



City of Puyallup Application for Building Permit

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

permitcenter@puyallupwa.gov

Parcel No:	Site Address:	
Owner Name:	Tel:	
Owner Address:	City:	Zip:
Contractor Name:	Tel:	
Contractor Address:	City:	Zip:
WA State License:	Exp Date:	City Business License:
Contact Name:	Email:	
Contact Tel:	Fax:	
Lender Name:	Address:	Tel:
Project Description:		
	the applicant must apply for a NPDES Constr DE website <u>www.ecy.wa.gov/programs/wg/storr</u>	ruction stormwater general permit from the Department o <u>mwater/construction</u>
	Building Permit Inform	
COMMERCIAL OR RESIDENTIAL	TYPE OF (CONSTRUCTION

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OCCUPANCY TYPE	FIRST FLOOR SQ. FT.
OCCUPANCY LOAD	SECOND FLOOR SQ. FT.
# OF DWELLING UNITS	BASEMENT SQ. FT.
# OF BEDROOMS	GARAGE SQ. FT.
# OF BATHROOMS	COVERED PORCH SQ. FT.
BUILDING HEIGHT	PATIO SQ. FT.
ZONING	DECK SQ. FT.
LOT SIZE SQ. FT.	HEAT TYPE
LOT COVERAGE: (%)	CHANGE OF USE?
IMPERVIOUS SURFACE SQ. FT.	AIR CONDITIONED?
PROJECT DISTURBED AREA SQ. FT.	FIRE SPRINKLERS?
SEWER OR SEPTIC	LOCATED IN FLOOD PLAIN?
WATER PURVEYOR	VALUATION \$

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.

Heather M. Harrison		
SIGNATURE OWNER / AUTHORIZED AGENT	PRINT NAME	DATE