



STATEMENT OF OWNERSHIP/APPLICANT AUTHORITY

To be completed by staff

Date of Application: _____

Staff Initials: _____

Permit Number: _____

I certify or declare under penalty of perjury under the laws of the state of Washington that:

1. This application is authorized by ALL landowners with authority to bind the land/property;
2. That the developer is operating under the landowner's authority;
3. That the developer and/or landowner is either an individual or a duly formed and qualified corporation, partnership, or other legal entity; and
4. That the person signing all applications or other legal documents is authorized by the legal entity and/or landowner to do so; and
5. That the application and submittals are true and correct to the best of my knowledge with the information that I have.

Applicant Signature: _____

Name: _____

Address: _____

Phone: _____

E-mail address: _____

Property Owner(s) Signature _____

Second signatory (if applicable) _____

Address: _____

Address 2 (if applicable): _____

Phone(s): _____

E-mail address(es): _____

NOTE ON ENTERING PROPERTY

The City of Lake Stevens may enter onto the property, which is the subject of this application, during the hours of 7:00am to 5:00pm, Monday – Friday, for the sole purpose of inspecting the limited area of the property necessary to process this application. In the event the City determines that such an inspection is necessary during an alternate day or time, the City employees or agents will contact applicant verbally or in writing at least 24 hours prior to entering.

LEGAL DESCRIPTION

[illegible]