103

CITY OF KENMORE, WA PERMIT REVISION APPLICATION



18120 68th Ave NE, Kenmore, WA 98028

425-398-8900

www.kenmorewa.gov

Permit Number:	
Project Name:	
Property Address:	
Pre-issuance revision Post-i	ssuance revision
Deferred Submittal Other	
Description of proposed revision:	
Appl. Staff	eading on this checklist to confirm items included in your submittal.
Appl. Staff	tified on the plans
Appl. Staff The revision(s) are clearly iden Revision Applicant:	tified on the plans
Appl. Staff The revision(s) are clearly iden Revision Applicant:	Phone: City, Zip, St:
Appl. Staff The revision(s) are clearly iden Revision Applicant: Address: e-mail address: understand that all revised documents must be reviewed and review of the revision must be paid in full prior to receiving the a	Phone: City, Zip, St:
Appl. Staff The revision(s) are clearly iden Revision Applicant: Address: e-mail address: understand that all revised documents must be reviewed and review of the revision must be paid in full prior to receiving the a	Phone: City, Zip, St: Fax: approved prior to performing the work. I also understand that any fees incurred for the approved documents. I certify under penalty of perjury that the information provided on zed by the owner or original applicant to propose these changes.
Appl. Staff The revision(s) are clearly iden Revision Applicant: Address: e-mail address: understand that all revised documents must be reviewed and eview of the revision must be paid in full prior to receiving the abits application is true and correct and, further that I am authority	Phone: City, Zip, St: Fax: approved prior to performing the work. I also understand that any fees incurred for the approved documents. I certify under penalty of perjury that the information provided on zed by the owner or original applicant to propose these changes.
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