



Planning & Community Development  
1812 Main Street, P.O. Box 257  
Lake Stevens, WA 98258

<b>To be completed by staff</b>
Date of Application: _____
Permit Number Assigned: _____
Staff Initials: _____

**STATEMENT OF OWNERSHIP/APPLICANT AUTHORITY**

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

1. This application is authorized by the all the land owners with authority to bind the land/property;
2. That the developer is operating under the land owner'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 information.

**Applicant**

Signature: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 E-mail address: \_\_\_\_\_

**Property Owner #1**

Signature: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 E-mail address: \_\_\_\_\_

**Agent (other than applicant)**

Signature: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 E-mail address: \_\_\_\_\_

**Property Owner #2**

Signature: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 E-mail address: \_\_\_\_\_

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