

Seattle Fire Department Permit Application
Code 1207-Install Installation of Stationary Fuel Cell System



Permit Fee: \$554.00

TO BE COMPLETED BY STATIONARY FUEL CELL SYSTEM OWNER OR INSTALLER (PLEASE PRINT):

| | | |
|--|-------------------------------------|----------------------|
| INSTALLER BUSINESS NAME: | | |
| INSTALLER MAILING ADDRESS: | | |
| SDCI -CN or -PH PERMIT # or N/A: | -EL PERMIT # or N/A: | -ME PERMIT # or N/A: |
| ESTIMATED INSTALLATION DATE: | SEATTLE BLDG CODE / FIRE CODE YEAR: | |
| INSTALLER CONTACT PERSON: | PHONE NUMBER: () | |
| STATIONARY FUEL CELL SYSTEM SITE ADDRESS: | | |
| LOCAL REP. CONTACT NAME: | LOCAL REP. PHONE NUMBER: () | |
| LOCAL REP. E-MAIL ADDRESS: | | |
| Type of Fuel Cell System being installed at this site: (Check all that apply) | | |
| <input type="checkbox"/> Pre-packaged | | |
| <input type="checkbox"/> Pre-engineered | | |
| <input type="checkbox"/> Field-Fabricated | | |

Payment must accompany all applications. Please make checks payable to 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 completed application to us,
and then visit www.seattle.gov/fire/permits to make a payment.
 Tel: (206) 386-1450
 E-mail: permits@seattle.gov

SFD INSPECTION REQUIRED PRIOR TO OPERATION
Contact us at least 2 business days prior to intended start date to request an inspection.
 Email: permits@seattle.gov | Call: (206) 386-1450
 May also require Seattle Department of Construction and Inspection Permit: <http://www.seattle.gov/sdci/permits>

| | |
|------------------------|--------------------------------|
| FMO USE: | APPROVED BY: |
| Check No.: _____ | Inspector: _____ SFD ID# _____ |
| Receipt No.: _____ | Date: _____ |
| Application ID#: _____ | |



INSTALLATION PERMIT

Stationary Fuel Cell Systems Code: 1207-Install

Stationary Fuel Cell System Owner or Installer's Business Name: _____

Address Where Stationary Fuel Cell System is Located: _____

| TYPE OF STATIONARY FUEL CELL SYSTEM | AMOUNT | LOCATION |
|-------------------------------------|--------|----------|
| | | |

This permit is not transferable or renewable.

Special Permit Conditions: _____

FIRE DEPARTMENT APPROVAL:

Inspector: _____

INJ/ILL#: _____

Approval Date: _____

This permit shall be kept on the premises designated herein at all times and shall be readily available for inspection by the fire code official. (SFC 105.3.5)