EXHIBIT 5 SHOWING SABEY'S APPLICATION FOR SHORELINE DEVELOPMENT

LDWSF 12.3.313.1 V1 03/17/1988

001-88SH

MARCH 1988

SHORELINE MANAGEMENT ACT OF 1971

APPLICATION FOR

SHORELINE SUBSTANTIAL DEVELOPMENT PERMIT

RECEIVED JAN 2 1988 SEPA & LAND DIVISION

KING COUNTY, WASHINGTON

STR: 4-23-4 APPLICATION NO. 001 88SH

ZONING: MH ASSOC. APP. NO. _____

KROLL: 304 HEARING DATE: _____

SHORELINE DES: Urban PROJECT NAME: _____

WATERBODY: Duwamish River SENSITIVE AREA: Map 4! II III 100 yr FP, Duwamish Basin

XXXXXXXXXXXXXXXXXX DO NOT WRITE ABOVE THIS LINE XXXXXXXXXXXXXXXXXXXXXX

I, A.R. Clow, BEING DULY SWORN, DEPOSE AND SAY THAT I AM THE APPLICANT FOR A PERMIT TO CONSTRUCT A SUBSTANTIAL DEVELOPMENT PURSUANT TO THE SHORELINE MANAGEMENT ACT OF 1971, AND THAT THE FOLLOWING STATEMENTS, ANSWERS AND INFORMATION ARE IN ALL RESPECTS TRUE AND CORRECT TO THE BEST OF MAY KNOWLEDGE AND BELIEF.

ADDRESS 2203 Airport Way South

CITY/STATE Seattle, Washington

ZIP 98134 PHONE 628-3000

SIGNATURE A R Clow

Berkley Engineering & Construction

CORPORATION OR COMPANY NAME (if applicable)

RELATION OF APPLICANT TO PROPERTY: ( ) OWNER ( ) LESSEE (X) AGENT ( ) OTHER (Specify)

SUBSIDIARY OF SABEY CORP.

250.00 SH-PNT 6000.00 TL 6240.00 CHEK TEND 6240.00 .00 14111 B0037M001 01/21/88

4. (Notary seal here) SUBSCRIBED AND SWORN TO ME THIS 20TH DAY OF JANUARY, 1988

Thomas M Abrahamson

Notary Public in and for the State of Washington, residing at SEATTLE

Commission expires: 10/15/88

PROPERTY OWNERS(S) (if other than applicant) MUST SIGN BELOW OPPOSITE A "PARCEL" NUMBER WHICH IS ALSO SHOWN ON THE ASSESSOR'S MAP.

Parcel 1 NAME _____ SIGNATURE _____
ADDRESS _____
CITY/STATE _____
ZIP _____ PHONE _____

Parcel 2 NAME _____ SIGNATURE _____
ADDRESS _____
CITY/STATE _____
ZIP _____ PHONE _____

Parcel 3 NAME _____ SIGNATURE _____
ADDRESS _____
CITY/STATE _____
ZIP _____ PHONE _____

USEPA SF 1352496

State below the name and address and telephone number of person or persons to be contacted for further details on this application (if not applicant).

NAME Al Clow 628-3000 CITY/STATE Seattle
ADDRESS 2203 Airport Way South ZIP 98134 PHONE 628-3000

SHORELINE MANAGEMENT ACT OF 1971

APPLICATION FOR

SHORELINE VARIANCE PERMIT

KING COUNTY, WASHINGTON

SV

:R: _____ KROLL: _____ APPLICATION NO: _____

:NING: _____ SH. DES: _____ ASSOC.APPLI. NO. _____

HEARING DATE: _____

CORPS NOTICE NO.: _____

:TER BODY: _____ PROJECT NAME: _____

:R.REQUEST: _____

:TE REC'D: _____ APPROVED: _____ DENIED: _____

:B. DATES: _____ DATE OF ACTION: _____

********** Do Not Write Above This Line **********

:ATE OF WASHINGTON)
:UNTY OF KING) SS:

A. R. CLOW, BEING DULY SWORN, DEPOSE AND SAY TEAT I THE APPLICANT FOR A SHORELINE VARIANCE PERMIT PURSUANT TO THE SHORE-NE MANAGEMENT ACT OF 1971, AND THAT THE FOLLOWING STATEMENTS, ANSWERS AND FORMATION ARE IN ALL RESPECTS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE D BELIEF.

:DRESS 2203 Airport Way S., Suite 200 SIGNATURE A R Clow

:TY/STATE Seattle, WA RELATION OF APPLICANT TO PROPERTY:

P 98134 PHONE 628-3000 ( ) OWNER ( ) LESSEE ( ) CONTRACT PURCHASER (X) OTHER (specify) Agent

SUBSCRIBED AND SWORN TO ME THIS 17TH

(Notary Seal Here) DAY OF MARCH 19 88

Anna M Halloran

Notary Public in and for the State of Washington, residing at SEATTLE

Commission EXPIRES 10/15/88

OPERTY OWNER(S) (If not applicant) MUST BE LISTED BELOW OPPOSITE A ARCEL" NUMBER WHICH IS ALSO SHOWN ON THE ASSESSOR'S MAP.

:RCEL 1 NAME _____ SIGNATURE _____

ADDRESS _____ CITY/STATE _____ ZIP _____ PHONE _____

:RCEL 2 NAME _____ SIGNATURE _____

ADDRESS _____ CITY/STATE _____ ZIP _____ PHONE _____

:RCEL 3 NAME _____ SIGNATURE _____

ADDRESS _____ CITY/STATE _____ ZIP _____ PHONE _____

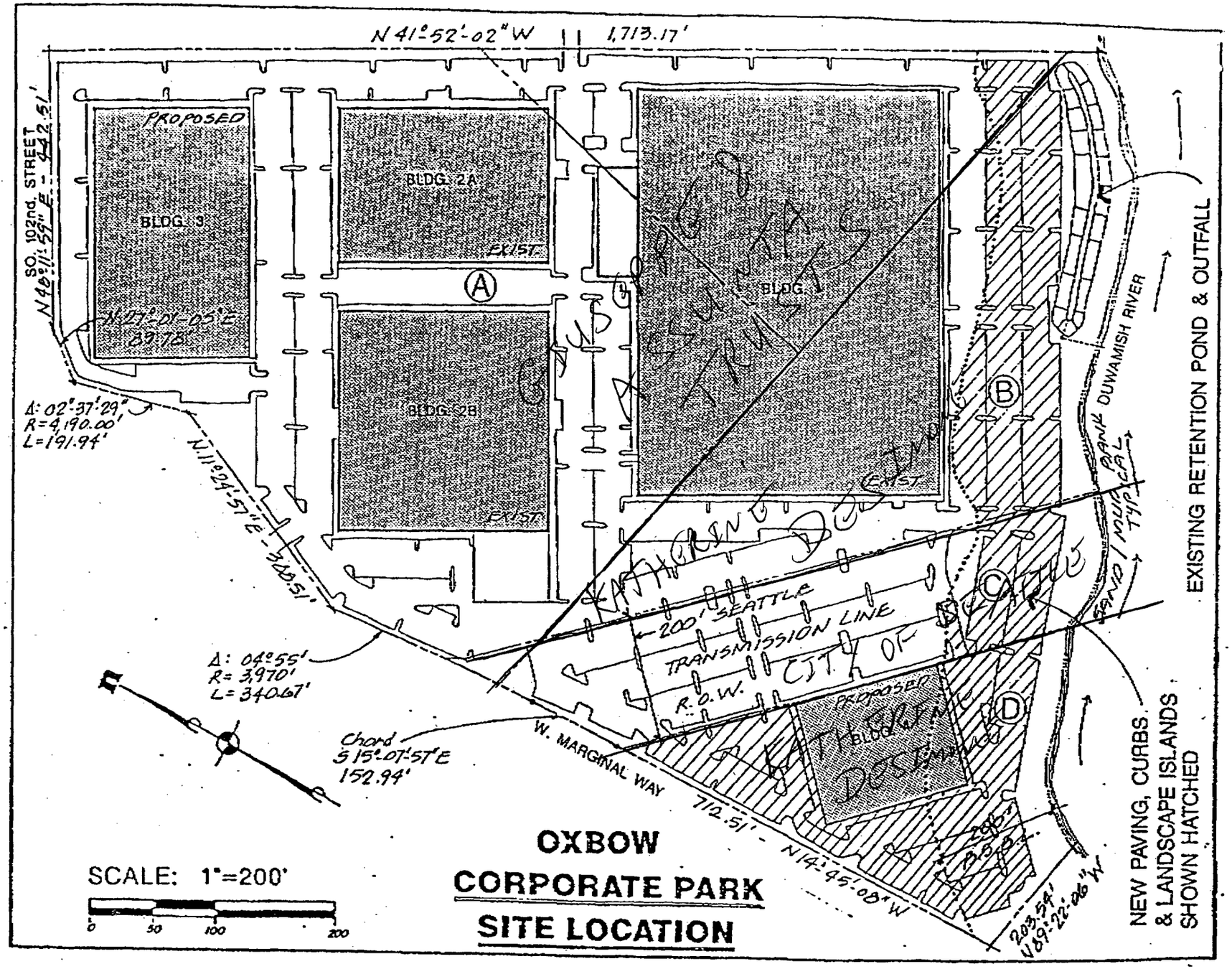
****

:ate below the name and address and telephone number of person or persons be contacted for further details on this application.

:E Al Clow CITY/STATE Seattle, WA 98134

:RESS 2203 Airport Way South PHONE (206) 628-3000

:E AND ADDRESS OF OWNER, IF OTHER THAN APPLICANT: David A. and Sandra Brown



OXBOW
CORPORATE PARK
SITE LOCATION

ATTACHMENT C

5