



City of Puyallup Application for Demolition Permit

**Submit all documents electronically to:
permitcenter@puyallupwa.gov**

Building Division
333 S. Meridian
Puyallup, WA 98371
Tel: (253) 864-4165 Fax: (253) 840-6678

Parcel #: 0420201045		Site Address: 4917 FREEMAN RD E	
Owner: CRP/VDC Freeman Logistics Owner, LLC Phone #: (425) 968-5115 Owner Email: TLitz@VectorREcorp			
Owner Address: 11411 NE 124th St #190		City: Kirkland	Zip: 98034
Contractor Name: Rivers Edge Environmental Service, Inc.		Phone #: 425-584-7089	
Contractor Address: 17115 SE 270th Place Ste 106		City: Covington	Zip: 98042
WA License #: RIVEREE855DT	Exp. Date: 03/30/2022	City Business License #: 603 483 511	
Contact Name: Clayton Mullendore		Contact Email: cmullendore@rivers.city	
Contact Phone #: (425) 584-7089		Contact Fax #:	

Description of Demolition Project: Demolition of existing residential house and detached garage for future development.

Intended future use of site: Commercial warehouse

Any demolition project over 4000 sq ft is required to go through the SEPA process. SEPA Permit #: _____


Demolition Permit Information

TYPE OF CONSTRUCTION		***COMMERCIAL <input type="checkbox"/>	RESIDENTIAL <input checked="" type="checkbox"/>
ZONING	ML	FIRST FLOOR SQ. FT.	2150 + 648
# DWELLING UNITS	1	SECOND FLOOR SQ. FT.	
SEWER YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	SEPTIC YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	DWELLING UNIT VACANT -	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
CITY WATER YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	WATER PURVEYOR:	VALUATION (including dump fees)	\$ 7,000

Disposal of solid and recycled wastes shall be performed in compliance with all applicable regulations.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT.

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.



SIGNATURE OWNER / AUTHORIZED AGENT

DATE: 12/14/21

Tyler Litzenberger

PLEASE PRINT NAME

*****COMMERCIAL PROJECTS: Please complete a Plumbing Fixture Worksheet for possible System Development Credit. *****