DESCRIPTION OF PROPOSAL:
Conditional Use Permit to provide Residential Care in the RSF Zone.

ADDRESS OF SITE OF PROPOSAL: (if not assigned yet, obtain address from Public Works before submitting application)
3754 W. Indian Trail Road - 3710 W. Indian Trail Road.

APPLICANT:
Name: Paul Harrington
Address: 3421 S. Henry Reed
Phone (home): 509-744-6901
Phone (work):
Email address: pharrington@southhenry.com

PROPERTY OWNER:
Name: Excelster Youth Center (Andrew Hill)
Address: 3754 W. Indian Trail Rd.
Phone (home):
Email address: andrewh@4eyc.org
Phone (work): 509-328-7041.

AGENT:
Name:
Address:
Phone (home):
Phone (work):
Email address:

ASSESSOR'S PARCEL NUMBERS:
2426.0047, 2426.0045

LEGAL DESCRIPTION OF SITE:
SEE ATTACHED

SIZE OF PROPERTY:
4.26 Acres.

LIST SPECIFIC PERMITS REQUESTED IN THIS APPLICATION:
Conditional Use Permit. Building Permits.
SUBMITTED BY:

[Signature]

☐ Applicant  ☑ Property Owner  ☐ Property Purchaser  ☐ Agent

In the case of discretionary permits (administrative, hearing examiner, landmarks commission or plan commission), if the applicant is not the property owner, the owner must provide the following acknowledgement:

I, Scott Davis, owner of the above-described property do hereby authorize

Paul Harris to represent me and my interests in all matters regarding this application.

ACKNOWLEDGMENT:

STATE OF WASHINGTON  }
COUNTY OF SPOKANE  ) ss.

On this 3rd day of January 2017, before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared Scott Davis, to me known to be the individual that executed the foregoing instrument and acknowledged the said instrument to be free and his/her free and voluntary act and deed, for the uses and purposes therein mentioned.

Witness my hand and official seal hereto affixed the day and year first above written.

[Signature]

Notary Public in and for the State of Washington, residing at Spokane