



CITY OF PUYALLUP
Development & Permitting Services
 333 S. Meridian, Puyallup, WA 98371
 (253) 864-4165
www.cityofpuyallup.org

Permit No:
 PRCTI20241601

COMMERCIAL - TENANT IMPROVEMENT/REMODEL

Puyallup, WA

Job Address	Address: 401 15TH AVE SE, PUYALLUP, WA 98372 Parcel # 981000014	ISSUED November 18, 2024
Owner	MULTICARE HEALTH SYSTEM 14400 METCALF AVE OVERLAND PARK, KS 98415	
Applicant	Sam Krause 18389 S Norman Road Oregon City, OR 97045 (206) 789-3689 skrause@nwceilinglifts.com	
Contractor	M BROWN INDUSTRIES LLC - NW CEILING 18389 S NORMAN RD. OREGON CITY, OR 97045 (971) 645-1919 WA L&I #:	
Description of Work	Removing existing patient lift and installing new support system, rails and patient lift in Room 28 in the Rehab unit	
Permit Types	Commercial - Tenant Improvement/Remodel	
Expiration Date:	May 17, 2025	
Total ESU's		

Building Components:

Quantity	Units	Description
280	SQ FT	Commercial Tenant Improvement/Remodel

Total Value of Work: \$0.00

Standard Conditions:

1. * Final approval by the Building Official is required prior to use or occupancy.* Work shall not proceed until the inspector has approved the stages of construction.* Surface storm water shall be diverted from the building site and shall not drain onto adjacent properties.* I hereby acknowledge that I have read this Permit/Application, that the information given is correct; that I am the owner or the duly authorized agent of the owner; that plans submitted herewith are in compliance with all applicable city, county and state laws and that all construction will proceed in accordance with said laws. This permit shall expire if work is not commenced with 180 days or if the work is suspended for a period of 180 days. Permits expire two years from issuance. * 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. If you are a property owner, contractor or permittee and you are paying for someone to perform the work, they must have a valid contractor registration and the person(s) installing plumbing inside a structure must meet the plumbing certification requirements. If you have any questions regarding these regulations, you may contact the Washington State Department of Labor and Industries or you can find more information on-line at: <http://www.lni.wa.gov/TradesLicensing/Contractors/HireCon/default.asp>

2. 1. INSTALL ADDRESS NUMBERS PER THE FOLLOWING DISTANCES: 0-50 FOOT SETBACK FROM STREET NUMBERS SHALL BE 6 INCHES IN HEIGHT; 51-100 FEET 12 INCHES IN HEIGHT. ALL NUMBERS SHALL CONTRAST WITH THEIR BACKGROUND. ADDITIONAL NUMBERS MAY BE NEEDED AT DRIVEWAY ENTRANCE IF BUILDING NUMBERS ARE NOT VISIBLE FROM THE STREET. REAR DOORS OF SUITES OR UNITS SHALL ALSO BE LABELED WITH MINIMUM 4 INCH NUMBERS.
2. FIRE HYDRANTS REQUIRED FOR CONSTRUCTION AND FIRE DEPARTMENT ACCESS SHALL BE INSTALLED AND APPROVED BY THE FIRE CODE OFFICIAL PRIOR TO THE STORAGE OR INSTALLATION OF ANY COMBUSTIBLE FRAMING MATERIAL. ACCESS ROADWAY SURFACES SHALL BE DESIGNED TO CITY STANDARDS AND BE DESIGNED TO MAINTAIN THE IMPOSED LOADS OF A 80,000 POUND FIRE APPARATUS. ASPHALT TREATED BASE, ASPHALT OR CONCRETE PAVEMENT CAN BE USED TO PROVIDE THE REQUIRED ALL-WEATHER DRIVING SURFACE.
3. ANY REQUIRED FIRE LANE MARKINGS SHALL BE INSTALLED PRIOR TO FINAL INSPECTION AND PER CITY ORDINANCE.
4. KNOX BOXES, WHEN REQUIRED, SHALL BE INSTALLED USUALLY TO THE RIGHT OF THE MAIN FRONT DOOR AND NO HIGHER THAN 6 FEET OFF OF THE GROUND. ONLY HINGED KNOX BOXES SHALL BE USED. KNOX BOXES AND KEY SWITCHES CAN BE ORDERED ONLINE AT THE "KNOX COMPANY"
5. FIRE EXTINGUISHERS WILL BE REQUIRED PER CHAPTER 9 OF THE INTERNATIONAL FIRE CODE. GENERALLY, 1 FIRE EXTINGUISHER WITH A MINIMUM RATING OF 2A 10BC SHALL BE INSTALLED PER EVERY 3,000 SQUARE FEET OF FLOOR AREA. THE LOCATION OF THE FIRE EXTINGUISHERS SHALL BE NEAR THE EXIT DOORS AND TRAVEL DISTANCE TO AN EXTINGUISHER SHALL NOT EXCEED 75 FEET. ADDITIONAL SIGNAGE MAY BE NECESSARY TO INDICATE THE FIRE EXTINGUISHER LOCATION.

Permit is valid 180 days from date of issuance. Permit validity is subject to all adhering to all applicable codes, ordinances and standards, and conditions of this permit.

I certify that I am the owner of this property or the owner's authorized agent, including an appropriately licensed contractor. I have read and examined this application and furnished true and correct information. I will comply with all provisions of law and ordinances governing this type of construction work, whether specific herein or not. By submitting this application, I give the jurisdiction permission to enter the property to perform inspections. The granting of this permit does not presume or give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. I understand that failure to comply with the above may result in revocation of the permit.

Applicant:
Sam Krause