



# Fire Operational Permit Application

Development Services Department

425-489-2754 • 17301 133<sup>rd</sup> Avenue NE • Woodinville, WA 98072

Desk Hours • Monday – Thursday 7:30am – 5:00pm • Friday 7:30am – 4:00pm

PROJECT ADDRESS: (include unit/suite #)	PERMIT NO. (City to enter)
PROJECT NAME/TENANT NAME:	PARCEL NO.:
PROPERTY OWNER NAME AND PHONE NUMBER	PROPERTY OWNER ADDRESS (include CITY, STATE, ZIP)
PRIMARY CONTACT NAME:	PRIMARY CONTACT ADDRESS (include CITY, STATE, ZIP):
PRIMARY CONTACT PHONE NUMBER:	PRIMARY CONTACT EMAIL ADDRESS:
CONTRACTOR:	CONTRACTOR ADDRESS (include CITY, STATE, ZIP):
CONTRACTOR PHONE NUMBER AND EMAIL ADDRESS:	LICENSE NUMBER & EXPIRATION DATE:
TYPE OF BUSINESS:	IFCI LICENSE NO. (IF APPLICABLE)
DESCRIPTION OF WORK:	
PERMITS APPLIED FOR: <input type="checkbox"/> Annual IFC <input type="checkbox"/> High Piled Storage <input type="checkbox"/> Tent or Canopy <input type="checkbox"/> Tank	
CLASS OF WORK TO BE DONE: <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration/TI <input type="checkbox"/> Repair/Replacement <input type="checkbox"/> Remove <input type="checkbox"/> Install	
USE OF BUILDING: <input type="checkbox"/> SFR <input type="checkbox"/> Multi-Family <input type="checkbox"/> Non-Residential <input type="checkbox"/> Mixed Use	
SQUARE FEET OF STRUCTURE:	HAZARD TYPE
TANK INFORMATION # INSTALLED: _____ # REMOVED: _____ TANK SIZE: _____ TYPE OF FUEL: _____	

***I certify under penalty of perjury that the information furnished by me is true and correct to the best of my knowledge. I further agree to hold harmless the City of Woodinville as to any claim (including costs, expenses, and attorneys' fees incurred in investigation and defense of such claim), which may be made by any person, including the undersigned, and filed against the City of Woodinville, but only where such claim arises out of the reliance of the City, including its officers and employees, upon the accuracy of the information supplied to the City as a part of this application.***

OWNER / OWNER'S AGENT - Must sign in ink

DATE