Lead Entity Organization: Chelan County

Oct. 27. 2009 11:10AM Che'an County Natural Res Dept

No. 0519 P. 2

APPENDIX H - LANDOWNER ACKNOWLEDGEMENT FORM Landowner Information:	
Landowner Contact Information:	
Mr. ☐ Ms. Tid	e
First Name: Roy Las	t Name: Skelton
Contact Mailing Address: 5855 Camb	ell Rd., Peshastin, WA 98847
Contact E-Mail Address:	·
Property Address or Location: 5855 Cam	ibell Rd., Peshastin, WA 98847
I certify that <u>Roy Skelfon</u> (landowner or organization) application to the Salmon Recovery Funding signature authorizes the applicant listed belo authorization of project implementation.	is the legal owner of property described in this grant Board (SRFB). I am awate the project is being proposed on my property. My ow to seek funding for project implementation, however, does not represent
Landowner Signature	10 28 09 Date
	Project Applicant Information
Project Name: Peshastin Creek Reconnec	tion Alternatives Analysis (RM 3.9)
Project Applicant Contact Information	on:
	le: Natural Resoutce Specialist
Pirst Name: Mike	Last Name: Kane
	St., Suite 401, Wenatchee, WA 98801
B-Mail Address: mike.kane@co.ch	elan.wa.us