Water Quality Certification Processing Request to the Washington Department of Ecology ELECTRONICALLY REC'D

MAY 29 2012

Project Name	Gateway Pacific Terminal Shorelands & Environmental Assistance Program
Applicant	Pacific International Terminals, Inc.
Contact Name	Mr. Skip Sahlin
Phone Number	206-654-3510
Address	1/31 SW Klickitat Way, Seattle, WA 98134
Check those statem	ents below which correspond to your project.
1. Withdrawal	of certification request:
	like to withdraw my request for certification. I do not intend to ertification of this project at this time.
certificat	like to withdraw my request for certification and re-apply for tion. I understand that this will extend the review period for this f one additional year.
2. Changes to	project:
There ar quality.	e no changes in my project proposal which would affect water
(If this a	e changes in my project proposal that may affect water quality. nswer is selected, please attach a new JARPA explaining the and their impacts on water quality.)
	make this request on behalf of this applicant.
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