

DEPARTMENT OF LICENSES  
OF THE  
STATE OF WASHINGTON

Application

(See page two for instructions and information)

City of Seattle State of Washington

This application  
tory fee to be mail  
State Treasurer.

Remit by Money  
Bank Draft or Certified (

To the DEPARTMENT OF LICENSES OF THE STATE OF WASHINGTON:

I hereby make application for a license to practice Architecture in the State of Washington.

In submitting this application, it is agreed by me that if any part of it be found false or fraudulent, I forfeit the right to a license.

- Name Leonard Somerville Bindon  
(Name in full)
- Address 1309 E. 63rd St.
- Date of birth June 27, 1899 Place of birth London, England.
- Are you a citizen of the United States? Yes
  - If of foreign birth, state nationality English (b) Naturalized when? Dec. 26, 1925
  - If not a citizen, have you declared your intention to become a citizen? \_\_\_\_\_ (d) Color? White
- Where have you resided for the past five years? Seattle Wash

6. What common school did you attend? Roan School, London

7. Of what high school are you a graduate? Polson, Montana

8. If not a high school graduate, what equivalent education have you had? \_\_\_\_\_

9. Of what hospital training school, college, university or other institution are you a graduate? \_\_\_\_\_

(a) How many years did you attend? 4 yrs (b) How many months in each year? 9

(c) What degree or degrees did you receive? \_\_\_\_\_

(d) Was resident attendance required? \_\_\_\_\_ (e) Date of graduation \_\_\_\_\_

10. If not a graduate, how many years collegiate training have you had? 4 yrs.

11. What hospital or other training in care of the sick have you had? \_\_\_\_\_

12. How much time have you given to clinical practice? \_\_\_\_\_

13. What practical experience have you had in your profession? 3 1/2 yrs. in architect's office  
6 months on the job

14. What collateral branches have you studied? \_\_\_\_\_

15. Have you ever been examined for license in any other state? No  
(a) If so, where and when? \_\_\_\_\_ (b) Result \_\_\_\_\_

16. Have you ever practiced in any other state? No

State of Washington

County of King } ss.

I, Leonard Somerville Bindon, being first duly sworn upon oath, depose and say: that the answers to the foregoing questions and the statements made in the above application are true and correct; that I am the person named in the diploma accompanying this application; that I am the lawful holder thereof, and that the same was procured in the regular course of instruction and examination without fraud or misrepresentation.

Leonard Somerville Bindon  
(Signature of Applicant)

Leonard Somerville Bindon  
(Signature of Applicant)

Subscribed and sworn to before me this 18th day of May, 1926

[SEAL] \_\_\_\_\_  
Notary Public for the State of Washington, residing at Seattle



Mr. S. Bindon,  
63rd St.,  
Washington.

MAY  
21st  
1926.

Dear Sir:

Acknowledging receipt of your application  
and fee for Architect's examination, the examination  
will be held at the University of Washington, Seattle,  
on June 3rd beginning at 9 A.M.

Very truly yours,

DEPARTMENT OF LICENSES  
CHARLES R. MAINEY, DIRECTOR

BY

ASST. DIRECTOR

VA

**DEPARTMENT OF LICENSES**

OF THE

**STATE OF WASHINGTON**

**Application**

(See page two for instructions and information)

This application a  
tory fee to be malle  
State Treasurer.  
Remit by Money  
Bank Draft or C  
Check.

City of Seattle State of Washn  
Nov. 30, 1925

o the DEPARTMENT OF LICENSES OF THE STATE OF WASHINGTON:

I hereby make application for a license to practice Architecture in the State of Washington.

In submitting this application, it is agreed by me that if any part of it be found false or fraudulent, I forfeit the right to a license.

1. Name Leonard William Somerville Bindon

2. Address 1820 - 16<sup>th</sup> Ave Seattle

3. Date of birth June 27 - 1899 Place of birth London, England

4. Are you a citizen of the United States? yes

(a) If of foreign birth, state nationality ✓ (b) Naturalized when? 1925

(c) If not a citizen, have you declared your intention to become a citizen? ✓ (d) Color? white

5. Where have you resided for the past five years?

Seattle 1925

New York 1926 - 27

Seattle 1928 - 29

6. What common school did you attend? Common Schools - England

7. Of what high school are you a graduate? Polson High School

8. If not a high school graduate, what equivalent education have you had? ✓

9. Of what hospital training school, college, university or other institution are you a graduate? ✓

(a) How many years did you attend? 4 1/2 (b) How many months in each year? 9 months

(c) What degree or degrees did you receive? no (d) Was resident attendance required? no (e) Date of graduation no

10. If not a graduate, how many years collegiate training have you had? 4 1/2

1. What hospital or other training in care of the sick have you had?

2. How much time have you given to clinical practice?

3. What practical experience have you had in your profession? 7 years

Including - Myr office of Thomas Ogden & Walker Architects, New York

3 mo. " " H. Amble Rogers - Architect "

5 yrs " " R. C. Reames " Seattle "

4. What collateral branches have you studied?

5. Have you ever been examined for license in any other state? no.

(a) If so, where and when? no. (b) Result no.

6. Have you ever practiced in any other state? no.

State of Washington }  
County of King } ss.  
L. W. S. Bindon

I, L. W. S. Bindon, being first duly sworn upon oath, depose and say: that the answers to the foregoing questions and the statements made in the above application are true and correct; that I am the person named in the Diploma accompanying this application; that I am the lawful holder thereof, and that the same was procured in the regular course of instruction and examination without fraud or misrepresentation.

Subscribed and sworn to before me this 4th day of December, 1925

Notary Public for the State of Washington

Residing at Seattle

[SEAL] OK Ack  
Dec 12/25

No Practitioner is expected to sign this recommendation who does not know the applicant personally, and who is not willing to supply additional information concerning his or her character, standing and education, upon request from the Department of Licenses.

LETTER OF RECOMMENDATION

City of Seattle - Wash.  
Dec 4, 1929

To the Department of Licenses of the State of Washington:

This certifies that I have known L. W. S. Biehm for 4 years; that I, personally, knew him while he resided at Seattle in the State of Wash. during the years of 1925 to 1929, during which period he was engaged in active practice of Architecture; that he is of good moral and professional character; that he is free from habits liable to interfere with his professional services; that his standing was good in that community and is good in the community in which he now lives; that he is worthy of receiving a license to practice Architecture in the State of Washington.

Name R. C. Reamer  
Address 232 Steinson Bldg.  
Licensed under the laws of Washington  
(Name of state)  
To practice Architecture

Subscribed and sworn to before me this 4th day of Decemb, 1929

[SEAL] Bureau Balfour  
Notary Public for the State of Washington  
residing at Seattle  
My commission expires Feb 20, 1933.

CERTIFICATE OF MORAL CHARACTER.

To be signed by two reputable business men.

This certifies that I am acquainted with Edward W. Binson; that I believe him to be of good moral character and I hereby recommend him as entirely worthy to be permitted to take the examination for which he has applied.

Name A. G. Schille  
Address 1201 4th av. Seattle  
Name A. H. Gray  
Address 6227 - 35th N. Es

December 5, 1929

Mr. L. W. S. Bindon  
1820 16th Avenue  
Seattle, Washington

Dear Sir:

We acknowledge receipt of your application and fee for the architects examination which is to be held in the Architectural Department of the University of Washington, Seattle, December 19th and 20th, beginning at 9 A. M.

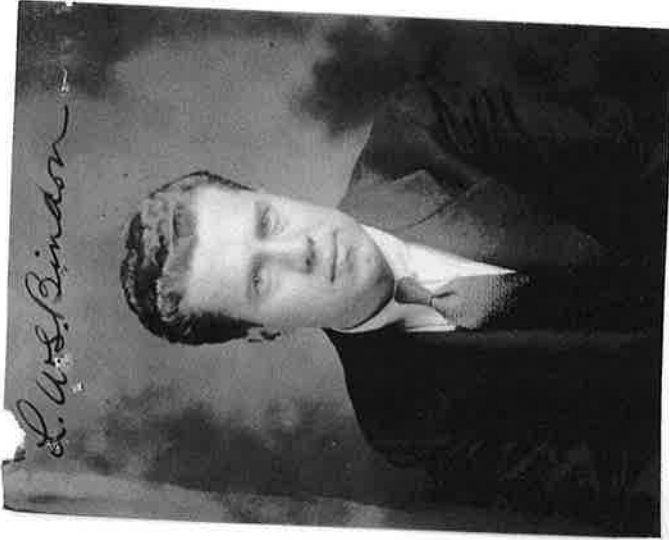
It will be necessary that you provide yourself with one 36" tee square, triangle, scales, thumb tacks, roll of white tracing paper 36", one piece of tracing cloth 36" x 18", drawing ink, pencils and drawing instruments.

Very truly yours,

DEPARTMENT OF LICENSES

HC

D I R E C T O R



A. S. F. No. 941-A-1927. Approved as to Form by Dept. of Efficiency.

**PERSONAL CHECKS NOT ACCEPTED.** Remit by Certified Check, Bank Draft or Money Order to the State Treasurer. **RETURN THIS NOTICE WITH REMITTANCE.**

**State of Washington—Department of Licenses**

Notice is hereby given that renewal of registration certificate, or license, as noted below, is now due.

*Exam. Architect*  
*Leonard William Sommerville*  
*Bindon*  
*1870 16th Ave.*  
*Seawaco*

DO NOT DETACH

DO NOT USE THIS SPACE



General Fund . . . . .

Suspense Fund . . . . .

Fund . . . . .

*2000*

DO NOT USE THIS SPACE

ORIGINAL



# DEPARTMENT OF LICENSES

OF THE

## STATE OF WASHINGTON

### Application

(See page two for instructions and information)

This application 20 1931  
 tory fee to be malle  
 State Treasurer.  
 Remit by Money  
 Bank Draft or CeASUREN  
 Check.

City of Seattle State of Wash  
Dec. 11th, 1931

To the DEPARTMENT OF LICENSES OF THE STATE OF WASHINGTON:

I hereby make application for a license to practice Architecture in the State of Washington.  
 In submitting this application, it is agreed by me that if any part of it be found false or fraudulent, I forfeit the right to a license.

- Name Leonard William Sommerswill Bindon  
(Name in full)
- Address Yarrow Point Wash
- Date of birth June 27 - 1900 Place of birth London, England
- Are you a citizen of the United States? yes.
  - If of foreign birth, state nationality
  - Naturalized when? 1923
  - If not a citizen, have you declared your intention to become a citizen?
  - Color? white
- Where have you resided for the past five years?

1925-1928 - New York City  
1928-1930 - Seattle Wash.

- What common school did you attend? Road College for Boys - London
- Of what high school are you a graduate? Palson High School
- If not a high school graduate, what equivalent education have you had?

9. Of what hospital training school, college, university or other institution are you a graduate?

- None
- How many years did you attend? 4 years
  - How many months in each year? 9 months
  - What degree or degrees did you receive? changed course from Eng. to Arch.
  - Was resident attendance required? no.
  - Date of graduation

- If not a graduate, how many years collegiate training have you had? 4 years. Univ. of Wash.
- What hospital or other training in care of the sick have you had?

12. How much time have you given to clinical practice?

13. What practical experience have you had in your profession?  
All summer vacations during college supplemented in office  
3 years - Teachers Grading & Walker, High. - Months -  
Franklin Rogers, N.Y.C. 6 yrs. R.C. Reamer - Seattle, Wash.

14. What collateral branches have you studied?

- Have you ever been examined for license in any other state? no.
  - If so, where and when?
  - Result

16. Have you ever practiced in any other state? no.

L. W. S. Bindon  
 (Signature of Applicant)

State of Washington  
 County of King

I, L. W. S. Bindon, being first duly sworn upon oath, depose and say: that the answers to the foregoing questions and the statements made in the above application are true and correct; that I am the person named in the diploma accompanying this application; that I am the lawful holder thereof, and that the same was procured in the regular course of instruction and examination without fraud or misrepresentation.

L. W. S. Bindon  
 (Signature of Applicant)

Subscribed and sworn to before me this 11th day of December, 1931

Bursey  
 Notary Public for the State of Washington  
 Residing at Seattle

[SEAL]

No Practitioner is expected to sign this recommendation who does not know the applicant personally, and who is not willing to supply additional information concerning his or her character, standing and education, upon request from the Department of Licenses.

LETTER OF RECOMMENDATION

City of Seattle  
Dec 11, 1930

To the Department of Licenses of the State of Washington:

This certifies that I have known Leonard Bindon for 10 years; that I, personally, knew him  
(Applicant's name in full)  
while he resided at Seattle in the State of Wash during the years of 1920-26  
to \_\_\_\_\_, during which period he was engaged in active practice of Architecture  
as a student of \_\_\_\_\_ that he is of good  
moral and professional character; that he is free from habits liable to interfere with his professional services; that his  
standing was good in that community and is good in the community in which he now lives; that he is worthy of receiving a  
license to practice Architecture in the State of Washington.

Name Cliff H. Gould  
Address 710 Howe Bldg Seattle  
Licensed under the laws of Washington  
(Name of state)  
To practice Architecture

Subscribed and sworn to before me this 11 day of December, 1930

[SEAL]

Cliff H. Gould  
Notary Public for the State of Washington  
residing at Seattle  
My commission expires Feb 20, 1933

CERTIFICATE OF MORAL CHARACTER.

To be signed by two reputable business men.

This certifies that I am acquainted with Leonard Bindon; that I believe him to be of good moral  
character and I hereby recommend him as entirely worthy to be permitted to take the examination for which he has applied.

Name Seattle  
Address 1107 4th Ave Seattle  
Name \_\_\_\_\_  
Address \_\_\_\_\_



CHARLES H. BEBB, F.A.I.A.

CARL F. GOULD, A.I.A.

ARCHITECTS

710-715 HOGE BUILDING

SEATTLE

JOHN PAUL JONES

TELEPHONE ELLIOTT 0819

Dec. 17th, 1930

Architectural License Committee,  
Olympia, Wash.

Gentlemen:-

Mr. Leonard Bindon, who was formerly a student of mine in the Department of Architecture at the University of Washington, and subsequently had varied experience in New York offices as draftsman, and whose career I have followed, is in my opinion a man who I would feel justified in recommending for a license for the practice of architecture.

Yours very truly,

A handwritten signature in cursive script that reads "Carl F. Gould". The signature is written in dark ink and is positioned to the right of the typed name "Carl F. Gould".

CFG.p

**PERSONAL CHECKS NOT ACCEPTED.** Remit by Certified Check, Bank Draft or Order to the State Treasurer. **RETURN THIS NOTICE WITH REMITTANCE.**

**State of Washington—Department of Licenses**

Notice is hereby given that renewal of registration certificate, or license, as below, is now due.

*Erwin, Architect*

*For Leonard William Sommers*

*Yanover Park  
5072  
Wash.*

**DO NOT DETACH**

