

KITTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

411 N. Ruby St., Suite 2, Ellensburg, WA 98926 CDS@CO.KITTITAS.WA.US Office (509) 962-7506

"Building Partnerships - Building Communities"

SHORELINE EXEMPTION PERMITTING

(For projects located within 200 feet of a body of water and/or associated floodway and wetlands under the jurisdiction of the Shoreline Master Program)

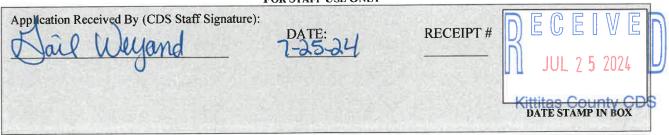
REQUIRED INFORMATION / ATTACHMENTS		
Je 🕱	A scaled site plan is required showing <u>location of all</u> structures (including decks), driveways/impervious surfaces, well, septic, propane tanks, fences, etc. and proposed uses and distances from property lines river, and Horizontal distance from OHWM. To show the Horizontal distance a profile view from the OHWM to the edge of structure/activity shall also be shown.	
	Include JARPA or HPA forms if required for your project by a state or federal agency.	
	SEPA Checklist, if not exempt per WAC 197-11-800.	
	VSP sponsored fish hatchery enhancement project: please provide documentation signed by the curren VSP coordinator for verification. (CDS & PW fees are waived for these projects**)	

Please note a Shoreline Variance or Shoreline Conditional Use Permit may also be required. See Kittitas County Shoreline Master Program

APPLICATION FEES:

\$600.00	Kittitas County Community Development Services**
\$550.00	Kittitas County Public Works**
	Fees due for this application when SEPA is not required**
\$2,960.00	Fees due for this application when SEPA (\$1,810.00) is required** (One check made payable to KCCDS)

FOR STAFF USE ONLY



General Application Information

7.	Property size: 0.43 ac	cres	(acres)
6.	Tax parcel number(s):	265334	
5.	Legal description of property SUMMERSIDE ADI	operty: (attach additional sheets as necessary) DITION LOT 20, BLOCK 3 SEC. 1; TWP. 19; RGE.	. 14
	City/State/ZIP:	Cle Elum WA 98922	
	Address:	741 Kiias Elk Trail	
4.	Street address of prop	erty:	
	Email Address:		
	Day Time Phone:		
	City/State/ZIP:		
	Mailing Address:		
	Name:		
3.		and day phone of other contact person oner or authorized agent.	
	Email Address:	lissy@merleinc.com	
	Day Time Phone:	509-306-6227	
	City/State/ZIP:	Cle Elum WA 98922	
	Mailing Address:	106 N Peoh Ave	
	Agent Name:	Lissy Hamm	
2.	Name, mailing address If an authorized agent is	and day phone of authorized agent, if different from land indicated, then the authorized agent's signature is required	lowner of record: for application submittal.
	Email Address:	mhollinshead@hotmail.com	
	Day Time Phone:		
	City/State/ZIP:	Preston Wa 98050	
	Mailing Address:	PO Box 925	
	Name:	Mike & Roberta Hollinshead	
1.		(s) required on application form.	

Project Description

1.	Briefly summarize the purpose of the project Create an outdoor hangout and storage sp	et: pace			
2.	What is the primary use of the project (e.g. Residential, Commercial, Public, Recreation)? Recreation				
3.	What is the specific use of the project (e.g. si Storage space	ingle family home, subdivision, boat launch, restoration project			
4.	Fair Market Value of the project, including	materials, labor, machine rentals, etc. \$120k			
5.	Anticipated start and end dates of project co				
		Authorization			
	with the information contained in this application is true, complete, and accurate. I further certify	horize the activities described herein. I certify that I am familiar on, and that to the best of my knowledge and belief such information that I possess the authority to undertake the proposed activities. I cation is made, the right to enter the above-described location to			
		the Land Owner of Record and copies sent to the authorized ag			
conta	act person, as applicable.				
and the same of	are of Authorized Agent:	Date:			
EQUI	IRED if indicated on application)	7/18/24			
Lu	y gramm	7710/24			
	re of Land Owner of Record ed for application submittal);	Date:			
equire	eg for appacation suprimus;	71:0101			

FOR STAFF USE ONLY

1. Provide section, townshi			Range E., W.M	
2. Latitude and longitude c	coordinates of proj	ect location (e.g. 47.03	922 N lat. / -122.89142 W _[use decimal degrees –]	V long.): NAD 83]
3. Type of Ownership: (ch				
☐ Private	☐ Federal	☐ State	☐ Local	🗖 Tribal
4. Land Use Information:				
Zoning:		Comp Plan Land Us	e Designation:	
5. Shoreline Designation: (check all that app	ly)		
☐ Urban Conservance	y 🖵 Shore	line Residential	☐ Rural Conserv	vancy
□ Na	itural	☐ Aqu	atic	
6. Requested Shoreline Exc	emption per WAC	173.27.040:		
	7	vegetation .		
7. Will the project result in	clearing of tree or	shrub canopy?		
□ Ye	es	□ No		
If 'Yes', how much clearing	will occur?		(square	e feet and acres)
8. Will the project result in	re-vegetation of t	ree or shrub canopy?		
□ Ye	es	□ No		
If 'Yes', how much re-vegeta	ation will occur?_		(squar	e feet and acres)
		Wetlands		
9. Will the project result in	wetland impacts?			
□ Ye	es	□ No		
If 'Yes', how much wetland	will be permanent	ly impacted?	(squa	re feet and acres
10. Will the project result in	wetland restorati	on?		
□ Ye	es	□ No		
If 'Yes', how much wetland	will be restored?_		(square feet and acr	es)

Impervious Surfaces 11. Will the project result in creation of over 500 square feet of impervious surfaces? □ No ☐ Yes If 'Yes', how much impervious surface will be created? (square feet and acres) 12. Will the project result in removal of impervious surfaces? ☐ No ☐ Yes If 'Yes', how much impervious surface will be removed? (square feet and acres) **Shoreline Stabilization** 13. Will the project result in creation of structural shoreline stabilization structures (revetment/bulkhead/riprap)? ■ No ☐ Yes If 'Yes', what is the net linear feet of stabilization structures that will be created? 14. Will the project result in removal of structural shoreline stabilization structures (revetment/bulkhead/riprap)? ☐ No ☐ Yes If 'Yes', what is the net linear feet of stabilization structures that will be removed? Levees/Dikes 15. Will the project result in creation, removal, or relocation (setting back) of levees/dikes? ☐ Yes ☐ No If 'Yes', what is the net linear feet of levees/dikes that will be created?_____ If 'Yes', what is the net linear feet of levees/dikes that will be permanently removed? If 'Yes', what is the linear feet of levees/dikes that will be reconstructed at a location further from the OHWM? Floodplain Development 16. Will the project result in development within the floodplain? (check one) ☐ No ☐ Yes If 'Yes', what is the net square feet of structures to be constructed in the floodplain? *Note: A floodplain development is required per KCC 14.08; please contact Kittitas County Public Works

☐ No

17. Will the project result in removal of existing structures within the floodplain? (check one)

If 'Yes', what is the net square footage of structures to be removed from the floodplain?_____

☐ Yes

Overwater Structures

18. Will the project	result in constru	ction of an overwater dock, pier, or float? (check one)	
	☐ Yes	□ No	
If 'Yes', how many	overwater struct	ures will be constructed?	
What is the net squa	re footage of wa	ter-shading surfaces that will be created?	
19. Will the project	result in remova	l of an overwater dock, pier, or float? (check one)	
	☐ Yes	□ No	
If 'Yes', how many o	overwater struct	ures will be removed?	
What is the net squa	re footage of wa	ter-shading surfaces that will be removed?	
		Summary/Conclusion	
20. Will the propose Master Program	ed use be consisten? (attach additi	ent with the policies of RCW 90.58.020 and the Kittitas County Shoonal sheets if necessary)	reline
Please explain:	☐ Yes	□ No	
<u></u>			
21. Provide any add functions: (attack	litional informat ch additional she	ion needed to verify the project's impacts to shoreline ecological sets and relevant reports as necessary)	
<u></u>			
<u></u>			
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