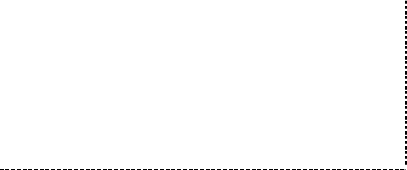
**Attachment for Additional Property Owners**



AGENCY USE ONLY

**Date Received:**

**APP ID#:**

Use this attachment only if you have more than one property owner. Complete one attachment for each additional property owner impacted by the project.

**My project occurs on public lands (provide government agency name below only).**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Business or Government Agency Name (if applicable)** | | | | |
|  | | | | |
| **First Name** | | **Middle Name** | | **Last Name** |
|  | |  | |  |
| **Address 1** | | | | |
|  | | | | |
| **Address 2** | | | | |
|  | | | | |
| **City** | | **State** | | **Zip** |
|  | |  | |  |
| **Primary Phone** | **Ext.** | | **Mobile Phone** | **FAX** |
| ( ) |  | | ( ) | ( ) |
| **E-mail** | | | | |
|  | | | | |
| **Signature of Property Owner** | | | | |
| I consent to Washington Department of Fish and Wildlife staff entering the property where the project is located to inspect the project site or any work related to the project. | | | | |
|  | |  | |  |
| **Printed Name** | | **Signature** | | **Date Signed** |

Mail, hand deliver, FAX, or email this form along with your Simplified Application to:

**Washington Department of Fish and Wildlife Habitat Program**

**PO Box 43234**

**Olympia, WA 98504-3234**

**(360) 902-2534**

**FAX (360) 902-2946**

**Email:** [**HPAapplications@dfw.wa.gov**](mailto:HPAapplications@dfw.wa.gov)