CITY OF COVINGTON
Permit Services
16720 SE 271st Street, Suite 100
Covington, WA 98042

Phone: (253) 638-1110
Fax: (253) 638-1122
www.ci.covington.wa.us

AFFIDAVIT OF POSTING

FILE NO. _____

APPLICATION NAME: _____

CONTACT: _____ ( ) _____
Applicant Name Phone #

PROJECT LOCATION: _____

_____

The undersigned affirms that:

1. On the _____ day of _____, 200____, the applicant posted the Notice of Application on the above matter on the subject property at the above project location;
2. That the posting of the Notice included the installation of the public notice board on the subject property in accordance with the city's regulations and procedures;
3. The required public notice board(s) was installed at the following location(s):

   Location One: _____

   Location Two: _____

   Additional Location (if required): _____
4. That the undersigned is aware that the notice board must remain in place and visible during the comment period and until a decision on the project has been made.

_____
Applicant Signature

This affidavit must be completed and returned, with a vicinity map showing the location of each sign, to the City of Covington, Permit Services Division ***within seven days after posting the site.*** *Please return to:*

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