



PERMIT TRANSFER REQUEST

| APPLICATION#/PERMIT# | ISSUE DATE | PROJECT |
|----------------------|------------|---------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

NAME OF CURRENT PERMIT HOLDER / APPLICANT / CONTRACTOR

ADDRESS

CITY/STATE/ZIP

TRANSFERS, ASSIGNS, AND DELEGATES ALL RIGHTS, RESPONSIBILITIES, OWNERSHIP, AND OBLIGATIONS ESTABLISHED WITHIN THE ABOVE LISTED PERMIT(S) TO:

NAME OF NEW PERMIT HOLDER / APPLICANT / CONTRACTOR

ADDRESS

CITY/STATE/ZIP

WASHINGTON STATE LICENCE NUMBER

RELEASED BY:

ACCEPTANCE OF PERMIT:

SIGNATURE OF AUTHORIZED AGENT

SIGNATURE OF AUTHORIZED AGENT

DATE

DATE