



KIVA #:		Appeal #:		Received by:	
	OFFICE USE ONLY		OFFICE USE ONLY		

Applicant – Complete the Following

Name of Applicant:			
Mailing Address:			
City/State:		Zip:	

Daytime Phone:		Fax Number:		Email:	
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State What is Being Appealed:

State Reason for Appeal:

Signature(s):	Date:

If you need more space, please attach documents to this application. If you have any questions, call Community Risk Reduction/Fire Prevention at (253) 856-4400.

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.