



City of Puyallup | Engineering Services
UTILITY CONNECTION PERMIT

Tel: 253.864.4165 | Fax: 253.840.6678

PRSC20230465

Submittal Checklist

Applicant City Received
Yes N/A Yes

Documents

- Completed Application Form
Submit electronically
Plan Review Fee\*

If work within the City's Right of Way the following is Required

- Performance Bond
Current Insurance & CG 20 12
Traffic Control Plan

Checked in by:

Date:

Please see page 2 for construction permit fees and additional Right of Way information.

OWNER

Name: JOHN HOPKINS Ph #: 253 973 7069
Email: J.L.H396@comcast.net Address: 805 15th St N.W
City: Puyallup State: WA Zip: 98371

CONTRACTOR

Name: 44th Construction Ph #: 253 241 5669
Email: Address: 11014 44th Ave E
City: Tacoma State: WA Zip: 98446
WA State License No: Exp Date:
City Business License No: 44THCC 78345

SITE ADDRESS

1102 EMMA RD PUYALLUP 98372
Parcel: Zoning:

COMMERCIAL This application is for repairs to existing services. New utility connections for commercial buildings require a separate civil permit.

- Sewer Repair pipe size/type length ft
Water Repair meter size length ft

Issued for the installation of a sewer sampling tee

RESIDENTIAL \*New connections require a separate Right of Way permit to connect to the main.

- Sewer Repair pipe size/type No. of cleanouts length ft
New Sewer Connection\* pipe size/type No. of cleanouts length ft
Water Repair meter size length ft
New Water Connection\* meter size length ft

Water turn-on fee must be paid for and coordinated directly with the Utility Billing Division located on the 3rd floor of City Hall or by phone at 253.841.5550.

Irrigation? No Yes \*If yes, a plumbing permit and backflow device are required.

If the home is currently served by a septic tank and/or well, a separate application with the Pierce Co Health Dept. is required.

CERTIFICATION:

I certify that I have read this application and declare under penalty of perjury that the information contained herein is correct and complete. I am either the owner of the property described, or I represent the owner as signified above and am acting with the owner's full knowledge and consent.

Signature of Applicant:

Date APRIL 14