



Location: 400 W. Gowe • Mail to: 220 4th Avenue South • Kent, WA 98032-5895
Permit Center (253) 856-5302 FAX: (253) 856-6412
KentWA.gov/permitcenter

Planning Services

Multi-family Design Review Application

Application Fee: See Fee Schedule

Please print in black ink only.

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

Project Name: _____

Address/ Location: _____ **Zone:** _____

King County Parcel Number (s): _____ **Acres:** _____

Project Description: _____

of Units Proposed: _____

Applicant: (mandatory)

Name: _____ Daytime Phone: _____

Mailing Address: _____ Email: _____

City/State/Zip: _____ Signature: _____

Professional License No: _____ Contact Person: _____

Property Owner: (mandatory if different from applicant; attach additional info/signature sheets if more than one property owner)

Name: _____ Daytime Phone: _____

Mailing Address: _____ Email: _____

City/State/Zip: _____ Signature: _____

Licensed Land Surveyor:

Name: _____ Daytime Phone: _____

Mailing Address: _____ Email: _____

City/State/Zip: _____ License No.: _____

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: _____ Email: _____

City/State/Zip: _____ License No.: _____

Multi-family Design Criteria

For Sections I & II, please **refer to the current copy of the City of Kent Multifamily Design Review Handbook** and provide an explanation as to how the proposed design meets each of the criteria for Site Design, and Building Design. All criteria must be clearly evident on the accompanying site plan and elevation drawings. Please address each criteria concisely. Applications with incomplete explanations will not be accepted.

I. SITE DESIGN

- a. Project Frontage.

Explanation:

- b. Vehicles and Parking.

Explanation:

- c. Pedestrian Circulation.

Explanation:

- d. Setbacks and Privacy.

Explanation:

e. Open Space.
Explanation:

f. Lighting.
Explanation:

g. Safety and Security.
Explanation:

h. Dumpsters, Utilities, and Service Areas.
Explanation:

II. BUILDING DESIGN

a. Architectural Design.
Explanation:

b. Architectural Details.
Explanation:

c. Blank Walls.
Explanation:

d. Materials.
Explanation:

Multi-family Design Review Submittal Requirements Checklist

THE APPLICANT MUST PROVIDE THE FOLLOWING INFORMATION WHEN REQUESTING A MULTI-FAMILY DESIGN REVIEW:

- A. Original application form, making sure the proper signatures are obtained.
- B. Five copies of responses to the Multi-family Design Review criteria
- C. Provide five (5) copies of the site plan which include the following information. **All maps must be folded to fit into an 8½"x14" envelope. Please fold with name of the project on the outside.**
 1. vicinity map
 2. scale and north arrow (use only the following scales: 1"=20' or 1"=30')
 3. property lines
 4. lot dimensions
 5. all existing and proposed public/private roads, driveway accesses and road easements
 6. all other easements (utility, etc.)
 7. uses of abutting properties (single-family residential, commercial, undeveloped, etc.)
 8. all significant man-made or natural features (ponds, streams, trees, railroad tracks, etc.)
 9. existing and proposed topography at contour intervals not less than five (5) feet in areas having slopes exceeding eight (8) percent and not less than two (2) feet in areas having slopes less than eight (8) percent
 10. proposed building locations
 11. building dimensions
 12. setback dimensions
 13. building height and number of stories
 14. occupancy divisions by use (office, recreation facility, laundry room, etc.)
 15. parking areas and parking stalls
 16. vehicle loading and unloading areas
 17. existing and proposed sidewalks and/or walkways
 18. existing and proposed fences
 19. proposed landscape areas
 20. proposed open space network
 21. biofiltration areas
 22. areas of future development
 23. required code data:
 - a. zoning district
 - b. total lot area (square feet)
 - c. total number of residential units
 - d. total building area
 - e. percent of site coverage
 - f. total number of parking stalls (including handicapped)
 - g. percent of lot in open space
- D. Provide five (5) copies of the landscape plan which include the following information:
 1. vicinity map
 2. scale and north arrow (use only the following scales: 1"= 20' or 1"= 30' –must be the same scale as site plan)
 3. property lines
 4. lot dimensions
 5. all existing and proposed public/private roads, driveway accesses and road easements
 6. all other easements (utility, etc.)
 7. uses of abutting properties (single-family residential, commercial, undeveloped, etc.)
 8. all significant man-made or natural features (ponds, streams, trees, railroad tracks, etc.)
 9. significant landscape features on subject property and abutting properties (stands of trees, ponds, streams, etc.)

10. existing and proposed topography at contour intervals not less than five (5) feet in areas having slopes exceeding eight (8) percent and not less than two (2) feet in areas having slopes less than eight (8) percent
11. proposed building locations
12. building height and number of stories
13. occupancy divisions by use (office, recreation facility, laundry room, etc.)
14. parking areas
15. vehicle loading and unloading areas
16. existing and proposed sidewalks and/or walkways
17. existing and proposed fences
18. areas of future development
19. location and/or arrangement of proposed plantings
20. planting schedule:
 - a. type (common name/botanical name)
 - b. caliper size
 - c. height
 - d. spacing of proposed plantings
 - e. existing natural vegetation to be incorporated into formal planting areas
 - f. proposed open space network
 - g. biofiltration areas
 - h. sprinkler plan

E. Provide five (5) copies of building elevations drawn to architectural scale.

F. Provide five (5) copies of drawings showing the proposed landscaping and any existing landscaping which will be retained in relation to all building elevations.

G. One set of drawings (Items 3-6) at a reduced scale on 8½" x 11" paper.

All above items and any other materials which may be required by Planning Services must be submitted at the time of application in order for the application to be accepted.



Planning Services

Location: 400 W. Gowe

Mail to: 220 4th Avenue South Kent, WA 98032-5895

Permit Center (253) 856-5302 FAX: (253) 856-6412

Multi-family Design Review Instructions

I. Application Forms

- A. Fill out original application form, making sure the proper signatures are obtained.
- B. Return the completed form and all supporting information required on the checklist to the Permit Center.

Any person requiring a disability accommodation should contact the City in advance for more information. For TDD relay service for Braille, call 1-800-833-6385, For TDD relay service for the hearing impaired, call 1-800-833-6388, or call the City of Kent at (253) 856-5725.

II. Review

Planning Services will review the completed application and set up a meeting to discuss compliance with the multifamily design review criteria. After that meeting, the multifamily design review process may proceed to the Development Plan Review meeting and permit review.

The Planning Manager or his/her designee will approve/condition or deny the Multifamily Design Review application in conjunction with action on the building permit.

III. Appeals

The action of the Planning Manager or designee shall be final and conclusive unless within 14 calendar days from the date of the written decision, the original applicant or a party of record files an appeal with the Hearing Examiner. Appeals to the Hearing Examiner shall be as set forth in Kent City Code Section 2.32. The decision of the Hearing Examiner shall be final, unless an appeal is made to King County Superior Court within 21 calendar days after the Hearing Examiner's notice of final decision.