



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 #:	Site Address:	1515 S. MERIDIAN	
Owner Name:	Phone #:		
Owner Address:	City:	Zip:	
Contractor Name:	Phone #:	360 316-1465	
Contractor Address:	City:	Zip: 98385	
WA License #:	Exp. Date:	City Business License #:	
Contact Person:	Contact Email Address:	FORSB.ELECT@OUTLOOK.COM	
Contact Phone #:	Contact Fax #:	360-316-1465	

PROJECT DESCRIPTION (TO INCLUDE TENANT NAME):

THE APPLICANT HEREBY MAKES APPLICATION FOR THE FOLLOWING FIRE CODE PERMIT

Permit	Description	# of Devices or square footage	Notes/Requirements
<input type="checkbox"/> Fire Sprinkler – New	Installation of a New Automatic Fire Sprinkler System		Total square footage of fire sprinkler required
<input type="checkbox"/> Fire Sprinkler – Tenant Improvement	Tenant Improvement to Existing Fire Sprinkler System		
<input checked="" type="checkbox"/> Fire Alarm System -New	Installation of a New Fire Alarm System	52	Designed to total coverage NFPA72
<input type="checkbox"/> Fire Alarm System - Tenant Improvement	Tenant Improvement to Existing Fire Alarm System		Designed to total coverage NFPA72
<input type="checkbox"/> Hood Suppression	New or modification of existing system		
<input type="checkbox"/> Generator	Backup Generator or Emergency Generator - \$265		
<input type="checkbox"/> 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: 9/20/24

Print Signature: BRET FORSBERG Email: FORSB.ELECT

FORSB
FORSB.ELECT@OUTLOOK
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