

**Town of Friday Harbor**

PO Box 219 / Friday Harbor / WA / 98250

(360) 378-2810 / fax (360) 378-5339 / www.fridayharbor.org

**Fire Alarm / Fire Sprinkler Permit Application**

Application date	Tax parcel number	<b>Office Use Only</b>	
		FP#	Date Permitted
Name of legal property owner		Phone number	
Property owner mailing address			
Authorized Agent (must have signed authorization form)		Authorized Agent phone number	
Authorized Agent address		Email Address	
Job site address/physical location of property			
Description of work to be performed, please circle one:		Fire Sprinkler	Fire Alarm
<b>Type of building the fire permit is requested for (check the appropriate box)</b>			
<input type="checkbox"/>	Commercial	<input type="checkbox"/> Other	
Building Dimensions _____ X _____		Main Floor _____ sq. ft.	
2 <sup>nd</sup> Floor _____ sq. ft.		Other _____ sq. ft.	
Contractor Company Name			
Contact Name		Phone #	
Contractor's Washington State License #		Expiration date	
UBI #			
Total valuation of work to be performed			
Signature of Owner or Authorized Agent	Date	Permit Fee	Total Fees
		\$	\$

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**LETTER OF AGENT AUTHORIZATION**

I, \_\_\_\_\_  
(Legal Property Owner(s))

authorize \_\_\_\_\_ to act on  
(Agent)

my behalf during the processing of:

\_\_\_\_\_  
(Application Type)

\_\_\_\_\_ (Signature of legal property owner) \_\_\_\_\_ (Date)

\_\_\_\_\_ (Signature of legal property owner) \_\_\_\_\_ (Date)