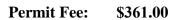
Seattle Fire Department Permit Application Code 3603 Dry Cleaner





T <u>O BE COMPLETED BY PERMIT APPLICA</u>	NT (PLEASE PRIN	T)			
BUSINESS NAME:					
MAILING ADDRESS:				SUITE:	
CITY:		STATE:		ZIP:	
OPERATION ADDRESS:					
CONTACT PERSON:					
PHONE NUMBER: ()		E-MAIL ADI	ORESS:		
Reason for submitting this application (check all that apply):					
 □ New Owner/Operator □ New Operation Address □ Previous Permit Expired at this Operation Address 		☐ Directed to A	 □ New Construction/Process/Installation □ Directed to Apply by Fire Dept/Other Government Agency □ Other Reason: 		
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, 2 nd 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					
TO BE COMPLETED BY FMO INSPECTOR:					
Approved By:		SFD ID#:	Da	te:	
Station No.					
FMO OFFICE USE ONLY:					
Application ID#	Check No.:		Receipt No	·:	
☐ Cancel, refund requested (Approval a	attached)	Cancel, no refund:	☐ Moved ☐ Business closed	☐ Change in ownership☐ Final inspection completed	