Development Services 333 S. Meridian Puyallup, WA 98371 Phone: 253-864-4165 www.cityofpuyallup.org



Water or Sewer Adequacy Application

App	lication	Fees
TOTAL PLONE		

Water

Water Adequacy Verification: \$40

Sewer Adequacy Verification: \$40

Effective Per 4/1/23 City of Puyallup Fee Schedule

A Water or Sewer Adequacy application is required for restaurants needing Tacoma Pierce County Health Department (TPCHD) verification approval

Submittal	Instructions
- CHEST STREET	IIII CI CI CI CI III

Create an account at Portal	https://	permits.p	uyallupwa.	gov/Portal	Account/Register	r or Sig	n into	the	CityView
Portal	**					_			

- Select "Apply for an Engineering Permit"
- From the Choose Application Type drop down list, select "Water or Sewer Adequacy (for FOOD ESTABLISHMENTS)". Fill out all sections of the online form and upload all required documents. Note: Failure to upload all the required documents for Step 7 Upload Files may delay the processing of your application.

Property Info	ormation						
Site Address:	3601 9	ST SW	Puyellup, WA	_ Parcel Number	. 6021	010051	
			98373				
Provide a descr	iption for w	hich the servic	e is sought. This	description shall	be sufficien	itly detailed to enab	le
the City to dete	ermine whe	ther service is	available and to a	address any relate	ed issues, su	uch as those concer	ning
usage, supply lin Food pre	ne location,	connections, m	eter size, supply	volume and pres	sure, fire fl with 1	ow, etc.):	
Bre	· Kfist al	en seating	capacity i	5 64 propla	,	•	
Applicant Inf	formation		ity Devolo				
Mailing Address:	4520	36 14 Ave	٤.				
City: Farso		State	NO	Z	ip Code:	58000 58104	
Phone: 701- 8	350-995	E-mai	I to Receive Mark	up Letter: Rols	on o the	raldsonzo, com	<u> </u>

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Water or Sewer Adequacy

Owner Information	
Name: Heritage Suit	es of Puyallup, LLL
Mailing Address: 4520	6th Ave S.
City: Farso	State: NO Zip Code: 58104
Phone: 701-551-8009	State: NO Zip Code: 58104 E-mail: LKasowski a thandsonco.com
application I. Completed and Signe 2. Site Plan	ensure the following documents are submitted as applicable at the time of Certificate of Water Adequacy Application y Health Department Form
Certification	
	cation and declare under penalty of perjury that the information contained herein is
Signature of Applicant:	Date: 10/9/2024