

# Special Occupancy License Application



## Submit Application to:

Madison Fire Department  
314 W. Dayton St.  
Madison, WI 53703-2579

Make checks payable to: **City of Madison Treasurer.**  
**License fee is \$125.00 and is non-refundable.**

For questions, or to contact a Fire Code Enforcement Officer, call (608) 266-4420 for assistance.

**Complete sections A - D. It is mandatory that all applicable information be completed.  
Inaccurate information may result in suspension or revocation of license.**

### SECTION A: Establishment Address

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Municipality (Village/Town/City): \_\_\_\_\_

### SECTION B: License Holder Information

Organization Legal Name/Sole Proprietor Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Organization Contact Person: \_\_\_\_\_

Organization Contact Phone: \_\_\_\_\_ Organization Contact E-mail: \_\_\_\_\_

### SECTION C: Check ALL That Apply

<input type="checkbox"/>	Aviation Facility	<input type="checkbox"/>	Places of Assembly
<input type="checkbox"/>	Combustible Dust	<input type="checkbox"/>	Repair and Service Garage
<input type="checkbox"/>	Dry Cleaning Plant	<input type="checkbox"/>	Spraying or Dipping
<input type="checkbox"/>	Lumber Yard / Woodworking Plant	<input type="checkbox"/>	Waste Handling

### SECTION D: Attestation and Signature

By signing this application you acknowledge and agree to comply with Madison General Ordinance 34, Wisconsin Administrative Codes and the International Fire Code.

The statements made in this application are true to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_