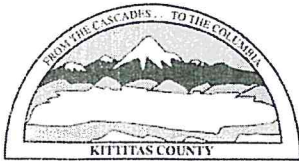


01A-15-00003



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

ZONING VARIANCE APPLICATION

Relief from a provisions of Title 17 when, because of unusual circumstances, following such provision would cause undue hardship (See KCC 17.84)

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.

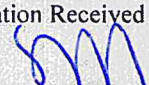
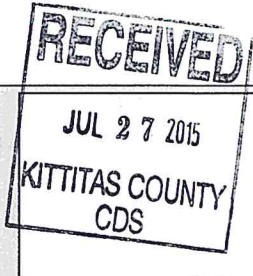
REQUIRED ATTACHMENTS

- Site plan of the property with all proposed: buildings; points of access, roads, and parking areas; septic tank and drainfield and replacement area; areas to be cut and/or filled; and, natural features such as contours, streams, gullies, cliffs, etc.
- Project Narrative responding to Questions 9 and 10 on the following pages.

APPLICATION FEES:

\$523.00 Kittitas County Community Development Services (KCCDS)
 \$235.00 Kittitas County Environmental Health
 \$50.00 Kittitas County Department of Public Works
 \$65.00 Kittitas County Fire Marshal
 \$873.00 **Total fees due for this application** (One check made payable to KCCDS)

For Staff Use Only

Application Received By (CDS Staff Signature): 	DATE: <u>7/27/15</u>	RECEIPT # <u>26382</u>	

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

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: Sergey and Yelena Shchedrin
Mailing Address: 2447 NE Park Drive
City/State/ZIP: Issaquah, WA 98029
Day Time Phone: 305-785-8159
Email Address: shchedrin168@gmail.com

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

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: 541 Snoqualmie Drive
City/State/ZIP: Snoqualmie Pass, WA 98068

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

6. Tax parcel number: 22-11-15051-0007

7. Property size: 0.22 (acres)

8. Land Use Information:

Zoning: residential Comp Plan Land Use Designation: lamird

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, and the provision of zoning code for which this variance is requested and the way in which you wish to vary from the code.
10. **A variance may be granted only when the following criteria are met (see KCC 17.84.10). Please describe in detail how each criteria is met for this particular request:**
- A. Unusual circumstances or conditions applying to the property and/or the intended use that do not apply generally to other property in the same vicinity or district, such as topography.
 - B. Such variance is necessary for the preservation and enjoyment of a substantial property right of the applicant possessed by the owners of other properties in the same vicinity.
 - C. That authorization of such variance will not be materially detrimental to the public welfare or injurious to property in the vicinity.
 - D. That the granting of such variance will not adversely affect the realization of the comprehensive development pattern.

AUTHORIZATION

11. 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:

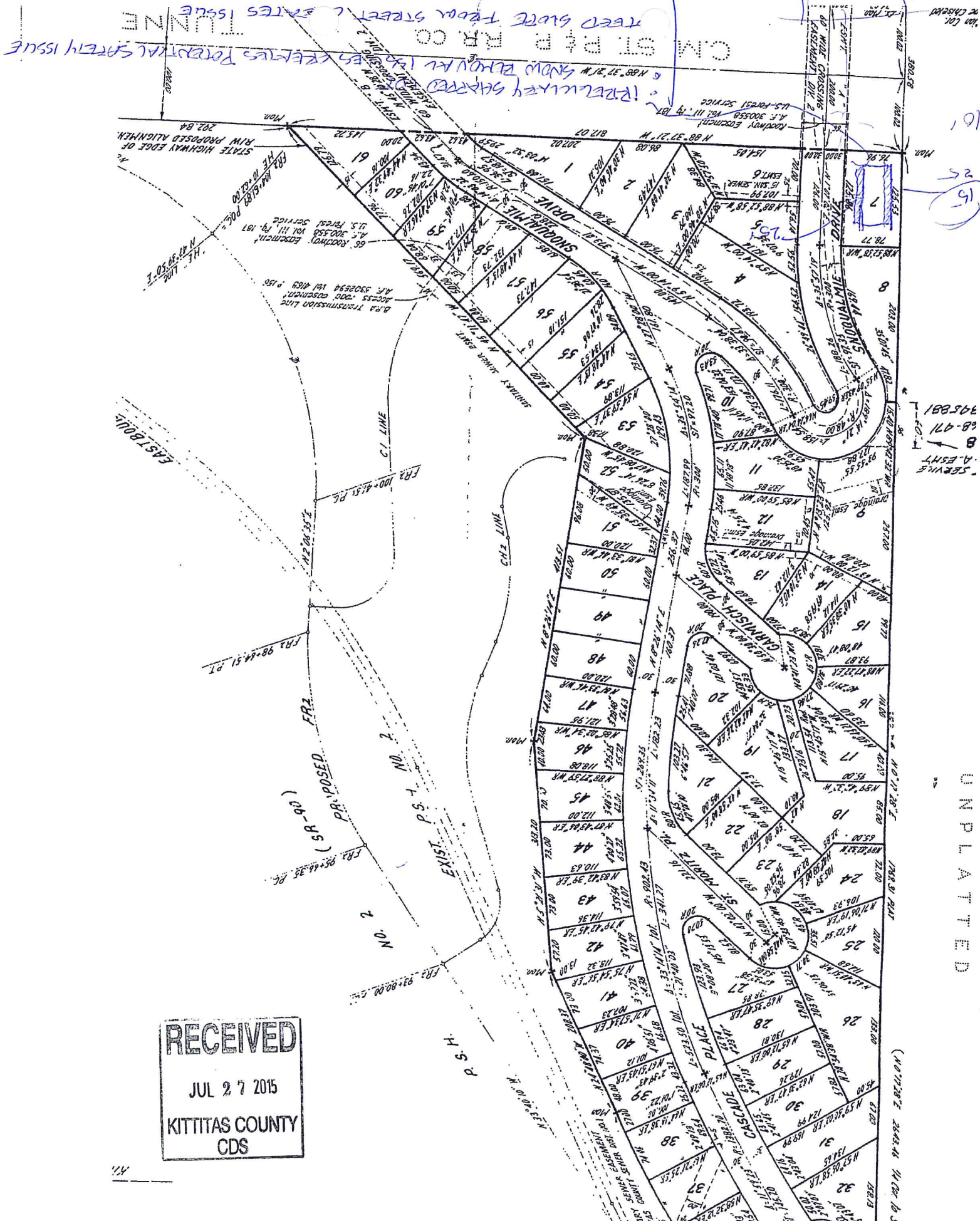
X _____

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

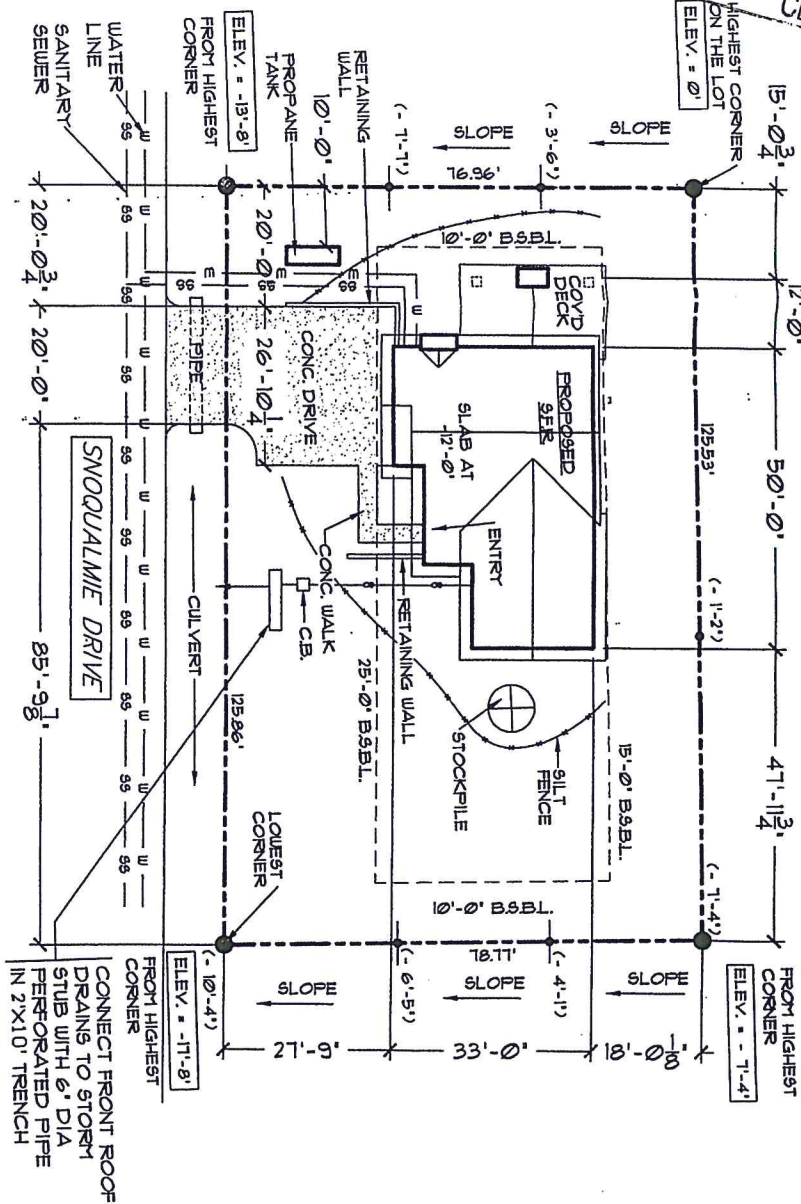
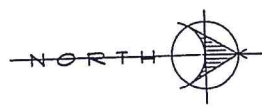
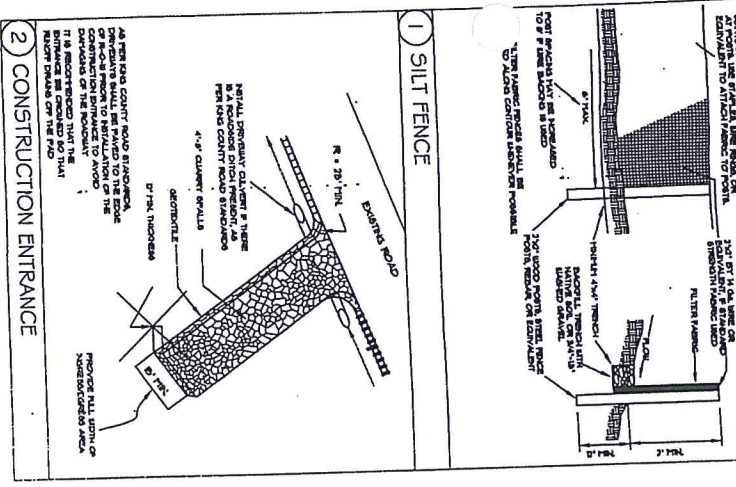
Date:

X  _____

7/27/15



RECEIVED
 JUL 27 2015
 KITTITAS COUNTY
 CDS



LOT COVERAGE (STRUCTURES)	
5,110 SF.	TOTAL LOT AREA (APPROX.)
1,400 SF.	PROPOSED BUILDING COVERED
2,180 SF.	IMPERVIOUS COVERED
22.31 %	

AVERAGE GRADE:	
HIGHEST CORNER:	ELEV. = 0'-0"
LOWEST CORNER:	ELEV. = -11'-8"
AVERAGE GRADE:	ELEV. = -8'-10"

PARCEL NUMBER:
539535

LEGAL DESCRIPTION:
LOT 7 SNOQUALMIE DRIVE
SNOQUALMIE PASS, WA 98068



879 RAINIER AVE. N. SUITE
 SITE: A200
 RENTON, WA 98057
 PH: (206) 838-8250

OWNER INFORMATION:

SITE ADDRESS:

SITE PLAN

DRAWN BY: RM
 DATE ISSUED: 5-00-15
 REVISED:

Project Narrative

I plan to build 2700 square feet single family home in Hyak Community at Snoqualmie Pass, WA.

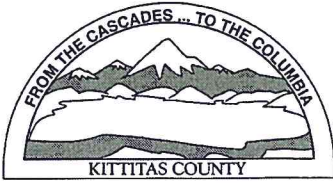
I am requesting to keep proposed setbacks as per site plan front setback of 25ft. and rear setback of 15ft. as it indicated on a site plan.

The house was designed and engineered to meet unique environmental and topographical challenges of Washington State's Central Cascades.

The lot has irregular shape that presents architectural and engineering issues, snow removal creates potential safety hazard, and short, steep slope from street creates access and parking issues for the residents.

Granting the variance will not alter the character of the neighborhood since all existing homes have front setback of 25ft. and rear setback of 15ft.





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

RECEIPT NO.: 00026382

COMMUNITY DEVELOPMENT SERVICES
(509) 962-7506

PUBLIC HEALTH DEPARTMENT
(509) 962-7698

DEPARTMENT OF PUBLIC WORKS
(509) 962-7523

Account name: 030080

Date: 7/27/2015

Applicant: SERGEY & YELENA SHCHEDRIN

Type: check # 338

<u>Permit Number</u>	<u>Fee Description</u>	<u>Amount</u>
VA-15-00003	ADMINISTRATIVE VARIANCE	523.00
VA-15-00003	ADMIN VARIANCE FM FEE	65.00
VA-15-00003	PUBLIC WORKS ADMIN VARIANCE	50.00
VA-15-00003	EH LAND USE VARIANCE REVIEW	235.00
	Total:	873.00