

City of Puyallup Application for Building Permit

333 S. Meridian Puyallup, WA 98371

Tel: (253) 864-4165 permitcenter@puyallupwa.gov

Parcel No: 9810000014	Site	Address: 401 14 ^{th Ave} SE	
Owner Name: Multicare Health System		Tel:	
Owner Address: PO Box 5299	City: Tacon		Zip: 98415
Contractor Name: Mastec Network Solutions	Tel: 866-	545-1782	
Contractor Address: 22263 68th Ave S	City: Kent		Zip: 98032
WA State License: 602 235 974	Exp Date: 5/14/2023 City Bu 0003		License: 603235974-001-
Contact Name: Fu Chang	Email: Fchang@rykaconsu	ılting.com	
Contact Tel: 206-372-5155	Fax:		
Lender Name: NA	Addres	s:	Tel:
Project Description: _Add 6 new a f the project disturbs one acre or more, the applied information visit DOE website www.ecy.wa.gov	cant must apply for a NPDES Constru	action stormwater general permit from	
COMMERCIAL OR RESIDENTIAL	Commercial	TYPE OF CONSTRUCTION	II-B
OCCUPANCY TYPE	Unmanned	FIRST FLOOR SQ. FT.	
OCCUPANCY LOAD		SECOND FLOOR SQ. FT.	
# OF DWELLING UNITS		BASEMENT SQ. FT.	
# OF BEDROOMS		GARAGE SQ. FT.	
# OF BATHROOMS		COVERED PORCH SQ. FT.	
BUILDING HEIGHT	94'	PATIO SQ. FT.	
ZONING	Medical	DECK SQ. FT.	
LOT SIZE SQ. FT.		НЕАТ ТҮРЕ	
LOT COVERAGE: (%)		CHANGE OF USE?	
IMPERVIOUS SURFACE SQ. FT.		AIR CONDITIONED?	
PROJECT DISTURBED AREA SQ. FT.		FIRE SPRINKLERS?	
SEWER OR SEPTIC		LOCATED IN FLOOD PLAIN?	
WATER PURVEYOR		VALUATION	\$ 25,000.00

BY LEAVING THE CONTRACTOR INFORMATION SECTION BLANK, I HEREBY CERTIFY FURTHER THAT CONTRACTORS (GENERAL OR SUBCONTRACTORS) WILL NOT BE HIRED TO PERFORM ANY WORK IN ASSOCIATION WITH THIS PERMIT. I ALSO CERTIFY THAT IF I DO CHOOSE TO HIRE A CONTRACTOR (GENERAL OR SUBCONTRACTOR) I WILL ONLY HIRE THOSE CONTRACTORS THAT ARE LICENSED BY THE STATE OF WASHINGTON.

Fu Chang	4/19/23	Fu Chang	SIGNATURE OWNER /	AUTHORIZED AGENT
PRINT NAME	DATE			

REV 2/20 1

MECHANICAL

Quantity Scheduled	Description	Permit Rate Per Unit	Total Price
1	Permit Issuance	40.00	40.00
	Supplemental Permit	9.60	
	AC Unit – Stand Alone	19.55	
	Install Furnace / Burner up to 100,000 BTU	19.55	
	Install Furnace / Burner over 100,000 BTU	24.00	
	Install / Relocate Floor Furnace & Vent	19.55	
	Install / Relocate Recessed Wall Space Heater	19.55	
	Appliance Vent – Separate	9.60	
	Repair Heating / Cooling Unit	18.11	
	Heat Pump/Boiler / Compress. 3 HP; up to 6 Tons; 100,000	19.55	
	Heat Pump/Boiler / Compress. 3-15 HP or 500,000 BTU	35.95	
	Heat Pump/Boiler / Compress 15-30 HP or 1,000,000 BTU	49.28	
	Heat Pump/Boiler / Compress 30-50 HP or 1,750,000 BTU	73.30	
	Heat Pump/Boiler / Compress over 50 HP or over 1,750,000	122.48	
	Separate Air Handling Unit to 10,000 CFM	14.10	
	Separate Air Handling Unit over 10,000 CFM	23.92	
	Stationary Evaporative Cooler	14.10	
	Exhaust Vent Fan with Single Duct (Bath Fan)	14.10	
	Vent System Apart from Heating or AC	14.10	
	Mechanical Exhaust Hood / Duct (Range Hood) - Residential	14.10	
	Mechanical Exhaust Hood w/Make-up Air - Commercial	35.95	
	Commercial / Industrial Incinerator	24.00	
	Gas Piping: (1 - 4 outlets) (5 or more outlets / per outlet)	6.30 1.30	
	Unclassified Appliance or Equipment (Fireplace, etc.)	14.10	

	Mechanical Duct Work: (1 – 5 Diffusers) (6 – 10 Diffusers)	14.10 19.55	
	(11 or more Diffusers)	24.00	
TOTAL:			

PLUMBING

Quantity Rate Per Quantity Rate Per Description **Total** Description Total Scheduled Scheduled Unit Unit Permit Issuance GREASE TRAP/INTERCEPTOR 1 40.00 40.00 RESIDENTIAL (1 & 2 DWELLINGS) Grease Trap 13.00 1 Bathroom 160.00 Grease Interceptor 13.00 2 Bathroom 200.00 **BACK FLOW DEVICE** Per Unit 3 Bathroom 240.00 26.00 Alterations each fixture 13.00 MEDICAL GAS SYSTEM Water Heater 13.00 Medical Gas Piping System 80.00 ***COMMERCIAL*** Surgical Vacuum System 80.00 New Const. each fixture 13.00 Gas Piping: (1 - 4 outlets) (5 or more outlets/per outlet) 8.50 2.00 Alterations each fixture 40.25 13.00 Dental Chair or Unit Drinking Fountain, Water OTHER (NOT LISTED) 40.25 Cooler, Ice Machine Sump, Sewage Ejector Pump 13.00 Garbage Disposal 13.00 Water Heater 13.00 **SUB-TOTAL:** SUB-TOTAL: TOTAL:

***COMMERCIAL PROJECTS: Please complete a "Plumbing Fixture Worksheet" ***

A water availability/approval letter shall be submitted with this application for any property located outside the city's water service area.

Fruitland Mutual Water Co. - (253) 848-5519 / Valley Water Co. - (253) 841-9698 / Tacoma Water Co. - (253) 502-8600

2

Plan Submittal Checklist for Single Family Residence

2 (two) copies of a site plan, drawn to scale on 8½" x 11". Details to include setbacks, easements, other structures & features, adjacent right-of-way,
rive access, septic and/or utility lines, and contours of slopes over 15% grade at 2-foot intervals. 2 (two) sets of plans (Engineer or Architect
tamped on all sheets)
☐ Foundation Plan: footing size, wall height, section & reinforcing. Provide design calculations for basement walls that are not supported by concrete cross walls spaced per table 404.1b.
Floor plan with room use identified Floor framing plan for each floor (post & beam or joist w/ size & spacing) Ceiling/roof traming plan or truss layout w/ reactions from truss manufacture. Truss layout with hanger and reactions for girder/carrier trusses Truss drawings for TJI's or BCI's Truss specifications packet Engineer Stamped
\square Window & door sizes, header sizes, U-values \square Complete building sections - special sections (show floor, wall & ceiling height, insulation R-value of floors, walls & ceilings. Show sections through stairs - headroom)
☐ Constructions details (i.e. structural members, insulation, sheathing, siding, roofing, bracing, dimensions, etc.)
☐ Exterior porches & decks (resistance to decay including support footings)
☐ Special equipment (fireplace, woodstove, hydro-massage tub, etc.)
☐ Location of all smoke detectors
☐ Handrail/guardrail details for stairs, landings, decks
Energy Worksheets: http://www.energy.wsu.edu/BuildingEfficiency/EnergyCode.aspx
2 (two) sets Engineering plans/calculations for special conditions – Engineer stamped Basement & retaining walls 4 feet and higher Beams supporting combined roof & floor loads Beams supporting other beams or girder usses Shear walls when bracing not provided as required. If less than 2,000 square feet of new + replaced hard surface: submit a temporary ediment and erosion control plan per the 2014 update to the 2012 Stormwater Management Manual for Western Washington
If greater than 2,000 square feet of new + replaced hard surface: submit a Stormwater site plan, report and temporary sediment and erosion control plan and report that satisfy the 2014 update to the 2012 Stormwater Management Manual for Western Washington and City standards
Plan Review Fee
Plan Submittal Checklist for Commercial Projects
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☐ Special equipment (kitchen, HVAC, Boiler, fireplace, woodstove, etc.)
$\hfill \square$ Mechanical plans including layout, location and make/model of equipment
☐ Traffic Scoping Worksheet
☐ Plan Review Fee