

Seattle Fire Department Permit Application

Code 2511 **Open Flame, Assembly Occupancy (Calendar Year), Temporary**



Permit Fee: \$455.00*

Special Events
-Revised 03/2011-

TO BE COMPLETED BY PERMIT APPLICANT (PLEASE PRINT)

FIRM/APPLICANT NAME:		
MAILING ADDRESS:	SUITE:	
CITY:	STATE:	ZIP:
EVENT TITLE:		
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"/> OTHER <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 Ave South, Second Floor
Seattle, WA 98104-2608

To pay with a Visa or Master Card, fax or email application;
THEN CALL US TO CONFIRM RECEIPT AND MAKE PAYMENT
Tel: (206) 386-1450 / Fax: (206) 386-1348
E-mail: permits@seattle.gov

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

TO BE COMPLETED BY FMO INSPECTOR:

Permit Approved by Inspector : _____	Date: _____
Permit cc:	
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: Dec. 31 , _____	Permit No.:	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		