



CITY OF PUYALLUP

Development & Permitting Services

333 S. Meridian, Puyallup, WA 98371

(253) 864-4165

www.cityofpuyallup.org

RECEIPT OF PAYMENT

Receipt Number:	2025000274
Receipt Date:	February 10, 2025
Date Paid:	February 10, 2025
Full Amount:	\$1,421.81

Payment Details:	Payment Method	Amount Tendered	Check Number
	Check	\$1,421.81	124841
Amount Tendered:	\$1,421.81		
Change / Overage:	\$0.00		
Contact:	C/O MULTICARE HEALTH SYSTEM, Address: PO BOX 5299, Phone: (253) 377-5318		

FEE DETAILS

Fee Description	Reference Number	Amount Owing	Amount Paid
Building Plan Review Fee	PRCTI20250145	\$1,373.94	\$1,373.94
Mechanical Plan Review Fee	PRCTI20250145	\$47.87	\$47.87