

8. Existing and Proposed Lot Information

Original Parcel Number(s) & Acreage

(1 parcel number per line) 962429

20-14-15050-1758 \ P#96429 ac: 1.01 (0.010)

20-14-15050-1759 \ P#96430 ac: 0.97 (0.966)

20-14-15050-1760 \ P#96431 ac: 0.91 (0.907)

20-14-15050-1761 \ P#96432 ac: 0.88 (0.884)

20-14-15050-1762 \ P#962433 ac: 0.97 (0.793)

New Acreage

(Survey Vol. ____, Pg ____)

Parcel A: (17-59) ac: 1.291

Parcel B: (17-60) ac: 1.174

Parcel C: (17-61) ac: 1.10 (1.086)

Parcel D: (17-62) ac: 1.00 (1.008)

APPLICANT IS: ☒ OWNER ☐ PURCHASER ☐ LESSEE ☐ OTHER

AUTHORIZATION


9. 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.

NOTICE: Kittitas County does not guarantee a buildable site, legal access, available water or septic areas, for parcel receiving approval for a Boundary Line Adjustment.

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  (date) 6/21/23

Signature of Land Owner of Record

(Required for application submittal):

X  (date) 6/21/23
X  (date) 6/21/23

Suncadia Resort LLC, a Delaware limited liability company By i Managing Member, LCIF Suncad LLC, a Delaware limited liability company

THIS FORM MUST BE SIGNED BY COMMUNITY DEVELOPMENT SERVICES AND THE TREASURER'S OFFICE PRIOR TO SUBMITTAL TO THE ASSESSOR'S OFFICE.

TREASURER'S OFFICE REVIEW

Tax Status: Paid

By: Kyle Wusschhoff

Date: 12/26/2024

COMMUNITY DEVELOPMENT SERVICES REVIEW

() This BLA meets the requirements of Kittitas County Code (Ch. 16.08.055).

Deed Recording Vol. ____ Page ____ Date ____ **Survey Required: Yes ____ No ____

Card #: _____

Parcel Creation Date: _____

Last Split Date: _____

Current Zoning District: _____

Preliminary Approval Date: _____

By: _____

Final Approval Date: _____

By: _____