

Address Information Verification

I / We Wyatt Rottwonbuniev, being duly sworn on oath, hereby certify that I			
have familiarized myself with the rules and regulations with respect to preparing and filing this			
application, that the foregoing statements and the statements contained in any papers or plans			
submitted herewith are true to the best of my knowledge and belief, and that the list of names			
and addresses of property owners within 500' of the subject is complete and correct according			
to the records of the Whatcom Assessor's Office as of September 11th , 20 24. I			
understand that if this list does not contain accurate information as listed in the Assessor's			
Office, this application may be successfully challenged and result in the necessity to reapply.			
	Signature:	Myatt E.	
	Date:	9/11/2024	
	Signature:		
	Date:		
STATE OF WASHINGTON)	
) SS	
COUNTY OF WHATCOM)	
		, , , , ,	
SUBSCRIBED AND SWORN TO BEFORE ME THISDAY OF			
September, 2024.			
		Keleghonay	
		Signature of Notary Public:	
RILEY MARCUS			
Notary Public State of Washington Commission # 22030694 My Comm. Expires Sep 23, 2026 Name Printed		KilyMarcus	
		Name Printed	
		alada a	
		_04/23/2026	
		My appointment expires	