



Development Engineering
Location: 400 W. Gowe • Mail to: 220 4th Avenue South • Kent, WA 98032
Permit Center (253) 856-5302 FAX: (253) 856-6412
www.ci.kent.wa.us/permitcenter

Design & Construction Standards Deviation Request

Please print in black ink only.

Application Fee...See Fee Schedule

Application #: OFFICE USE ONLY KIVA #: OFFICE USE ONLY

Application Name:

Address/Location:

King County Parcel Number (s): Acres:

1/4 Section Section Township N Range E

Applicant: (mandatory)

Name: Daytime Phone:

Mailing Address: Fax Number:

City/State/Zip: Signature:

Professional License No: Contact Person:

Property Owner 1: (mandatory if different from applicant)

Name: Daytime Phone:

Mailing Address: Fax Number:

City/State/Zip: Signature:

Property Owner 2: (if more than two property owners attach additional info/signature sheets)

Name: Daytime Phone:

Mailing Address: Fax Number:

City/State/Zip: Signature:

The above signed property owners, certify that the above information is true and correct to the best of our knowledge and under penalty of perjury, each state that we are all of the legal owners of the property described above and designate the following party to act as our agent with respect to this application:

Agent/Consultant/Attorney: (mandatory if primary contact is different from applicant)

Name: Daytime Phone:

Mailing Address: Fax Number:

City/State/Zip: License No.:

OFFICE USE ONLY:

Date Application Received: Received by:

Date Application Complete: Completeness Review by: