ACCEPTANCE OF FINANCIAL RESPONSIBILITY - AFFIDAVIT OF APPLICANT STATUS



ABOUT THE ACCEPTANCE OF FINANCIAL RESPONSIBILITY - AFFIDAVIT OF APPLICANT STATUS FORM

This affidavit must be completed by the property owner(s) and contains two different sections:

<u>SECTION I</u> AFFIDAVIT OF APPLICANT STATUS	This section allows the property owner to declare themselves as the legal owner of the project property or to authorize an applicant to act on their behalf during the permit application process.
<u>SECTION II</u> ACCEPTANCE OF	Once submitted, this section indicates an acceptance to be financially responsible for all the fees associated with the application review and approval.
FINANCIAL RESPONSIBILITY	This includes all permit fees, costs of review, and other associated fees, which must be paid whether or not a permit is issued or whether the application is canceled before permit issuance.

Submittal Instructions

Complete & save this form before uploading it to MyBuildingPermit.com in the "File Upload" section along with the rest of the submittal documents.

Resources

King County iMap Sammamish Property Tool

Questions?

Submit Project Guidance Visit the Permit Center

> City of Sammamish 801 228th Ave SE Sammamish, WA 98075 www.sammamish.us



ACCEPTANCE OF FINANCIAL RESPONSIBILITY - AFFIDAVIT OF APPLICANT STATUS

PROJECT PROPERTY INFORMATION

Property Address(es):		
Parcel Number(s):		
Project Description:		
OWNER INFORMATION		
Name:	Company: (if applicable)	
E-Mail:	Phone:	
Address:		
ADDITIONAL OWNERS (IF APPLICABLE)		
Name:	Company: (if applicable)	
E-Mail:	Phone:	
Address:		
Name:	Company: (if applicable)	
E-Mail:	Phone:	
Address:		
APPLICANT/REPRESENTATIVE INFORMATION (IF APPLICABLE)		
Name:	Company: (if applicable)	
E-Mail:	Phone:	
Address:	_	
Contractor L&I Number (if applicable):		

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AFFIDAVIT OF APPLICANT STATUS

<u>NO</u> notary is required for this affidavit.

Each property owner must complete a separate copy of this form.

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

- A. I am over the age of eighteen (18) years and competent to be a witness herein.
- B. I am the legal owner for the _____ project located at

_____ in Sammamish, Washington.

C. I certify that (select one of the below):

- □ I am the legal owner of the project property described above and am legally entitled to acquire permits and approvals for the project.

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

Print Name(s):	
Signature(s):	
Date: _	Place:
	(City and State)

ACCEPTANCE OF FINANCIAL RESPONSIBILITY -AFFIDAVIT OF APPLICANT STATUS



ACCEPTANCE OF FINANCIAL RESPONSIBILITY

Please check the appropriate box and indicate compliance by initialing each line

□ As Owner(s):

	I/we accept financial responsibility for all fees associated with this permit for reviews and approvals performed by the City or contracted agencies.
Initial Here	
	I/we agree to pay all permit fees, costs of review, and other associated fees, regardless of whether the permit is issued or the application is canceled before permit issuance.
Initial Here	
	I understand that refunds will be mailed to the owner(s) unless the City has received written authorization from the owner(s) stipulating payment to a third party.
Initial Here	
	If my/our address changes at any time before the City has received full payment for all fees billed or owing, I/we will immediately notify the City of the new address.
Initial Here	

□ As Applicant(s):

Initial Here

Initial Here

Initial Here

I/we accept financial responsibility for all fees associated with this permit for reviews and approvals performed by the City or contracted agencies.

I/we agree to pay all permit fees, costs of review, and other associated fees, regardless of whether the permit is issued or the application is canceled before permit issuance.

I understand that refunds will be mailed to the applicant(s) unless the City has received written authorization from the applicant(s) stipulating payment to a third party.

If my/our address changes at any time before the City has received full payment for all fees billed or owing, I/we will immediately notify the City of the new address.

Initial Here

SIGNATURES

Property Owner(s)

Name:	Name:
Signature:	Signature:
Date:	Date:
Applicant(s)	
Name:	Name:
Signature:	Signature:
Date:	Date: