

Seattle Department of Transportation Street Use & Urban Forestry Division 700 Fifth Avenue, Suite 2300 | P.O. Box 34996 Seattle, Washington 98124-4996 (206) 684-5253 | SDOTPermits@seattle.gov

SDOT Permit Number(s)	Intake Review
(Official Use Only)	

STREET USE GENERAL APPLICATION

Seattle Municipal Code (SMC) 15.04

1	PROJECT ADDRESS
	Address Number Street Name (include NE, SW, Ave, St, Blvd, etc.)
2	PROJECT INFORMATION
	Applied Online/By Email: Yes No Permit Number(s)
	PERMIT TYPE (Check all that apply) PROJECT TYPE (Check all that apply)
	Storage/Moving Container or Residential Dumpster Single Family
	Annual Vehicle/Truck Permit Construction (material storage, scaffolding, pumping, sidewalk repair) Commercial/Mixed Use
	Construction (material storage, scaffolding, pumping, sidewalk repair) Utility (electrical, gas, water, potholing, soil boring) Commercial/Mixed Use Industrial
	Urban Forestry (tree planting, pruning, or removal) Community/Festival
	Decorative Lighting
	Public Space Management Annual (sidewalk café, encroachment, signs)
	☐ Vending
	Council Approved Term Permit
3	BACKGROUND
	RELATED PERMITS
	Construction Use Permit # SIP/Utility Major Permit #
	Public Space Management: Permit # DPD Permit #
	Annual/Vending/Term Other Type
	Simple Utility Permit # Permit #
	INSPECTOR WARNING
	Verbal Written None
	Note: Failure to notify Street Use & Urban Forestry of Inspector Warning could cause delays in permit processing and may lead to additional fees or fines.
4	PROJECT DESCRIPTION
	EXAMPLES: Construction - Construct new single family residence on vacant lot. Stage construction dumpster in curb parking lane. Stage construction materials in planting strip. Cross curb with excavation equipment. Block sidewalk during concrete pumping and material booming activities.
	Annual - Build a 6-foot by 2-foot sidewalk café area outside of our business; surround area by 42-inch high fence.
	Describe Project and Work in Right of Way

Check if Applicant is the Home or Property Own Applicant Name:	SDOT Customer ID Number:
Company:	SDOT Company ID Number:
• •	Mobile Phone Number:
Mailing Address (include city, state, zip):	Mobile Phone Number:
	Office/Home Phone Number:
	Email Address:
FINANCIALLY RESPONSIBLE PARTY	
Check if Applicant is the Financially Responsible	Party - skip this section, proceed to 7
Check if Applicant is applying on behalf of the Fina	ncially Responsible Party - a Letter of Authorization (LOA) is
Applicant Name:	SDOT Customer ID Number:
Company:	SDOT Company ID Number:
Mailing Address (include city, state, zip):	Mobile Phone Number:
	Office/Home Phone Number:
	office/fronte Fronte Namber.
24-HOUR-CONTACT (Job Site Contact)	Email Address:
Check if Applicant is the 24-Hour-Contact - skip t	Email Address:) this section, proceed to 8
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Check if Applicant is the 24-Hour-Contact - skip to Applicant Name: Company: Mailing Address (include city, state, zip): TERMS AND CONDITIONS	Email Address: Short Customer ID Number: Short Company ID Number: Mobile Phone Number: Office/Home Phone Number: Email Address:
Check if Applicant is the 24-Hour-Contact - skip to Applicant Name: Company: Mailing Address (include city, state, zip): TERMS AND CONDITIONS Idemnification: The Permittee agrees to defend, indemnify, and hold harmles the of Seattle, its officials, officers, employees, and agents against: (1) any liability aims, causes of action, judgments, or expenses, including reasonable attorney es, resulting directly or indirectly from any act or omission of the Permittee, its ubcontractors, anyone directly or indirectly employed by them, and anyone forts or omissions they may be liable, arising out of the Permittee's use or occup	ss the ordinances, including but not limited to Title 15 SMC, and all applicable recofs state and federal law. Work shall begin within six months from the date unless other arrangements are made, otherwise the application shall be vore a Applicant/Permittee or Authorized Agent Statement: I declare under perjury under the laws of the State of Washington that: I am the Applicant/OR the authorized agent of the Applicant/Permittee; that the information of the Applicant of the App
Check if Applicant is the 24-Hour-Contact - skip to Applicant Name: Company: Mailing Address (include city, state, zip):	ss the ordinances, including but not limited to Title 15 SMC, and all applicable reconstitute of state and federal law. Work shall begin within six months from the date unless other arrangements are made, otherwise the application shall be vore and to the Applicant/Permittee or Authorized Agent Statement: I declare under perpension or correct and complete; and that I have the authority to bind the Applicant/Permitte. It is application. Deposits, Charges, and Future Billings: The Permittee is responsible for a charges. If a deposit was made for estimated future Street Use & Urban For services, any unused portion of the deposit will be refunded to the Applicant services, any unused portion of the deposit will be refunded to the Applicant services, any unused portion of the deposit will be refunded to the Applicant services, any unused portion of the deposit will be refunded to the Application.

ATTACH PROJECT-SPECIFIC PERMIT APPLICATION(S)



Seattle Department of Transportation Street Use & Urban Forestry Division 700 Fifth Avenue, Suite 2300 | P.O. Box 34996 Seattle, Washington 98124-4996 (206) 684-5267 | annualpermits@seattle.gov

PUBLIC SPACE MANAGEMENT	
VENDING PERMIT APPLIC	ΔΤΙΩΝ

Seattle Municipal Code (SMC) 15.04, 15.17

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Decal Number(Official Use Only)	

My signature indicates	that I am bound by the tern	ns and conditions outlined in Section	8 of the Street Use General Applicatio
APPLICANT SIGNATU	RE		DATE
PROJECT ADDR	RESS		
Address Number		Street Name (include NE, SW, Av	ve, St, Blvd, etc.)
VENDING TYPE	(Check all that apply)		
STADIUM EVENT VEI	NDING		
	April through September (19C)	
Fall/Winter - Octol	per through March (19D)		
FOOD-VEHICLE ZON	E		
DAY 6 a.m. to 8 p.r			
NIGHT 8 p.m. to 6	a.m. (19H)		
SIDEWALK/PLAZA V	ENDING		
DAY 6 a.m. to 8 p.r			
NIGHT 8 p.m. to 6	a.m. (19F)		
OTHER			
First Amendment	Vending (19B)		
	pace Vending (for special e		
Mobile-Route Foo	d Vending (for example, ic	e cream trucks) (19J)	
4 VENDING DESC	RIPTION		
Truck Cart		her	
Desired Start Date		of Truck, Cart or Trailer in feet - footprint)	License Plate Number

DAYS AND HOURS OF OPERATION

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6 p.m. ~ 8 p.m.		6 p.m 8 p.m.			6 p.m 8 p.m.	
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5	AREA(S) REQUESTED FOR USE (Check all that apply)
	Sidewalk
	Parking Lane
	Bike Lane
	Travel Lane
	Alley
	Unimproved Right of Way
	Plaza (a public space closed to vehicular traffic)
6	REQUIRED AT APPLICATION
	Deposit for Permit Review
	Site Plan
	Seattle & King County Department of Public Health Mobile Food Unit Permit
	Seattle & King County Department of Public Health Use of Restroom Agreement
	Seattle Fire Marshall Permit
	Seattle Business License
	Liability Insurance - see Client Assistance Memo (CAM) 2102
	Photo(s) of vending cart or food vehicle
	Copy of menu
	ADDITIONAL DOCUMENTS OR APPROVALS THAT MAY BE REQUIRED PRIOR TO PERMIT ISSUANCE
	Historic or International District Approval
	Access Affidavit
	Public Notice Contact List
	Parks Department Recommendation
	Nonprofit Organization Registration