

## **City of Puyallup – Fire Prevention Department Application for Fire Code – Construction Permit**

333 S. Meridian Puyallup, WA 98371 Tel: (253) 864-4165

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Building Permit #	(in association to the fire sprinkler/alarm sub	mittal)	)

Parcel #: 9810000013	Site Address: 401 15th Ave SE
Owner Name: Multicare Health System	Phone #:
Owner Address: PO Box 5299 MS 737-4-FSAD	City: Tacoma, WA Zip: 98415
Contractor Name: Johnson Controls Fire Protection	Phone #: 206-291-1400
Contractor Address: 12781 Gateway Drive	City: Tukwila, WA Zip: 98168
WA License #: JOHNSCP831PR	Exp. Date: 10/06/2024
Contact Person: Janet Stebbins	Contact Email Address: janet.stebbins@jci.com
Contact Phone #:	Contact Fax #:

PROJECT DESCRIPTION (TO INCLUDE TENANT NAME): Modify existing fire alarm system Good Sam Hospital, West, Level 2, OR 7 and 8. (8) Devices. Joint venture between Johnson Controls Fire Protection and Precision Electric Group.

## THE APPLICANT HEREBY MAKES APPLICATION FOR THE FOLLOWING FIRE CODE PERMIT

Permit	Description	# of Devices or square footage	Notes/Requirements			
☐ Fire Sprinkler — New	Installation of a New Automatic Fire Sprinkler System		Total square footage of fire sprinkler required			
☐ Fire Sprinkler — Tenant Improvement	Tenant Improvement to Existing Fire Sprinkler System					
☐ Fire Alarm System -New	Installation of a New Fire Alarm System		Designed to total coverage NFPA72			
Fire Alarm System - Tenant Improvement	Tenant Improvement to Existing Fire Alarm System	8 Devices	Designed to total coverage NFPA72			
☐ Hood Suppression	New or modification of existing system					
☐ Generator	Backup Generator or Emergency Generator - \$265					
☐ OTHER						
***Selection Below Must Be Completed By Applicant ~ Please Acknowledge BOTH REQUIRED ***						
U.L. Certification/Third Party Acknowledgement (check box for acknowledgment)						
NICET Level of Fire Alarm Designer Acknowledgment (check box for acknowledgment) Level III, Eric Beck						
***I have submitted a minimum of three sets of plans and calculations/cut sheets***						
Signature: \ant	Stebbins		<b>Date:</b> 05/10/2023			
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<b>Print Signature:</b> jar	et Stebbins		Email: janet.stebbins@jci.com			