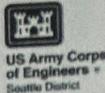




WASHINGTON STATE
Joint Aquatic Resources Permit
Application (JARPA) [\[help\]](#)



Attachment A:
For additional property owner(s) [\[help\]](#)

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

Signatures of property owners are not needed for repair or maintenance activities on existing rights-of-way or easements.

AGENCY USE ONLY

Date received: _____

Agency reference #: _____

Tax Parcel #(s): _____

TO BE COMPLETED BY APPLICANT [\[help\]](#)

Project Name: _____

Location Name (if applicable): _____

Use black or blue ink to enter answers in white spaces below.

1. Name (Last, First, Middle) and Organization (if applicable)			
MALERICH, EVA and MALERICH, RON			
2. Mailing Address (Street or PO Box)			
4313 ADRIENNE DRIVE			
3. City, State, Zip			
ALEXANDRIA, VA 22309			
4. Phone (1)	5. Phone (2)	6. Fax	7. E-mail
202-250-0374 CELL	703-780-3206 LANDLINE		malerich@gmail.com
Address or tax parcel number of property you own:			
161008320001 (this is the house at 354 W DEEP RIVER RD, NASELLE, WA 98638)			
Signature of Property Owner <i>Eva L. Malerich Ron Malerich</i>			
I consent to the permitting agencies entering the property where the project is located to inspect the project site or any work. These inspections shall occur at reasonable times and, if practical, with prior notice to the landowner.			
<i>Ron Malerich</i>		<i>Ron Malerich</i>	
<u>EVA L. MALERICH</u>		<u>Eva L. Malerich</u>	
Printed Name		Signature	
If you require this document in another format, contact the Governor's Office for Regulatory Innovation and Assistance (ORIA) at (800) 917-0043. People with hearing loss can call 711 for Washington Relay Service. People with a speech disability can call (877) 833-6341. ORIA publication number: ORIA-16-012 rev. 10/2016			