



APPLICATION FOR TEMPORARY PERMIT

Code 1070 **Temporary Permit, for a Facility under a Compliance Plan**

Permit Fee: \$ _____ / _____
Date Issued Permit Expiration Date

TO BE COMPLETED BY PERMIT APPLICANT (PLEASE PRINT)

BUSINESS NAME		
MAILING ADDRESS		SUITE
CITY	STATE	ZIP
OPERATION ADDRESS		
CONTACT PERSON		PHONE NUMBER ()

Payment must accompany all applications. Please include a check made payable to the CITY OF SEATTLE.

Permit applications may be submitted in person weekdays from 8:00 a.m. to 4:30 p.m., or mailed to:

Seattle Fire Department
 Fire Marshal's Office – Permits
 220 Third Ave S, 2nd Floor
 Seattle, WA 98104-2608

To pay with a Visa or Master Card, email this application to us,
THEN EMAIL US TO BE PROVIDED AN ONLINE PAYMENT KEY
 Tel: (206) 386-1450
 E-mail: permits@seattle.gov

Call 206-386-1450, at least 24 hours prior to needed inspection time to arrange for an appointment.

Permission is hereby granted to: _____

Special permit conditions: _____

<p>FMO USE:</p> <p>Check No.: _____</p> <p>Receipt No.: _____</p> <p>Application ID#: _____</p>	<p>APPROVED BY:</p> <p>Inspector: _____ SFD ID# _____</p> <p>Date: _____</p>
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