

AUTHORIZATION

13. Application is hereby made for A COMPREHENSIVE PLAN AMENDMENT 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.

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)

Date: 6-28-19

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

Date: 6-28-19

RECEIVED
JUN 28 2019
Kittitas Co. CDS