

INTERNATIONAL FIRE CODE *Permit*



3715 Bridgeport Way W
University Place, WA 98466
PH: (253) 566-5656 FAX: (253) 460-2541

Application Date: _____

Applicant Name: _____

Applicant Phone: _____ Email: _____

Applicant Address: _____

Name of Business: _____

Business Phone: _____ Email: _____

Site Address: _____

In accordance with the International Fire Code, I hereby apply for a permit to (describe fully the process and/or materials to be used):

I hereby certify that the information provided is true and correct and the proposed activity will be in accordance with the laws, rules, and regulations of the State of Washington, the International Fire Code and the University Place Municipal Code.

Applicant: _____ (Print Name) _____ (Signature)

OFFICE USE ONLY

PERMIT #: _____

Fee Paid: _____

Date Paid: _____

Received By: _____

Date Issued: _____

Date Expires: _____

PERMIT CONDITIONS

*This permit is not valid until signed by a City representative

1. Subject to revocation for proper cause, for violation of the International Fire Code, or when necessary for public safety.
2. This permit is not transferable and any changes in use, occupancy, operation or ownership shall require a new permit.
3. This permit must be posted on the premises.

Permitted Use: _____

Occupant Load: _____

By: _____

Title: FIRE CODE OFFICIAL

**MAKE CHECKS PAYABLE TO:
CITY OF UNIVERSITY PLACE**