APPLICATION FOR SMALL APPLIANCE PERMIT
(Implemented by SSC SPG 8715.1)

Instructions: Complete all blanks accurately and completely. (Underlined fields will expand as you type.)

To: Fire Chief
   Building 2201

Date

I, ____ , do hereby apply for approval of a permit to operate a coffee maker or small appliance.

1. Description of Appliance
   
<table>
<thead>
<tr>
<th>Make</th>
<th>Model</th>
<th>Style</th>
<th>Serial Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

   Description

2. Exact Location of Appliance
   
<table>
<thead>
<tr>
<th>Building</th>
<th>Floor</th>
<th>Room</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

   Describe area of location:

3. Requestor will be responsible for “disconnecting” of electrical appliance.

4. Does this request for permit replace an existing permit? □ YES □ NO
   If yes, provide the old permit number __________

   Signature of Requestor Organization Phone Number

Remarks