



City of Puyallup – Fire Prevention Department

Application for Fire Code – Construction Permit

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

Building Permit # PRMU2024-0406 (in association to the fire sprinkler/alarm submittal)

Parcel #: 0420264021	Site Address: 2902 E Pioneer Way
Owner Name: East Town Crossing	Phone #: 253-241-7394
Owner Address: 1001 Shaw Rd	City: Puyallup Zip: 98372
Contractor Name: Max Power Electric	Phone #: 253-838-4400
Contractor Address: 5009 Pacific Highway E. Ste 13	City: Fife Zip: 98424
WA License #: MAXPOPE815M9	Exp. Date: 8/7/2027 City Business License #:
Contact Person: Amy Henderson	Contact Email Address: Amy@MaxPowerNW.com
Contact Phone #: 253-334-9820	Contact Fax #:

PROJECT DESCRIPTION (TO INCLUDE TENANT NAME):

Building F @ East Town Crossing - Fire Alarm System for new residential - multi unit.

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
☐ Fire Sprinkler – Tenant Improvement	Tenant Improvement to Existing Fire Sprinkler System		
☒ Fire Alarm System -New	Installation of a New Fire Alarm System	25,739 sq ft	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 Acknowledge BOTH REQUIRED** ***

- ☒ U.L. Certification/Third Party Acknowledgement (check box for acknowledgment)
- ☒ NICET Level of Fire Alarm Designer Acknowledgment (check box for acknowledgment)

I have submitted a minimum of three sets of plans and calculations/cut sheets

Signature: _____ Date: 7/10/2025

Print Signature: Amy Henderson Email: Amy@maxpowernw.com