

CITY OF PASADENA  
FIRE DEPARTMENT  
199 S. LOS ROBLES, SUITE 550  
PASADENA, CA 91101

APPLICATION FOR PERMIT

DATE \_\_\_\_\_

PERMIT TYPE: ANNUAL  OCCASIONAL

F.M.A. \_\_\_\_\_ OCCUPANCY TYPE \_\_\_\_\_

Name of Business \_\_\_\_\_ Principal Business \_\_\_\_\_ Business is: Corporation  Solely Owned  Partnership

Address of Business (Number, Street, City, Zip Code) \_\_\_\_\_ Business Phone \_\_\_\_\_

Name/Address of Owner or Local Manager \_\_\_\_\_ Home Phone \_\_\_\_\_

Permit Location (If Different from Above) \_\_\_\_\_ Dates of Use: Start \_\_\_\_\_ End \_\_\_\_\_ Permit Expiration Date \_\_\_\_\_

Application is hereby made to the Pasadena Fire Department for a permit for the following (Check Type).

ASSEMBLY \_\_\_\_\_

TENTS \_\_\_\_\_

OPEN FLAME \_\_\_\_\_

HAZARDOUS MATERIALS \_\_\_\_\_

HAZARDOUS PROCESS \_\_\_\_\_

UNDERGROUND STORAGE TANK \_\_\_\_\_

OTHER (Specify) \_\_\_\_\_

Application for exceptions should be detailed below:

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Applicant's Signature \_\_\_\_\_ Title \_\_\_\_\_

**X** \_\_\_\_\_ **X** \_\_\_\_\_

CITY USE ONLY

Plan Check Required \_\_\_\_\_ Completion Date \_\_\_\_\_ Time Spent \_\_\_\_\_

Inspection Required \_\_\_\_\_ Completion Date \_\_\_\_\_ Time Spent \_\_\_\_\_ Co. # \_\_\_\_\_ Shift \_\_\_\_\_

Charges/Original Permit \_\_\_\_\_ Application Received \_\_\_\_\_ Date \_\_\_\_\_

Charges/Renewal Permit \_\_\_\_\_ Fees Received \_\_\_\_\_ Date \_\_\_\_\_

Additional Time @ \_\_\_\_\_ Hr. \_\_\_\_\_ Permit Issued \_\_\_\_\_ Date \_\_\_\_\_

Total Permit Fee \_\_\_\_\_