

Planning Process

SELF CERTIFICATION FORM

Use this form to certify that the need for your project(s) has been determined through an appropriate planning process. Attach the completed form to the subject plan(s) and provide to IAC.

Name and adoption date of documents submitted in fulfillment of this requirement:

▸ Port of Tahuya Public Access Plan

▸

▸

Check/initial Each to Certify Completion	Plan Element Certification	Document/Page Number Location of Information
RC M	1. Goals, objectives: The attached plan supports our project with broad statements of intent (goals) <i>and</i> measures that describe when these intents will be attained (objectives).	Pages 8–9
RC G	2. Inventory: The plan includes a description of the service area's facilities, lands, programs, and their condition. <i>(THIS MAY BE DONE IN A QUANTITATIVE FORMAT, OR IN A QUALITATIVE/NARRATIVE FORMAT.)</i>	Pages 10–17
RC G	3. Public involvement: The planning process gave the public ample opportunity to be involved in plan development and adoption.	Pages 45–52
RC G	4. Demand and need analysis: In the plan(s): <ul style="list-style-type: none"> ▸ An analysis defines priorities, as appropriate, for acquisition, development, preservation, enhancement, management, etc., and explains why these actions are needed. ▸ The process used in developing the analysis assessed community desires for parks, recreation, open space, and/or habitat, as appropriate, in a manner appropriate for the service area (personal observation, informal talks, formal survey(s), workshops, etc.). 	Pages 18–32
RC G	5. Capital Improvement Program: The plan(s) includes a capital improvement/facility program that lists land acquisition, development, and renovation projects by year of anticipated implementation; include funding source. The program includes any capital project submitted to IAC for funding.	Pages 53–62
RC G	6. Adoption: The plan(s) and process has received formal governing body approval. <i>(THAT IS, CITY/COUNTY DEPARTMENT HEAD, DISTRICT RANGER, REGIONAL MANAGER/ SUPERVISOR, ETC., AS APPROPRIATE. ATTACH RESOLUTION, LETTER, OR OTHER ADOPTION INSTRUMENT.)</i>	Page 2 & Inserted Resolution

I certify that this information is true and complete to the best of my knowledge,

Robert C. Gilbert COMMISSIONER, CHAIR

Name

Title

Date

8-25-03

Robert C. Gilbert