



King County
Department of Permitting
and Environmental Review
 35030 SE Douglas Street, Suite 210
 Snoqualmie, WA 98065-9266
206-296-6600 TTY Relay: 711
 www.kingcounty.gov

Surface Water Design Manual Requirements / Standards Adjustment* Request

For alternate formats, call 206-296-6600.

Project Name:	Permitting Project File No:
	Permitting Engineer/Planner Name:
Project Address:	Design Engineer: Phone:
Applicant/Agent**: Phone:	Signature of Design Engineer: Date:
Signature of Applicant/Agent: Date:	Engineering Firm Name:
Address: City, State, ZIP:	Address: City, State, ZIP:

INSTRUCTIONS TO APPLICANT/DESIGN ENGINEER:

Please be sure to include all materials (Level One Downstream Analysis, Certification of Applicant Status form, sketches, photos, and maps) that may assist in complete review and consideration of this adjustment request. Failure to provide all pertinent information may result in delayed processing or denial of request. Please submit two complete copies of this request, application form, and applicable fee to the Department of Permitting and Environmental Review, 35030 SE Douglas Street, Suite 210 in Snoqualmie, WA 98065-9266. For more information, call 206-296-6600.

****Applicant/Agent is the individual financially responsible for all fees**

REFER TO CHAPTER 1, SECTION 1.4 OF THE SURFACE WATER DESIGN MANUAL FOR ADJUSTMENTS

DESCRIPTION OF ADJUSTMENT REQUEST: Standard Complex Experimental Blanket Pre-application

APPLICABLE VERSION KCSWDM: 1990 (11/95)* 1998 (9/98) 2005 (1/05)
 *(Note: the term "variance" replaced by "adjustment")

APPLICABLE SECTION(S) OF STANDARDS:

JUSTIFICATION PER KCSWDM SECTION 1.4.2: See attachments listed below.

AUTHORIZATION SIGNATURES:

DETERMINATION: <input type="checkbox"/> Approval <input type="checkbox"/> Conditional Approval (see below) <input type="checkbox"/> Denial	
<input type="checkbox"/> DNRP/WLRD Approval Signed: _____	Date: _____ (Experimental & Blanket only)
Permitting Staff Recommendation Signed: _____	Date: _____
Conditions of Approval:	
<input type="checkbox"/> See attached memo dated: _____	

Permitting DIRECTOR / DESIGNEE:

Permitting, Engineering Review Supervisor:	Permitting, Site Engineering & Planning Supervisor
Signed: _____ Date: _____	Signed: _____ Date: _____

Check out the Permitting Web site at www.kingcounty.gov/permits