

# BUILDING REHABILITATION WORKSHEET – EZ3

PROPERTY / CLIENT NAME:

DAHP Project #

ADDRESS:

CITY:

COUNTY:

Funding Agency:

Manager Name:

Organization:

Phone:

Email:

## PLEASE DESCRIBE THE TYPE OF WORK TO BE COMPLETED

(Be as detailed as possible to avoid having to provide additional information)

PLEASE DESCRIBE THE METHODS OF CONSTRUCTION, ALTERATION, OR ADDITION AND PROVIDE PHOTOS OF AREAS OF WORK, If APPLICABLE.

ROOF

INSULATION

WINDOWS AND DOORS

FOUNDATION

OTHER

If the project involves any ground disturbing activities please complete a [DAHP EZ-1 Form](#).

**eMail this form to:**

Nicholas Vann

*Historical Architect*

(360) 586-3079

[Nicholas.vann@dahp.wa.gov](mailto:Nicholas.vann@dahp.wa.gov)

NOTE: To save this fillable form you must fill it out in Adobe Acrobat or use the PRINT to PDF function in Adobe Reader. In Reader choose File>Print and choose Adobe PDF as the printer. The completed form will save to your computer.

DAHP will respond via email within 30 days.

# PHOTOS

**CLICK BOX TO INSERT A PHOTO  
JPEG FORMAT ONLY**

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