



**CITY OF COVINGTON**  
**Community Development Department**  
 16720 SE 271st Street • Suite 100 • Covington, WA 98042  
 Phone: (253) 480-2400 • Fax: (253) 480-2401  
 www.covingtonwa.gov

## PROPERTY OWNER DECLARATION

<b>STAFF USE ONLY</b>	Permit/Project Number: _____ Application Date: _____
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I/We make the following statements based upon personal knowledge:

1. I am/We are the current owner(s) of the following parcel number(s) that is/are the subject of this application, including all rights-of-way, easements, or other property ownerships which are necessary to fulfill the requirements of the application: \_\_\_\_\_
2. All statements contained in the application are true and correct to the best of my/our knowledge.
3. The application is being submitted with my/our knowledge and consent.

I/We declare under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

Signed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_, \_\_\_\_\_  
*City*, *State*

\_\_\_\_\_  
Signature  
 \_\_\_\_\_  
Print Name  
 \_\_\_\_\_  
Address  
 \_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Signature  
 \_\_\_\_\_  
Print Name  
 \_\_\_\_\_  
Address  
 \_\_\_\_\_  
Phone Number

State of Washington    }  
 County of King        } ss.

I certify that I know or have seen satisfactory evidence that \_\_\_\_\_ (Property Owner) signed this instrument and acknowledges it to be his/her free and voluntary act for the uses and purposes mentioned in this instrument.

Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_  
 Notary Public in and for the State of Washington  
 My appointment expires: \_\_\_\_\_

(Notary Seal or Stamp)

State of Washington    }  
 County of King        } ss.

I certify that I know or have seen satisfactory evidence that \_\_\_\_\_ (Property Owner) signed this instrument and acknowledges it to be his/her free and voluntary act for the uses and purposes mentioned in this instrument.

Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_  
 Notary Public in and for the State of Washington  
 My appointment expires: \_\_\_\_\_

(Notary Seal or Stamp)

***Use additional pages as needed for all property owner signatures.***