



City of Puyallup – Fire Prevention Department

Application for Fire Code – Construction Permit

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

Building Permit # _____ (in association to the fire sprinkler/alarm submittal)

Parcel #:	0420215017			Site Address:	402 VALLEY AVE NW, SUITE 101		
Owner Name:	CITC OF WASHINGTON			Phone #:			
Owner Address:	1930 116th AVE NE		City:	BELLEVUE	Zip:	98004	
Contractor Name:	FIRE SYSTEMS WEST		Phone #:	253-833-1248			
Contractor Address:	206 FRONTAGE RD N, #C		City:	PACIFIC	Zip:	98047	
WA License #:	fireswi140B1		Exp. Date:	12/31/23	City Business License #:	1094	
Contact Person:	THERON DAVIS			Contact Email Address:	therond@firesystemswest.com		
Contact Phone #:	253-202-7006			Contact Fax #:			

PROJECT DESCRIPTION (TO INCLUDE TENANT NAME):

ADD & RELOCATE 14 PENDENT SPRINKLERS FOR NEW TENANT WALLS/CEILS.

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	14	NFPA 13
☐ 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		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)

I have submitted a minimum of three sets of plans and calculations/cut sheets

Signature: _____ Date: 8/24/23

Print Signature: THERON DAVIS Email: therond@firesystemswest.com