

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

www.cityofpuyallup.org

Permit No: PRSG20250282

## SIGN/AWNING

Puyallup, WA

Job Address	Address: 3500 S MERIDIAN, Unit: 503, PUYALLUP, WA 98373 Parcel # 6021010051	ISSUED March 24, 2025				
Owner CAFARO NORTHWEST PARTNERSHIP PO BOX 586 ANNANDALE, NJ 08801						
<b>Applicant</b> SPENCER, SHAWN N	1 7808 River Rd East Puyallup, WA 98371 ussignllc@gmail.com					
Contractor SPENCFAB 23425 53RD AVE SE BOTHELL, WA 98021 WA L&I #:						
Description of Work						
(1) WALL SIGN ~ XFINITY ; STE 503						
Permit Types	Sign/Awning					
Expiration Date: September 20, 2025						
Total ESU's						
REQUESTING REQU	IRED INSPECTIONS					
expand My Building permit type. Then lo	pections can be found on the permitting portal. Log in to your portal a Permit application, My Engineering Permit application, or My Fire Perm cate your permit number and click on "request inspection". This will pupermit. Click on the desired inspection type and then click Next Step to	it application depending on your ull up a list of inspection types				

Quantity	Units	Description		
18.19	SQ FT	Wall Sign		
			Total Value of Work:	\$0.00

## **Standard Conditions:**

**Building Components:** 

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

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.

## Conditions

The items listed in the table below are outstanding conditions that need to be resolved prior to occupany and/or final inspection.

Condition	Condition	Department	Condition
Category			Status

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:** SPENCER, SHAWN M