

# APPLICATION

23204 58<sup>th</sup> Avenue West  
Mountlake Terrace WA 98043  
Phone 425-744-6267 Fax 425-778-6421  
[PermitSpecialist@ci.mlt.wa.us](mailto:PermitSpecialist@ci.mlt.wa.us)  
[www.cityofmlt.com](http://www.cityofmlt.com)

Application # \_\_\_\_\_

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## FIRE TANK (FPC) PERMIT

### APPLICANT & CONTACT INFORMATION

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Contact Name \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Job Site Address: \_\_\_\_\_

Parcel/Tax Account Number (only if no address is available) \_\_\_\_\_

Description of Work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

New Tank       Tank Removal       Decommission in Place

Tank Size: \_\_\_\_\_

Value of Construction:      \$ \_\_\_\_\_

Plan Sets Required:      Four (4)

Signed: APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

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### FOR OFFICE USE ONLY

Application Received by: \_\_\_\_\_ Date: \_\_\_\_\_

# of Heads: \_\_\_\_ x\$1.00 \$ \_\_\_\_\_

Fire Permit Fee:      \$ \_\_\_\_\_

Plan Check Fee:      \$ \_\_\_\_\_

Total Balance Due:      \$ \_\_\_\_\_ Receipt #: \_\_\_\_\_ Date: \_\_\_\_\_

**CONTRACTOR / OWNER INFORMATION**

It is the responsibility of the applicant to ensure 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.

**PLEASE INSERT INFORMATION FOR ALL CONTRACTORS AND CONSULTANTS, AS APPLICABLE**

**OWNER**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Ph: \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

**CONTRACTOR**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Ph: \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

State Lic. # \_\_\_\_\_

City Lic. # \_\_\_\_\_

**ELECTRICAL / MECHANICAL / PLUMBING**  
(Circle appropriate contractor)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

State Lic. # \_\_\_\_\_

City Lic. # \_\_\_\_\_

**ENGINEER**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

State Lic. # \_\_\_\_\_

City Lic. # \_\_\_\_\_

**ARCHITECT**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

State Lic. # \_\_\_\_\_

City Lic. # \_\_\_\_\_

**OTHER**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

State Lic. # \_\_\_\_\_

City Lic. # \_\_\_\_\_