



**Pacific International  
Terminals**  
A Carrix Enterprise

1131 SW Klickitat  
Way Seattle  
Washington 98134  
800/422-3505  
tel 206/623-0179  
fax www.carrix.com

May 25, 2011

Washington Department of Ecology  
300 Desmond Drive SE  
PO Box 47775  
Lacey, Washington 98503

Attention: Ms. Loree' Randall

**Subject: Gateway Pacific Terminal JARPA Signature Pages  
Initiation of formal review for a 401 Water Quality Certification**

Dear Ms. Randall:

Attached is an executed copy of the Joint Aquatic Resources Permit Application (JARPA) Signature Page and Attachment A for the Gateway Pacific Terminal project. Please accept these documents to complete the JARPA application submitted by Pacific International Terminals, Inc. on February 28, 2011.

With the submittal of these documents, we would like to initiate formal review of the project for a 401 Water Quality Certification. However, we understand Ecology will likely request that Ecology's statutory permitting "clock" be stopped to allow for NEPA and SEPA processes time to move forward.

If you have any questions or need additional information, please feel free to contact me at your convenience.

Sincerely,

Ari Steinberg, P.E.  
Project Manager  
SSA Marine

AS/KD/TQ

Attachments

## Part 11—Authorizing Signatures

Signatures are required before submitting the JARPA package. The JARPA package includes the JARPA form, project plans, photos, etc. [\[help\]](#)

### 11a. Applicant Signature (required) [\[help\]](#)

I certify that to the best of my knowledge and belief, the information provided in this application is true, complete, and accurate. I also certify that I have the authority to carry out the proposed activities, and I agree to start work only after I have received all necessary permits.

I hereby authorize the agent named in Part 3 of this application to act on my behalf in matters related to this application. SS (initial)

By initialing here, I state that I have the authority to grant access to the property. I also give my consent to the permitting agencies entering the property where the project is located to inspect the project site or any work related to the project. SS (initial)

Skip Sahlin

Applicant Printed Name

Skip Sahlin  
Applicant Signature

5-20-2011  
Date

### 11b. Authorized Agent Signature [\[help\]](#)

I certify that to the best of my knowledge and belief, the information provided in this application is true, complete, and accurate. I also certify that I have the authority to carry out the proposed activities and I agree to start work only after all necessary permits have been issued.

Kristie Dunkin, Ph.D., P.M.P.

Authorized Agent Printed Name

Kristie Dunkin Ph.D., P.M.P.  
Authorized Agent Signature

5/20/2011  
Date

### 11c. Property Owner Signature (if not applicant). [\[help\]](#)

Not required if project is on existing rights-of-way or easements.

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.

Property Owner Printed Name

Property Owner Signature

Date

18 U.S.C §1001 provides that: Whoever, in any manner within the jurisdiction of any department or agency of the United States knowingly falsifies, conceals, or covers up by any trick, scheme, or device a material fact or makes any false, fictitious, or fraudulent statements or representations or makes or uses any false writing or document knowing same to contain any false, fictitious, or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than 5 years or both.

If you require this document in another format, contact The Governor's Office of Regulatory Assistance (ORA). People with hearing loss can call 711 for Washington Relay Service. People with a speech disability can call (877) 833-6341.  
ORA publication number: ENV-019-09

**SCHEDULE 1  
WHATCOM COUNTY AUTHORIZATION**



**2011  
WASHINGTON STATE  
Joint Aquatic Resources Permit  
Application (JARPA) Form [\[help\]](#)**



<small>AGENCY USE ONLY</small>	
Date received: _____	
<small>TO BE COMPLETED BY APPLICANT <a href="#">[help]</a></small>	
UPI #: _____	
Project Name: _____	
Agency reference #: _____	
Tax Parcel #(s): _____	
_____	
_____	

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

Use this attachment only if you have more than one property owner.

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

<b>4a. Name (Last, First, Middle) and Organization (if applicable)</b>			
Watts Family Partnership, Emily Watts Tidball, Partner			
<b>4b. Mailing Address (Street or PO Box)</b>			
2608 260th Place SE			
<b>4c. City, State, Zip</b>			
Sammamish, WA 98075			
<b>4d. Phone (1)</b>	<b>4e. Phone (2)</b>	<b>4f. Fax</b>	<b>4g. E-mail</b>
(425) 557-8687/H	(425) 736-7984	( )	
Address or tax parcel number of property you own:			
390117278062			
Owner Signature <i>Emily Watts Tidball</i>			

<b>4a. Name (Last, First, Middle) and Organization (if applicable)</b>			
<b>4b. Mailing Address (Street or PO Box)</b>			
<b>4c. City, State, Zip</b>			
<b>4d. Phone (1)</b>	<b>4e. Phone (2)</b>	<b>4f. Fax</b>	<b>4g. E-mail</b>
( )	( )	( )	
Address or tax parcel number of property you own:			
Owner Signature			