

Seattle Fire Department Permit Application
Code 2511 Open Flame, Assembly Occupancy (Calendar Year), Temporary



Permit Fee: \$396.00*

Special Events
-Revised 01/2009-

TO BE COMPLETED BY PERMIT APPLICANT (PLEASE PRINT)

FIRM/APPLICANT NAME:		
MAILING ADDRESS:		SUITE:
CITY:	STATE:	ZIP:
EVENT ADDRESS: VARIOUS		
EVENT DATE(S): VARIOUS		EVENT START TIME(S): VARIOUS
CONTACT PERSON:		PHONE NUMBER: ()
TYPE OF PERMIT: CANDLES <input type="checkbox"/> COOKING <input type="checkbox"/> DEMONSTRATION <input type="checkbox"/> FIRE ACT <input type="checkbox"/>		
Please include a check made payable to the CITY OF SEATTLE with this application.		

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 Avenue South, Second Floor
 Seattle, WA 98104-2608

Permit Processing: (206) 386-1025
www.seattle.gov/fire

APPLICATION RECEIVED LESS THAN 10 BUSINESS DAYS PRIOR TO THE EVENT WILL BE ASSESSED A LATE FEE. THE LATE FEE IS AN ADDITIONAL 50% OF THE ORIGINAL PERMIT FEE.

***PERMITS REQUIRING INSPECTION OUTSIDE REGULAR BUSINESS HOURS WILL BE BILLED BY INVOICE FOR THE INSPECTION. (REG. BUSINESS HOURS MONDAY-FRIDAY 8:00 AM TO 4:30 PM)**

TO BE COMPLETED BY FMO INSPECTOR:

Permit Approved by Inspector : _____	Date: _____
Late fee waived: <input type="checkbox"/> Yes <input type="checkbox"/> No Initials: _____ <input type="checkbox"/> Cancel with full refund <input type="checkbox"/> Cancel, no refund Initials: _____	

FMO OFFICE USE ONLY:

Date Received:	Receipt No.:	Check No.:
Expiration Date: December 31, _____	Application ID#	
<input type="checkbox"/> Cancel with full refund <input type="checkbox"/> Cancel, no refund <input type="checkbox"/> Moved <input type="checkbox"/> No Longer Needs <input type="checkbox"/> Out of Business		