

# REVISIONS TO EXISTING RESIDENTIAL OR COMMERCIAL APPLICATIONS

THIS APPLICATION MUST BE ACCOMPANIED BY 2 (TWO) SETS OF CONSTRUCTION DRAWINGS AND 3 (THREE) ACCURATE, FULLY DIMENSIONED SITE PLANS (IF APPLICABLE)

PERMIT #: PRCP2023996 PROJECT NAME: Red Dot TI - Carport

SITE ADDRESS: 2504 E. Main Ave

CONTACT PERSON: Todd Thurnau PHONE #: 206-394-3527

CONTACT EMAIL: toddthurnau@reddotcorp.com

DESCRIPTION OF REVISIONS: Incorrect drawing package submitted for size of carport

## NOTE BELOW ANY REVISIONS THAT APPLY TO THE PROJECT:

### Indicate if you are increasing or decreasing square footage:

Building Area (sq. ft.) +/-

1 <sup>st</sup> floor	_____ new _____ remodel	2 <sup>nd</sup> floor	_____ new _____ remodel
Garage	_____ new _____ remodel	Deck	_____ new _____ remodel
Basement	_____ new _____ remodel	Other	<u>2,100</u> new _____ remodel

Revised Project Valuation: \$ \_\_\_\_\_

### Plumbing Changes

Example: **+1 sink** or **-2 water closets**

\_\_\_\_\_ sink/lavatories \_\_\_\_\_ garbage disposal  
\_\_\_\_\_ water closet \_\_\_\_\_ floor drains  
\_\_\_\_\_ tub/shower \_\_\_\_\_ misc \_\_\_\_\_  
\_\_\_\_\_ dishwasher  
\_\_\_\_\_ water heater  
\_\_\_\_\_ lawn sprinkler/backflow

### Mechanical Changes

Example: **1+exhaust fan** or **-1 heat pump**

\_\_\_\_\_ furnace +/-100k \_\_\_\_\_ air-conditioner  
\_\_\_\_\_ gas piping \_\_\_\_\_ duct work  
\_\_\_\_\_ hood \_\_\_\_\_ fireplace  
\_\_\_\_\_ diffusers \_\_\_\_\_ exhaust fans  
\_\_\_\_\_ dryer vent \_\_\_\_\_ boiler  
\_\_\_\_\_ heat pump \_\_\_\_\_ misc \_\_\_\_\_

### If this is a change of contractor, please provide the following:

Contractor \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
License # \_\_\_\_\_ Expiration Date \_\_\_\_\_

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT AND THAT THE CONSTRUCTION ON THE ABOVE DESCRIBED PROPERTY, THE OCCUPANCY, AND USE WILL BE IN ACCORDANCE WITH THE LAWS, RULES, AND REGULATIONS OF THE STATE OF WASHINGTON AND THE CITY OF PUYALLUP MUNICIPAL CODE.

Todd Thurnau

SIGNATURE OWNER / AUTHORIZED AGENT

206-394-3527

PHONE #

DATE: 10 / 05 / 2023

### OFFICE USE ONLY:

( ) Building: staff initials \_\_\_\_\_ Date \_\_\_\_\_ ( ) Plan: staff initials \_\_\_\_\_ Date \_\_\_\_\_  
( ) Eng: staff initials \_\_\_\_\_ Date \_\_\_\_\_ ( ) Fire: staff initials \_\_\_\_\_ Date \_\_\_\_\_  
( ) Traffic: staff initials \_\_\_\_\_ Date \_\_\_\_\_ \*REVISION FEES DUE \_\_\_\_\_