

Louisville Fire Department

1135 W. Jefferson St., Louisville, KY 40203

Billing Form

Company Name: _____

Physical address: _____

Mailing address
(if different from above): _____

Occupancy ID number: _____
(printed on your letter)

Hazmat Permit Level: (check **ONE**)

	Liquid	Solid	Gas
Level 1 (\$100)			
Level 2 (\$200)			
Level 3 (\$300)			
Level 4 (\$400)			
Level 5 (\$500)			

I, _____, certify that to the best of my knowledge, the
Signature enclosed chemical inventory and corresponding fee are accurate at the time of submission.

Printed Name & Title _____

Did you remember to enclose:

Chemical Inventory?	
Floor Plan?	
List of current contacts?	
Payment?	

Print, sign and mail to: ATTN: Hazmat Permit, Louisville Fire Prevention Bureau, 1135 W. Jefferson St., Louisville, KY 40203.