



FOR OFFICE USE ONLY
Permit #(s) _____
Date: _____

MONROE FIRE DEPARTMENT

163 Village Court • Monroe, WA 98272
Phone: (360) 794-7666 • Fax: (360) 794-0959
www.monroefire.org

SUBMIT TO: CITY OF MONROE PERMIT DEPARTMENT

806 West Main Street • Monroe, WA 98272
Phone: (360) 794-7400 • Fax: (360) 794-4007
www.ci.monroe.wa.us

AEROSOL PRODUCTS 105.6.1
OPERATIONAL PERMIT APPLICATION

An operational permit is required to manufacture, store or handle an aggregate quantity of Level 2 or Level 3 aerosol products in excess of 500 pounds (227 kg) net weight.
(See Page 3 to determine aerosol Levels)

Permit Submittal Hours Monday through Friday:

Building, Fire & Land Use permits: 9:00 am – 12:00 pm & 2:00 pm – 4:00 pm
Verify Current Fee Schedule with Permit Staff Before Submitting Application
http://www.monroefire.org/fire_marshall/forms/permit/fire_fee_schedule.pdf

THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT COMPLETED SUBMITTAL REQUIREMENTS (SEE PAGE 2)

Site Address or Property Location: _____

Size of site (acre/square feet): _____

Assessor's Tax Parcel Number (14 digits): _____

Applicant: _____ Phone # (____) _____

*Signature: _____ Printed Name: _____

Mailing Address: _____ Fax # (____) _____

City _____ State _____ Zip _____ E-mail _____

Property Owner: _____ Phone # (____) _____

**Signature: _____ Printed Name: _____

Mailing Address: _____ Fax # (____) _____

City _____ State _____ Zip _____ E-mail _____

ATTACH A SEPARATE SHEET FOR ADDITIONAL PROPERTY OWNERS/ADDITIONAL ADDRESSES

*Applicant: By your signature above, you hereby certify that the information submitted is true and correct and that you are authorized by the property owner(s) to act on their behalf.**Property Owner(s): By your signature above, you hereby certify that you have authorized the above Applicant to make application on your behalf for this application.

Is this application a **Renewal of an Existing Operational Permit?**

Yes - Complete this Page Only

No - Continue to Page 3 for Submittal Requirements

RENEWAL SECTION (Complete this section only if this application is a renewal of an existing operational permit)

Permit # of Previous Operational Permit: _____

Describe all changes in the operations or hazards covered under this permit since this Operational Permit was last issued.

No Changes since Permit was last issued

Do not complete or attach other pages. Submit pages 1 and 2 of this application as your RENEWAL application, along with current permit fees (contact Permit Department for a fee estimate). A fire inspector will contact you at your place of business to conduct an inspection of the operations or hazards covered under this permit. After a satisfactory inspection of these operations your Operational Permit will be renewed.

FOR OFFICE USE ONLY

Plan Check Fee: \$ _____	Permit Fee: \$ _____
Fire Plan Check Fee: \$ _____	State Fee: \$ _____

SUBMITTAL REQUIREMENTS

OPERATIONAL PERMIT – IFC 105.6.1

1. Aerosol products shall be classified as Level 1, 2 or 3 in accordance with Table 2803.1 and NFPA30B. Aerosol products in cartons which are not identified in accordance with this section shall be classified as Level 3.

**TABLE 2803.1
CLASSIFICATION OF AEROSOL PRODUCTS**

CHEMICAL HEAT OF COMBUSTION		Aerosol Classification
Greater than (Btu/Lb)	Less than or equal to (Btu/Lb)	
0	8,600	1
8,600	13,000	2
13,000	-----	3

For SI: 1 British thermal unit per pound = 0.002326 kJ/g.

Cartons shall be identified on at least one side with the classification level of the aerosol products contained within the carton as follows:

LEVEL _____ AEROSOLS

2. Indicate the total quantities of aerosols in storage:

Aerosol Class 1: _____ lbs inside; _____ lbs outside

Aerosol Class 2: _____ lbs inside; _____ lbs outside

Aerosol Class 3: _____ lbs inside; _____ lbs outside

3. Indicate the total quantities of aerosols on display:

Aerosol Class 1: _____ lbs inside on display

Aerosol Class 2: _____ lbs inside on display

Aerosol Class 3: _____ lbs inside on display

4. Indicate the Occupancy Classification as found on the Certificate of Occupancy.

Occupancy Classification: _____

5. Provide an MSDS for all aerosol products.

NOTE : A FIELD INSPECTION WILL BE CONDUCTED PRIOR TO ISSUANCE OF THIS PERMIT.