

RESOLUTION NO. 813-24

A Resolution of the Commission of the Port of Port Townsend

APPOINTING AN AGENT TO RECEIVE CLAIMS FOR DAMAGES PURSUANT TO RCW 4.96.020 AND REPEALING AND REPLACING RESOLUTION NO. 663-17.

WHEREAS, RCW 4.96.020 requires all local government entities to appoint an agent to receive any claim for damages made against the Port of Port Townsend; and

WHEREAS, the identity of the agent and the address where she or he may be reached during the normal business hours of the local governmental entity are public records and must be recorded with the auditor of the county in which the entity is located; and

WHEREAS, all claims for damages against a local governmental entity, or against any local governmental entity's officers, employees, or volunteers, acting in such capacity, shall be presented to the agent within the applicable period of limitations within which an action must be commenced; and

WHEREAS, the failure of a local governmental entity to comply with the requirements of this section precludes that local governmental entity from raising a defense under Chapter 4.96 RCW;


NOW, THEREFORE, BE IT RESOLVED by the Port Commission of the Port of Port Townsend, that effective January 10, 2024, Resolution No. 663-17 shall be repealed and of no further force or effect, and that the agent listed below shall receive any claims for damages made under Chapter 4.96 RCW:

Agent Appointed: Port of Port Townsend Director of Finance & Administration
Port Office Address: 2701 Jefferson Street
P.O. Box 1180
Port Townsend, WA 98368
Port Business Hours: Monday – Friday, 8:00 am – 4:30 pm.

BE IT FURTHER RESOLVED by the Port Commission of the Port of Port Townsend, that this document shall be recorded with the Jefferson County Auditor.

ADOPTED this 10th day of January 2024 by the Commission of the Port of Port Townsend and duly authenticated in open session by the signatures of the Commissioners voting in favor thereof and the Seal of the Commission duly affixed.

ATTEST



Peter W. Hanke, Secretary

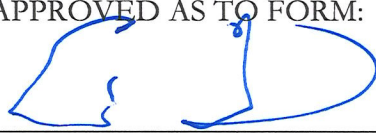


Pamela A. Petranek, President



Carol L. Hasse, Vice President

APPROVED AS TO FORM:



Port Attorney



669174 PGS:2 RESO

12/13/2024 10:13 AM \$304.50 PORT OF PORT TOWNSEND
Jefferson County WA Auditor's Office - Brenda Huntingford, Auditor



RETURN NAME and ADDRESS

Port of Port Townsend

P.O. Box 1180/2701 Jefferson Street

Port Townsend, WA 98368

Please Type or Print Neatly and Clearly All Information

Document Title(s)

Appointing Agent to Receive Claims for Damages - Resolution

Reference Number(s) of Related Documents

N/A

Grantor(s) (Last Name, First Name, Middle Initial)

Port of Port Townsend

Grantee(s) (Last Name, First Name, Middle Initial)

Port of Port Townsend

Legal Description (Abbreviated form is acceptable, i.e. Section/Township/Range/Qttr Section or Lot/Block/Subdivision)

Assessor's Tax Parcel ID Number

The County Auditor will rely on the information provided on this form. The Staff will not read the document to verify the accuracy and completeness of the indexing information provided herein.

Sign below only if your document is Non-Standard.

I am requesting an emergency non-standard recording for an additional fee as provided in RCW 36.18.010. I understand that the recording processing requirements may cover up or otherwise obscure some parts of the text of the original document. Fee for non-standard processing is \$50.

Signature of Requesting Party