

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 #: PRCTI20231574 PROJECT NAME: Science Classroom & Science Prep Room TI at Puyallup High School

SITE ADDRESS: 105 7TH ST SW, PUYALLUP, WA 98371

CONTACT PERSON: Robert Landa PHONE #: (206) 587-3797

CONTACT EMAIL: rlanda@studioms.co

DESCRIPTION OF REVISIONS: Added scope for health dept required Science Classroom 325 purge fan, motorized damper, and emergency 100% ventilation button, see clouded items on revised mechanical drawings.

NOTE BELOW ANY REVISIONS THAT APPLY TO THE PROJECT:

Indicate if you are increasing or decreasing square footage:

Building Area (sq. ft.) +/- No changes to previous submittal

| | |
|---|---|
| 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: \$ _____

| | |
|---|---|
| <p>Plumbing Changes No changes to previous submittal</p> <p>Example: +1 sink or -2 water closets</p> <p>_____ sink/lavatories _____ garbage disposal</p> <p>_____ water closet _____ floor drains</p> <p>_____ tub/shower _____ misc _____</p> <p>_____ dishwasher</p> <p>_____ water heater</p> <p>_____ lawn sprinkler/backflow</p> | <p>Mechanical Changes</p> <p>Example: 1+exhaust fan or -1 heat pump</p> <p>_____ furnace +/-100k _____ air-conditioner</p> <p>_____ gas piping _____ 1 duct work</p> <p>_____ hood _____ fireplace</p> <p>_____ diffusers _____ 1 exhaust fans</p> <p>_____ dryer vent _____ boiler</p> <p>_____ heat pump _____ misc _____</p> |
|---|---|

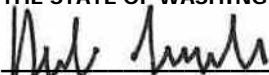
If this is a change of contractor, please provide the following: No changes to current contractor

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.

 (206) 587-3797 DATE: 5 / 30 / 2024

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 _____