



# City of Puyallup – Fire Prevention Department

## Application for Fire Code – Construction Permit

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

**Building Permit #** (in association to the fire sprinkler/alarm submittal)

Parcel #: 0419023002	Site Address: 3213 WILDWOOD PARK DR
Owner Name: PUYALLUP SCH DIST #3	Phone #: 253-841-1301
Owner Address: PO BOX 370	City: PUYALLUP Zip: 98371-0156
Contractor Name: STRUCTURED COMMUNICATIONS	Phone #: 425-321-5343
Contractor Address: PO BOX 1368	City: SNOHOMISH Zip: 98291
WA License #: 603-007-169	Exp. Date: 04/30/22 City Business License #: 603-007-169
Contact Person: BILL BLAIS	Contact Email Address: WBLAIS@GOSTRUCTURED.COM
Contact Phone #: 206-665-0333	Contact Fax #: 425-321-5735

### PROJECT DESCRIPTION (TO INCLUDE TENANT NAME):

EQUIPMENT PROCUREMENT, DESIGN, AND INSTALLATION OF EMERGENCY RESPONDER RADIO COMMUNICATION SYSTEM FOR FERRUCCI JUNIOR HIGH. SYSTEM WILL PROVIDE 1ST RESPONDER RADIO COMMUNICATION TO MEET IFC.

### THE APPLICANT HEREBY MAKES APPLICATION FOR THE FOLLOWING FIRE CODE PERMIT

Permit	Description	# of Devices or square footage	Notes/Requirements
<input type="checkbox"/> Fire Sprinkler – New	Installation of a New Automatic Fire Sprinkler System		Total square footage of fire sprinkler required
<input type="checkbox"/> Fire Sprinkler – Tenant Improvement	Tenant Improvement to Existing Fire Sprinkler System		
<input type="checkbox"/> Fire Alarm System -New	Installation of a New Fire Alarm System		Designed to total coverage NFPA72
<input type="checkbox"/> Fire Alarm System - Tenant Improvement	Tenant Improvement to Existing Fire Alarm System		Designed to total coverage NFPA72
<input type="checkbox"/> Hood Suppression	New or modification of existing system		
<input type="checkbox"/> Generator	Backup Generator or Emergency Generator - \$265		
<input checked="" type="checkbox"/> OTHER	EMERGENCY REPONDER RADIO COMMUNICATION SYSTEM	99,888SF	TOTAL SQ OF SCHOOL TO BE COVERED

\*\*\*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:

12-14-2021

Print Signature:

WILLIAM (BILL) BLAIS

Email:

WBLAIS@GOSTRUCTURED.COM