

APPLICATION FOR TEMPORARY PERMIT

Code 1071	Sp	ecial Inspection	n/Review/Permit	
Permit Fee: \$ 372.00 +	time charge		Date Issued	/Permit Expiration Date
TO BE COMPLETED BY PER	MIT APPLICAN	TT (PLEASE PRINT)		
BUSINESS NAME				
MAILING ADDRESS				SUITE
CITY			STATE	ZIP
OPERATION ADDRESS				
CONTACT PERSON			PHONE NUMBER ()
Payment must acco	mpany all ap	plications. Please in	clude a check made pay	able to the CITY OF SEATTLE.
Permit applications may be Seattle Fire Departme Fire Marshal's Office 220 Third Ave S, 2 nd I Seattle, WA 98104-20 Call 206-386-1450, and 206-386-1450, an	nt – Permits Floor 508	To pay with a Vis and then visit wy Tel: (206) 386-14 E-mail: permits@	sa or Master Card, email to www.seattle.gov/fire/permics 50	this completed application to us,
Permission is hereby gran	ed to:			
Special permit condition	S:			
FMO USE:		APPROV	/ED BY;	
Check No.:				and the ii
Receipt No.: Application ID#:		_		SFD ID#
дриканон ил#		Date		