



Permit Center

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

| | |
|-------------------------|-----------------|
| Rtg. Type | Tracking Number |
| Project Name | |
| Date Submitted | |
| Projected Review Date | |
| Application received by | |

Sewer Permit Application

Please Print in Black Ink Only

Business/Residence/Project Name: _____ Parcel No.: _____

Project Address: _____

Description of Project: _____

| | |
|--|-------------------|
| Contractor | |
| Name: _____ | |
| Address: _____ | |
| City: _____ | Zip: _____ |
| Phone: _____ | |
| Contractor ID#: _____ | Expiration: _____ |
| E-mail: _____ | |
| Sewer | |
| <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial | |
| <input type="checkbox"/> New <input type="checkbox"/> Repair Pipe Size: _____ | |
| Tap Required? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If tap is required, size of main: _____</i> | |
| Does the work intrude in public right-of-way? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Street Cut Required? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Permit No.: _____</i> | |
| Commercial/Industrial Use Only | |
| Oil Water Separator? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, include Type and Model Number:</i> | |
| Wastewater Discharge? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Metro Approval Required)</i> | |
| Grease Interceptor Vault? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, include:</i> <i>Size _____ Brand _____ Model No. _____</i> | |
| Number of Seats in Dining Area: _____ | |
| Number of Hours Open per Day: _____ | |
| Garbage Disposal Installed? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Dishwasher Installed? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | |
|--------------------------|------------|
| Applicant/Contact | |
| Name: _____ | |
| Address: _____ | |
| City: _____ | Zip: _____ |
| Phone(s): _____ | Fax: _____ |
| E-mail: _____ | |
| Building Owner | |
| Name: _____ | |
| Address: _____ | |
| City: _____ | Zip: _____ |
| Phone: _____ | |
| E-mail: _____ | |

| | |
|--|--|
| Engineering Use Only | |
| Inside City Limits? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If No, Covenant to Annex Recorded? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Within Kent Water Service Area? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| EMA Covenant Recorded? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Late Comers Contract Exists? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Charge in Lieu of Assessment? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Total Late Comers and/or Assessment Charges: | |
| Date/Figured by: | |
| Reimburse Late Comer or Assessment Charges to: | |

I certify that I have read this application and declare under penalty of perjury that the information contained herein is correct and 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 print) _____ Signature _____ Date _____

Instructions and Checklist for Sewer Permit Applications

IN ORDER TO REVIEW A PERMIT APPLICATION FOR INSTALLING NEW SEWER SERVICE, OR MAKING REPAIRS AND CHANGES TO PRIVATE SEWER SYSTEMS, THE CITY OF KENT REQUIRES THE FOLLOWING INFORMATION:

Completed Application Form (required for all applications)

Site Plans (required for all applications) (Two (2) Copies)

Site Plans prepared per City of Kent Design and Construction Standards (KDCS). Drawings must be on 8.5" x 11" or 11" x 17" paper, and drawn to scale in black ink.

This drawing should include the following items at a minimum:

1. The building(s) to be served
2. The complete course of the side sewer line that will connect the buildings to the main-line sewer.
3. Drawings must show all relevant lot lines or property boundaries, driveways, streets, other buildings and the location of other utilities.
4. All relevant measurements or dimensions. These measurements should include the distance from the building to the mainline, and from a building corner or another reference point to the place where sewer lines enter the building. The drawing must be detailed enough that it could be used independently to later locate the lines on the property.

Sewer Use Certification Form (required for all new connections)

The Sewer Use Certification form allows King County to bill customers for mitigation fees, based on a preset fee schedule. The City of Kent is legally obligated to receive this form from the applicant before providing sewer service. Fill out and sign the form, and attach it to your application.

For further information, visit King County's website at <http://splash.metrokc.gov/wtd/capchrg/>.

Separate Street Use Permit Required

See instructions and checklist for Street Use Permit Application if the work extends into the City's Right-of-Way. Traffic Control Plans will be required showing how traffic will move safely through the construction area.