| 9.  | Existing and Proposed Lot Information:   |            |                             |                              |  |
|---|--|------------|-----------------------------|------------------------------|--|
|   | Original Parcel Numbers & Acreage  | New        | Acreage (1 parcel number pe | er line)                     |  |
|   |  | (Su        | rvey Vol, Pg)               | ı                            |  |
|   | Exist 950219 (1.09 acres)  | Ne         | ew 950219 (1.76 acres       | s)                           |  |
|   | Exist 950218 (0.67 acres)  | -          |                             |                              |  |
|   |  |            |                             |                              |  |
|   |  |            |                             |                              |  |
|   | - kitaren  |            |                             |                              |  |
|   |  |            |                             |                              |  |
|   | APPLICANT IS: X OWNERPUR   | CHASER     | LESSEE                      | OTHER                        |  |
|   | AUTHORIZATION  |            |                             |                              |  |
|   |  |            |                             |                              |  |
| 10.                                       | Application is hereby made for permit(s) to authorize the activities described herein. I certify that I am familia with the information contained in this application, and that to the best of my knowledge and belief suc 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.  |            |                             |                              |  |
| 411                                       | correspondence and notices will be transmitted   |            |                             | onies sent to the authorized |  |
|   | ent or contact person, as applicable.  | TO THE LUI | a contra a necora ana ce    | pres sent to me aumorized    |  |
|   | re of Authorized Agent:<br>IRED if indicated on application)   | Date       | e:                          |                              |  |
| x_//                                      | All Mark   | 7          | -2-20                       |                              |  |
|   | re of Land Owner of Record   | Date       | e:                          |                              |  |
| X   | ed for application submittal):   | 7/         | 2/20                        |                              |  |
| 1   | Market State   | 7/3        | -/20                        |                              |  |
|   | The state of the s | 1          | /                           |                              |  |
| Treasurer's Office Review                 |  |            |                             |                              |  |
| Tax Status: Paid By: Wuldholf Date: 8/3/2 |  |            |                             |                              |  |
|   | Kittika  | s County T | reasurer's Office           |                              |  |
|   |  |            |                             |                              |  |
| Approve                                   | ed as submitted by Community Development Services  | ·          |                             |                              |  |
| Planner:                                  | : Rachael Stevie Signed: Ruhml Sturil  | Date       | 8/04/2020                   |                              |  |