**From:** crochetp@woodlandpd.org
**To:** Deb Gregory
**Subject:** RCW 10.93.070: General Authority Peace Officer-Powers, Circumstances
**Date:** Thursday, June 11, 2015 9:16:59 AM

# Formstack Submission for form RCW 10.93.070: General Authority Peace Officer-Powers, Circumstances

*Submitted at 06/11/15 12:16 PM*

| | |
|---|---|
| **Agency Name (Jurisdiction):** | Woodland Police Department |
| **Roster of Washington State General Authority Law Enforcement Agencies:** | I have reviewed the roster of Washington State General Authority Law Enforcement Agencies. |
| **I authorize the following agencies Police Powers in my legally recognized jurisdiction.:** | I will select individual Agencies |
| **Adams County:** | |
| **Asotin County:** | |
| **Benton County:** | |
| **Chelan County:** | |
| **Clallam County:** | |
| **Clark County:** | All Clark County Agencies |
| **Columbia County:** | |
| **Cowlitz County:** | All Cowlitz County Agencies |
| **Douglas County:** | |
| **Ferry County:** | |
| **Franklin County:** | |
| **Garfield County:** | |
| **Grant County:** | |
| **Grays Harbor County:** | |

| | |
|---|---|
| **Island County:** | |
| **Jefferson County:** | |
| **King County:** | |
| **Kitsap County:** | |
| **Kittitas County:** | |
| **Klickitat County:** | |
| **Lewis County:** | |
| **Lincoln County:** | |
| **Mason County:** | |
| **Okanogan County:** | |
| **Pacific County:** | |
| **Pend Oreille County:** | |
| **Pierce County:** | |
| **San Juan County:** | |
| **Skagit County:** | |
| **Skamania County:** | Skamania County Sheriff's Office |
| **Snohomish County:** | |
| **Spokane County:** | |
| **Stevens County:** | |
| **Thurston County:** | |
| **Wahkiakum County:** | Wahkiakum County Sheriff's Office |
| **Walla Walla County:** | |
| **Whatcom County:** | |
| **Whitman County:** | |
| **Yakima County:** | |
| **Additional Agencies:** | |
| **Name of Authorizing Individual:** | Phil Crochet |

| | |
|---|---|
| **Job Title of Authorizing Individual:** | Chief of Police |
| **Email Address of Authorizing Individual:** | crochetp@woodlandpd.org |
| **Agency Name:** | Woodland Police Department |
| **Date of Form Completion Completion :** | Jun 11, 2015 |
| **By providing this information you are providing an electronic signature authorizing your consent. RCW 9.94A.110(24) establishes "signature includes any memorandum, mark, or sign made with intent to authenticate any instrument or writing, or the subscription of any person thereto.":** | I have read and acknowledge this statement. |
| **This form will be posted to the WASPC website and will be available for public access and review. Each agency should maintain a signed hard copy of their consent form.:** | I have read and acknowledge this statement. |

Terms | Privacy

Copyright © 2015 Formstack, LLC. All rights reserved.
This is a customer service email.

Formstack, LLC
8604 Allisonville Rd.
Suite 300
Indianapolis, IN 46250