

City of Puyallup Application for Building Permit

B-21-0700

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

REV 2/20

permitcenter@ci.puyallup.wa.us

Parcel No: 9810000014	Site Address: 401 1	5TH AVE SE
Owner Name: MULTICARE HEALTH SYSTEM	Tel:	
Owner Address: PO BOX 5299	City: TACOMA	Zip: ₉₈₄₁₅
Contractor Name: MACDONALD MILLER FACILITY	Y SOLUTIONS Tel: 20	06-867-4133
Contractor Address: 7717 DETROIT AVE SW	City: SEATTLE	Zip: 98106
WA State License: MACDOFS808OS	Exp Date: 8/27/2022	City Business License: 2003193
Contact Name: AMANDA MOORE	Email: permits@ma	acmiller.com
Contact Tel: 206-867-4133	Fax:	
Lender Name:	Address:	Tel:

Project Description: SEE ADDED PAGE 3

If the project disturbs one acre or more, the applicant must apply for a NPDES Construction stormwater general permit from the Department of Ecology. For additional information visit DOE website www.ecy.wa.gov/programs/wg/stormwater/construction

Building Permit Information

COMMERCIAL OR RESIDENTIAL	 TYPE OF CONSTRUCTION	
OCCUPANCY TYPE	FIRST FLOOR SQ. FT.	
OCCUPANCY LOAD	SECOND FLOOR SQ. FT.	
# OF DWELLING UNITS	BASEMENT SQ. FT.	
# OF BEDROOMS	GARAGE SQ. FT.	
# OF BATHROOMS	COVERED PORCH SQ. FT.	
BUILDING HEIGHT	PATIO SQ. FT.	
ZONING	DECK SQ. FT.	
LOT SIZE SQ. FT.	HEAT TYPE	
LOT COVERAGE: (%)	CHANGE OF USE?	
IMPERVIOUS SURFACE SQ. FT.	AIR CONDITIONED?	
PROJECT DISTURBED AREA SQ. FT.	FIRE SPRINKLERS?	
SEWER OR SEPTIC	LOCATED IN FLOOD PLAIN?	
WATER PURVEYOR	VALUATION	\$ 450,000.00

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	PRINT NAME	DATE
	AMANDA MOORE	9/10/2021

MECHANICAL

Quantity Scheduled	Description	Permit Rate Per Unit	Total Price
1	Permit Issuance	40.00	40.00
	Supplemental Permit	9.60	
	AC Unit – Stand Alone	19.55	
	Install Furnace / Burner up to 100,000 BTU	19.55	
	Install Furnace / Burner over 100,000 BTU	24.00	
	Install / Relocate Floor Furnace & Vent	19.55	
	Install / Relocate Recessed Wall Space Heater	19.55	
	Appliance Vent – Separate	9.60	
	Repair Heating / Cooling Unit	18.11	
	Heat Pump/Boiler / Compress. 3 HP; up to 6 Tons; 100,000	19.55	
	Heat Pump/Boiler / Compress. 3-15 HP or 500,000 BTU	35.95	
	Heat Pump/Boiler / Compress 15-30 HP or 1,000,000 BTU	49.28	
	Heat Pump/Boiler / Compress 30-50 HP or 1,750,000 BTU	73.30	
	Heat Pump/Boiler / Compress over 50 HP or over 1,750,000	122.48	
	Separate Air Handling Unit to 10,000 CFM	14.10	
1	Separate Air Handling Unit over 10,000 CFM	23.92	23.92
	Stationary Evaporative Cooler	14.10	
	Exhaust Vent Fan with Single Duct (Bath Fan)	14.10	
	Vent System Apart from Heating or AC	14.10	
	Mechanical Exhaust Hood / Duct (Range Hood) - Residential	14.10	
	Mechanical Exhaust Hood w/Make-up Air - Commercial	35.95	
	Commercial / Industrial Incinerator	24.00	
	Gas Piping: (1 - 4 outlets)	6.30 1.30	
	(5 or more outlets / per outlet)	1.30	
6	Unclassified Appliance or Equipment (Fireplace, etc.)	14.10	84.60
	Mechanical Duct Work: (1 – 5 Diffusers)	14.10	
	(6 – 10 Diffusers)	19.55	
	(11 or more Diffusers)	24.00	
		TOTAL:	148.52

SCOPE OF WORK: DEMO AND REMOVE EXISTING AIR HANDLING UNIT WITH SINGLE SUPPLY FAN. INSTALL ONE NEW AIR HANDLING UNIT WITH 35,000 CFM OF SUPPLY AIR WITH HEAT RECOVERY COILS, REHEAT COILS AND CHILLED WATER COILS. THE NEW AIR HANDLING UNIT HAS A FAN MATRIX CONFIGURATION WITH ONE VFD PER FAN. DEMO EXISTING HEATING, PREHEAT AND CHILLED WATER PUMPS. PROVIDE NEW HEATING, PREHEAT AND CHILLED WATER INLINE PUMPS WITH VFD AND CONNECT TO EXISTING MAIN SYSTEMS LOCATED IN PENTHOUSE MECHANICAL ROOM. INSULATE ALL NEW PIPING AND ASSOCIATED EQUIPMENT AND REPAIR ANY INSULATION CUT BACK OR DAMAGED DURING DEMO.

PLUMBING

Quantity Scheduled	Description	Rate Per Unit	Total	Quantity Scheduled	Description	Rate Per Unit	Total
1	Permit Issuance	40.00	40.00		GREASE TRAP/INTERC	EPTOR	
R	ESIDENTIAL (1 & 2 DW	ELLINGS)		Grease Trap	13.00	
	1 Bathroom	160.00			Grease Interceptor	13.00	
	2 Bathroom	200.00			BACK FLOW DEVI	CE	
	3 Bathroom	240.00			Per Unit	26.00	
	Alterations each fixture	13.00			MEDICAL GAS SYST	EM	
	Water Heater	13.00			Medical Gas Piping System	80.00	
	***COMMERCIAL	***			Surgical Vacuum System	80.00	
	New Const. each fixture	13.00			Gas Piping: (1 - 4 outlets) (5 or more outlets/per outlet)	8.50 2.00	
	Alterations each fixture	13.00			Dental Chair or Unit	40.25	
	Drinking Fountain, Water Cooler, Ice Machine	40.25			OTHER (NOT LIST	ED)	
	Sump,Sewage Ejector Pump	13.00					
	Garbage Disposal	13.00					
	Water Heater	13.00					
	SUB	-TOTAL:			SUB-	TOTAL:	
					TOTAL:		

***COMMERCIAL PROJECTS: Please complete "System Development Calculation Sheet" ***

A water availability/approval letter shall be submitted with this application for any property located outside the city's water service area.

Fruitland Mutual Water Co. - (253) 848-5519 / Valley Water Co. - (253) 841-9698 / Tacoma Water Co. - (253) 502-8600

Plan Submittal Checklist for Single Family Residence

	2 (two) copies of a site plan, drawn to scale on 81/2" x 11". Details to include setbacks, easements, other structures & features,
_	adjacent right-of-way, drive access, septic and/or utility lines, and contours of slopes over 15% grade at 2-foot intervals.
Ц	2 (two) sets of plans (<u>Engineer or Architect Stamped</u> on all sheets)
	Foundation Plan: footing size, wall height, section & reinforcing. Provide design calculations for basement walls that are not supported by concrete cross walls spaced per table 404.1b.
	☐ Floor plan with room use identified ☐ Floor framing plan for each floor (post & beam or joist w/ size & spacing) ☐ Ceiling/roof
	framing plan or truss layout w/ reactions from truss manufacturer Truss layout with hanger and reactions for girder/carrier
	trusses Truss drawings for TJI's or BCI's Truss specifications packet Engineer Stamped
	Window & door sizes, header sizes, U-values
	Complete building sections - special sections (show floor, wall & ceiling height, insulation R-value of floors, walls & ceilings. Show sections through stairs - headroom)
	☐ Constructions details (i.e. structural members, insulation, sheathing, siding, roofing, bracing, dimensions, etc.)
	Exterior porches & decks (resistance to decay including support footings)
	☐ Special equipment (fireplace, woodstove, hydro-massage tub, etc.)
	Location of all smoke detectors
_	Handrail/guardrail details for stairs, landings, decks
	Energy Worksheets: http://www.energy.wsu.edu/BuildingEfficiency/EnergyCode.aspx
_	2 (two) sets Engineering plans/calculations for special conditions – <u>Engineer stamped</u> Basement & retaining walls 4 feet and higher Beams supporting combined roof & floor loads Beams supporting other
	beams or girder trusses \square Shear walls when bracing not provided as required.
	If less than 2,000 square feet of new + replaced hard surface: submit a temporary sediment and erosion control plan per the 2014
П	update to the 2012 Stormwater Management Manual for Western Washington
	If greater than 2,000 square feet of new + replaced hard surface: submit a Stormwater site plan, report and temporary sediment and erosion control plan and report that satisfy the 2014 update to the 2012 Stormwater Management Manual for Western
	Washington and City standards
	Plan Review Fee
	Tidit Neview Tee
	TIGHT NEVIEW TEE
	TIGHT NEVIEW FEE
	Plan Submittal Checklist for Commercial Projects
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