CITY OF KIRKLAND

PLANNING AND COMMUNITY DEVELOPMENT

123 Fifth Avenue, Kirkland, WA 98033 425.587.3225

www.kirklandwa.gov

Historic Residence Alteration Application

SUBMITTAL DATE: _____ **DATE RECEIVED** _____

Historic Residence Address: _____

Neighborhood: _____

Applicant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Owner (if different than Applicant):

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Does the project require a building permit? _____

Project Description: Please describe the project in detail on a separate sheet. Refer to the instructions sheet for additional submittal requirements.

Historic Residence Application Project Discription: