

## **Permit Center**

Location: 400 W. Gowe Mail to: 220 4th Avenue S. • Kent, WA 98032 (253) 856-5300 FAX: (253) 856-6412 KentWA.gov/permitcenter

## **Civil Construction**

Rtg. Type	9	Track	king Number			
RECC						
Permit Na	ame					
Date Sub						
Land use						
Routing:		RC	<b>□</b> PWO	☐ PWGIS		
# of Copies:						

Permit Application				☐ RC	□ PWO	☐ PWGIS
	. селер		# of Copies:			
Project Name:			<u>'</u>		<u>'</u>	
Project Location:			Parcel I	Number:		
Description of Project:_						
Does the project include	e a stormwater detention vault or ret	raining wall?  Yes  No	A separate b	uilding pe	ermit may b	e required
Owner		Civil Const	ruction			
Name:		☐ Short Plat	(2-4 lots)		Short Plat	(5-9 lots)
Address:		Plat (10-39	9 lots)		Plat (40 oi	more lots)
City:	Zip:	☐ Non-Resid		•		,
Phone:		☐ Non-Resid		•		
Email:		□ Non-Resid	_			9,999)
O a matura a ta m		*Projects with val	<b>,</b> ,		,	nor Civil
Contractor		Construction Per	mit (REMC Pern	nit Type)		
Name:	Company:	Total Cost E				
Address:		(Cost of civil imp	rovements from	Engineer's	Cost Est. (A+E	(+C+D))
City:	Zip:	Earthwork	and Cleari	na		
Phone:	Fax:	Earthwork Vo		.9		
Contractor I.D. No:		I "' ' '			<b>.</b>	0)/
Email:		Cut	FIII		lotal	CY
Architect/Engineer	r	Area of Site [				
Name:	Company:	(if more than	I Acre, NPL	ES perm	it is require	a)
Address:		Hard Surface	e Area create	d and/or	replaced:	
City:	Zip:				_Acres; _	SF
Phone:	Fax:					
License No:						
Email:						
Contact						
Name:	Company:					
Address:						
City:	Zip:					
Phone:	Fax:					
E-mail:						

complete. I am either the owner of the property described or I represent the owner or contractor as signified above and am acting with the owner/contractor's full knowledge and consent.

Name (	please r	orint'	) Signature	Date	