

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 #: PRCTI20230108 **PROJECT NAME:** Walmart Tenant Improvement

SITE ADDRESS: 310 31st Ave SE

CONTACT PERSON: Heather Edmiston, pb2 **PHONE #:** 479-878-3530

CONTACT EMAIL: heather.edmiston@pb2ae.com

DESCRIPTION OF REVISIONS: add BERC clip detail to A1

NOTE BELOW ANY REVISIONS THAT APPLY TO THE PROJECT:

Indicate if you are increasing or decreasing square footage:

Building Area (sq. ft.) +/-

1 st floor	new	remodel	2 nd floor	new	remodel
Garage	new	remodel	Deck	new	remodel
Basement	new	remodel	Other	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.

 479-878-3530 DATE: 10 / 27 / 23
SIGNATURE OWNER / AUTHORIZED AGENT PHONE #

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