

## **City of Puyallup – Fire Prevention Department Application for Fire Code – Construction Permit**

333 S. Meridian Puyallup, WA 98371

Tel: (253) 864-4182 (in association to the fire sprinkler/alarm submittal)

Parcel #: 9810000014	Site Address: 401 15th Ave SE		
Owner Name: Multicare Health System	Phone #:		
Owner Address: PO Box 4299	City: Tacoma Zip: 98415		
Contractor Name: Patriot Fire Protection	Phone #: 253-926-2290		
Contractor Address: 2707 70th Ave E	City: Tacoma Zip: 98424		
WA License #: PATRIFP099CF	Exp. Date: 10/5/25 City Business License #:00910109		
Contact Person: Matt Greene	Contact Email Address: mattg@patriotfire.com		
Contact Phone #: 253-377-2272	Contact Fax #:		

## PROJECT DESCRIPTION (TO INCLUDE TENANT NAME):

Building Permit #\_\_\_\_\_

Relocate sprinkler ceiling rail obstruction

THE APPLICANT HEREBY MAKES APPLICATION FOR THE FOLLOWING FIRE CODE PERMIT						
Permit	Description	# of Devices or square footage	Notes/Requirements			
☐ Fire Sprinkler – New	Installation of a New Automatic Fire Sprinkler System		Total square footage of fire sprinkler required			
<ul><li>☑ Fire Sprinkler –</li><li>Tenant Improvement</li></ul>	Tenant Improvement to Existing Fire Sprinkler System	1	NFPA #13, 2019 Ed. Light Hazard			
☐ Fire Alarm System -New	Installation of a New Fire Alarm System		Designed to total coverage NFPA72			
☐ Fire Alarm System - Tenant Improvement	Tenant Improvement to Existing Fire Alarm System		Designed to total coverage NFPA72			
☐ Hood Suppression	New or modification of existing system					
☐ Generator	Backup Generator or Emergency Generator - \$265					
☐ OTHER						
***Selection Below Must Be Completed By Applicant ~ Please Check One***						
U.L. Certification/Third Party Acknowledgement						
<b>IX</b> NICET Level of Fire Alarm Designer Acknowledgment						
***I have submitted a minimum of three sets of plans and calculations/cut sheets***						
Signature: Naddlague		Date:	6/4/25			
Print Signature: Matt Greene		Email:	mattg@patriotfire.com			