

**KITTITAS COUNTY  
COMMUNITY DEVELOPMENT SERVICES**

**LONG PLAT APPLICATION**

*(To divide lot into 5 or more lots)*

KITTITAS COUNTY ENCOURAGES THE USE OF PRE-APPLICATION MEETINGS. PLEASE CALL THE DEPARTMENT IF YOU WOULD LIKE TO SET UP A MEETING TO DISCUSS YOUR PROJECT. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

PLEASE TYPE OR PRINT CLEARLY IN INK. ATTACH ADDITIONAL SHEETS AS NECESSARY. THE FOLLOWING ITEMS MUST BE ATTACHED TO THIS APPLICATION PACKET:

**REQUIRED ATTACHMENTS**

- Ten large copies of plat with all preliminary drawing requirements complete (reference KCC Title 16 Subdivision Code for plat drawing requirements) and one small 8.5" x 11" copy
- Certificate of Title (Title Report)
- Computer lot closures
- Address list of all landowners within 300 feet of the site's tax parcel. If adjoining parcels are owned by the applicant, the 300 feet extends from the farthest parcel. If the parcel is within a subdivision with a Homeowners or Road Association, please include the address of the association.
- SEPA Checklist (Only required if your subdivision consists of 9 lots or more. Please pick up a copy of the Checklist if required)

**FEES:** (one check payable to KCCDS)

\$200 plus \$10 per lot to Public Works Department;  
\$625 plus \$50 per hour over 12.5 hours to Environmental Health Department;  
\$800 to Community Development Services Department, PLUS \$200 if SEPA Checklist is required

**FOR STAFF USE ONLY**

I CERTIFY THAT I RECEIVED THIS APPLICATION AND IT IS COMPLETE.

SIGNATURE:

DATE:

RECEIPT #

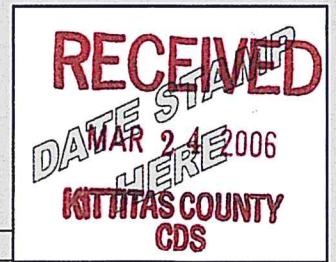
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3.24.06

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NOTES:

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

Name: Back County Resources, LLC  
Mailing Address: 301 West 1st Street, #B  
City/State/ZIP: Cle Elum, WA 98922  
Day Time Phone: 509-674-6828

2. **Name, mailing address and day phone of authorized agent (if different from land owner of record):**

Agent Name: GeoDatum  
Mailing Address: 22525 SE 64th Place, #266  
City/State/ZIP: Issaquah, WA 98027  
Day Time Phone: 425-837-8083

3. **Contact person for application (select one):**

Owner of record     Authorized agent

All verbal and written contact regarding this application will be made only with the contact person.

4. **Street address of property:**

Address: Woods & Steele Road  
City/State/ZIP: Cle Elum, WA 98922

5. **Legal description of property:**

Parcel E of that certain survey recorded in Book 30 of Surveys, Page 61, AF# 200406010081

6. **Tax parcel number(s):** 19-15-0700-0028

*07000 AS PER APPLICANT SDH*

7. **Property size:** 45.0 (acres)

8. **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):

The project consists of a performance based cluster subdivision pursuant to Chapter 16.09 KCC. The subject property is approximately 45 acres in area and will be divided into 13 one-acre single family residential parcels, one 20.75-acre remainder parcel and 11.25 acres of open space, including 5.0 acres to be dedicated to the public for use as a sno-park and/or other recreational activities. Water supply is proposed from a Group B water system and each lot will be served by on site sewage disposal. Access to the site is from USFS Road 4510 via Woods & Steele Road. Private road improvements will be completed in conformance with Chapter 12.12 KCC. A summary of the public benefit ratings system has been included with this application. Please refer to the attached preliminary plat for additional information.

9. Are Forest Service roads/easements involved with accessing your development? Yes No (Circle)  
If yes, explain: The USFS has an easement over the subject property and the road is identified as USFS Rd. 4510.

10. What County maintained road(s) will the development be accessing from? Woods & Steele Rd.

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.

12. Are there any other pending applications associated with the property associated with this application?  
 Yes  No

Signature of Authorized Agent:

Date:

X \_\_\_\_\_

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

Date:

X 

3/23/06