



City of Puyallup

Application for Demolition Permit

**Submit all documents electronically to:
 permitcenter@puyallupwa.gov**

Building Division
 333 S. Meridian
 Puyallup, WA 98371
 Tel: (253) 864-4165 Fax: (253) 840-6678

Parcel #: 0420205004		Site Address: 5109 Freeman Road East	
Owner: CRP/VDC Freeman Logistics Owner		Phone #: (425) 658-7151	Owner Email: mcordell@vectorrecg
Owner Address: 11411 NE 124th St Ste 190		City: Kirkland	Zip: 98034
Contractor Name: Rivers Edge Environmental Service, Inc		Phone #: 425-584-7089	
Contractor Address: 17115 SE 270th Pl Ste E106		City: Covington	Zip: 98042
WA License #: RIVEREE855DT	Exp. Date: 03/30/2024	City Business License #:	603 483 511
Contact Name: Clayton Mullendore		Contact Email: cmullendore@rivers.city	
Contact Phone #: (425) 584-7089		Contact Fax #:	

Description of Demolition Project: Demolition of existing house, shed, and detached garage for future development.

Intended future use of site: Commercial Warehouse

Any demolition project over 4000 sq ft is required to go through the SEPA process. SEPA Permit #: _____

Demolition Permit Information

TYPE OF CONSTRUCTION		***COMMERCIAL <input type="checkbox"/>	RESIDENTIAL <input checked="" type="checkbox"/>
ZONING	ML	FIRST FLOOR SQ. FT.	1198
# DWELLING UNITS	1	SECOND FLOOR SQ. FT.	
SEWER YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	SEPTIC YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	DWELLING UNIT VACANT -	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
CITY WATER YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	WATER PURVEYOR:	VALUATION (including dump fees)	\$ 7,000

Disposal of solid and recycled wastes shall be performed in compliance with all applicable regulations.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT.

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.



 SIGNATURE OWNER / AUTHORIZED AGENT

DATE: 07/07/2023

Max Cordell

 PLEASE PRINT NAME

*****COMMERCIAL PROJECTS: Please complete a Plumbing Fixture Worksheet for possible System Development Credit.*****