHORT PLAT	720.00
SP-11-00011	EH SHORT PLAT FEE	380.00
SP-11-00011	PUBLIC WORKS SHORT PLAT FEE	220.00
SP-11-00011	FIRE MARSHAL SHORT PLAT FEE	130.00
	Total:	1,450.00