

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 #: 0420205003	Site A	Address: 5123 FREEMAN RD E	
Owner: CRP/VDC Freeman Lo	ogistics Owner, LLC Phone	e #: (425) 968-5115 Owner Ema	ail: TLitz@VectorREcor
Owner Address: 11411 NE 124th St #190		City: Kirkland	Zip: 98034
Contractor Name: Rivers Ed	dge Environmental S	ervice, Inc. Phone #: 42	5-584-7089
Contractor Address: 17115	SE 270th Place Ste	e 106 City: Covington	Zip: 98042
WA License #: RIVEREE8	55DT Exp. I	Date: 03/30/202 City Business 603	3 483 511
Contact Name: Clayton Mullendore Contact Email: cmullendore@rivers.city			
Contact Phone #: (425) 5		act Fax #:	
		of existing residential house fo	or future development.
Intended future use of sit	te: Commercial warel	nouse	
Any demolition project over 4	1000 sq ft is required to g	o through the SEPA process. SEPA P	Permit #:
	Demolition H	Permit Information	
TYPE OF CONSTRUCTION		***COMMERCIAL	RESIDENTIAL 🗸
ZONING	ML	FIRST FLOOR SQ. FT.	504
# DWELLING UNITS	1	SECOND FLOOR SQ. FT.	
SEWER YES NO	SEPTIC YES NO	DWELLING UNIT VACANT -	YES V NO
CITY WATER YES NO	WATER PURVEYOR:	VALUATION (including dump fees)	\$ 7,000
Disposal of solid and rec regulations.	cycled wastes shall b	e performed in compliance wi	ith all applicable
		IIS APPLICATION AND KNOW THE SAME G THIS TYPE OF WORK WILL BE COMPLI	
OR SUBCONTRACTORS) WILL THAT IF I DO CHOOSE TO HIR THAT ARE LICENSED BY THE S	NOT BE HIRED TO PERFORM E A CONTRACTOR (GENERAL	BLANK, I HEREBY CERTIFY FURTHER THA M ANY WORK IN ASSOCIATION WITH TH L OR SUBCONTRACTOR) I WILL ONLY HI	IS PERMIT. I ALSO CERTIFY
SIGNATURE OWN	ER / AUTHORIZED AGEN	T DATE:	10/1/1
Tyler Litzenberger			
PLEASE I	PRINT NAME		

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