



Planning, Community, & Economic Development Department  
904 6<sup>th</sup> St. / P.O. Box 947, Anacortes, WA 98221  
360-293-1984

### AGENT AUTHORIZATION FORM

Use this form to authorize someone other than the property owner to apply for permits for the subject property.

Project Name: Samish Early Learning Center  
Property Address: 1502 D Avenue  
City, State, Zip: Anacortes, WA 98221

#### AUTHORIZATION STATEMENT

I / we, as the owners of the property identified above, authorize the below listed individual to act as our agent to submit applications, receive correspondence regarding the above-listed application, and sign and to receive notices on my/our behalf.

#### DESIGNATED AGENT

Agent Name: Carletti Architects, P.S. - Peter Carletti  
Agent Address: 116 E. Fir Street. Suite A  
Agent City, State, Zip: Mount Vernon, WA 98273

#### PROPERTY OWNER SIGNATURE(S)\*\*

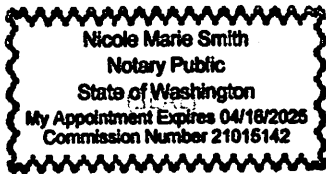
Signature: *Thomas D. Wooten* Signature: \_\_\_\_\_  
Printed Name: Thomas D Wooten Printed Name: \_\_\_\_\_  
Title: Chairman Title: \_\_\_\_\_  
Company: Samish Indian Nation Company: \_\_\_\_\_  
Date: 12/22/21 Date: \_\_\_\_\_

\*\*Each property owner listed must have their signature notarized.

STATE OF WASHINGTON )  
 ) ss.  
COUNTY OF SKAGIT

I certify that I know or have satisfactory evidence that Tom Wosten is the person who appeared before me, and said person acknowledged that he/she signed this instrument, and acknowledged it as a free and voluntary act for the uses and purposes mentioned in this instrument.

Given under my hand and official seal this 22 day of December, 2021



Nicole Marie Smith  
Notary Public

Residing at Anacortes, WA

My appointment expires 4/16/2025

STATE OF WASHINGTON )  
 ) ss.  
COUNTY OF SKAGIT

I certify that I know or have satisfactory evidence that \_\_\_\_\_ is the person who appeared before me, and said person acknowledged that he/she signed this instrument, and acknowledged it as a free and voluntary act for the uses and purposes mentioned in this instrument.

Given under my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

Residing at \_\_\_\_\_

My appointment expires \_\_\_\_\_

(SEAL)