



# Affidavit Concerning Critical Areas Compliance

STATE OF WASHINGTON      )  
                                    ) SS  
COUNTY OF KING              )

Project Information	
PARCEL NUMER(S)	PERMIT NUMBER
Applicant	
FULL NAME	

The undersigned, being first duly sworn on oath deposes and says:

1. That the affiant is competent to be a witness herein;
2. That the affiant is the applicant for the above project;
3. That to the best of the affiant's knowledge all critical areas and associated buffers on the development site have been disclosed within the application; and
4. That to the best of the affiant's knowledge the critical areas and associated buffers on the development proposal site have not been illegally altered.

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

APPLICANT SIGNATURE	DATE AND PLACE (City and State)
---------------------	---------------------------------