

## CITY OF PUYALLUP

## **Development & Permitting Services**

333 S. Meridian, Puyallup, WA 98371 (253) 864-4165

www.cityofpuyallup.org

## RECEIPT OF PAYMENT

Receipt Number: 2025001077
Receipt Date: June 05, 2025
Date Paid: June 05, 2025

**Full Amount:** \$890.47

Payment Details: Payment Method Amount Tendered Check Number

Check \$890.47 0000134643

Amount Tendered: \$890.47 Change / Overage: \$0.00

Contact: MULTICARE HEALTH SYS, Address: PO BOX 5299

## FEE DETAILS

Fee DescriptionReference NumberAmount OwingAmount PaidBuilding Plan Review FeePRCTI20250558\$846.14\$846.14Mechanical Plan ReviewPRCTI20250558\$44.33\$44.33Fee