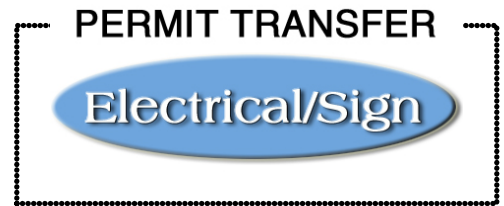




City of Seattle  
**Department of Construction and Inspections**  
**Construction Inspections Division**  
 700 5<sup>th</sup> Ave, Suite 2000, PO Box 34019, Seattle, WA 98124-4019  
**Phone:** (206) 684-8950     **Website:** www.seattle.gov/sdci  
**Questions:** www.seattle.gov/sdci/about-us/contact-us  
**ASC Hours: M / W / F 8:00-4:00 & Tu / Th 10:30-4:00**



# APPLICATION FOR PERMIT TRANSFER

(For use with Electrical & Sign Permits only)

**Permit or A/P #:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
 (Original Permit Number)

**Receipt #:** \_\_\_\_\_ **Date Permit Issued:** \_\_\_\_\_  
 (Original Purchase Receipt Number)

**Work Site Address:** \_\_\_\_\_

**Primary Applicant/Installer:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Receipt Issued to:** \_\_\_\_\_  
 (Installer/Owner)

**Transfer Installer of Record:**

I hereby transfer the installation rights in the application/permit identified above to the **NEW INSTALLER**; and release all funds associated with this permit to the Department of Construction and Inspections.

**Original Permit Holder Signature:** \_\_\_\_\_

**New Installer Company Name:** \_\_\_\_\_

**Contractor License #:** \_\_\_\_\_

**City of Seattle Bus Lic #** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_

**Comments/Description:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**Seattle DCI Staff Use Only:**

\_\_\_\_\_ (Authorized Signature) \_\_\_\_\_ (Date)