ADMINISTRATIVE DESIGN REVIEW
Owner Affidavit

University Place WASHINGTON

3715 Bridgeport Way W
University Place, WA 98466
PH: (253) 566-5656 FAX: (253) 460-2541

DECLARATION:

Know all men by these presents that we, the undersigned, owner(s) in fee simple and/or contract purchaser(s) of the land herein described do hereby make an application for an Administrative Design Review thereof. The undersigned further declare that all attached plans, documents, and information of said Administrative Design Review and the same is made with the free consent and in accordance with the desires of the owner(s). In witness whereof we have set with our hands and seals.

Name:	**Signature:**
Name:	**Signature:**
Name:	**Signature:**
Name:	**Signature:**

ACKNOWLEDGMENT:

STATE OF WASHINGTON)
) ss
COUNTY OF _____)

On this day appeared before me _____ (owner), to me known as the individual(s) described in and who executed the within and foregoing instrument, and acknowledge that _____(he/she) signed the same as _____ (his/her) free and voluntary act and deed, for the uses and purposes therein mentioned.

GIVEN under my hand and official this _____ day of _____, _____.

_____
Notary Public in and for the State of Washington

_____
Residing at

_____
My Commission Expires

Updated: 12/2014