



FIRE PREVENTION OPERATIONAL APPLICATION

6100 219th Street SW, Suite 200
Mountlake Terrace, WA 98043
Phone 425.744.6267 Fax 425.775.0420
PermitSpecialist@ci.mlt.wa.us
www.cityofmlt.com

Permit # _____

Single-Family Residential

Multi-Family

Commercial

Job Site Address _____

Description of Work _____

OWNER / AGENT CONTACT INFORMATION

OWNER

Name _____
Address _____
City _____ State _____ Zip _____
Ph _____ Fax _____
E-mail _____
Contact Name _____
Ph _____ Fax _____
E-mail _____

CONTRACTOR

Name _____
Address _____
City _____ State _____ Zip _____
Ph _____ Fax _____
E-mail _____
State Lic. # _____
City Lic. # _____

- Carnivals/Fairs Cutting/Welding Pyrotechnic Displays – Proximal - Fireworks
- Temporary Membrane Structures, Tents, Canopies Miscellaneous Operational
- New Tank Tank Removal Decommission in Place Tank Size _____

Inspection Requirements: It shall be the responsibility of the applicant to see that all applicable codes and ordinances are complied with and that all contractors and subcontractors are licensed to do work in the State of Washington and the City of Mountlake Terrace.

Plan Sets Required: Three (3)

I certify to the best of my knowledge, the information provided on this application is true and correct.

Sign Owner / Agent _____ Date _____

Print Owner / Agent _____ Date _____

OFFICE USE ONLY

Received By _____ Date _____

Permit Fee \$ _____ Receipt Number _____ Date _____