



City of Puyallup – Fire Prevention Department

Application for Fire Code – Construction Permit

333 S. Meridian
Puyallup, WA 98371
Tel: (253) 864-4182

Building Permit # B-19-0402 (in association to the fire sprinkler/alarm submittal)

Parcel #:	9810000014	Site Address:	401 15th Ave SE	
Owner Name:	Multicare Health System	Phone #:		
Owner Address:	PO BOX 5299 MS 737-F-FSAD	City:	Tacoma, WA	Zip: 98415
Contractor Name:	Johnson Controls Fire Protection	Phone #:	206-291-1400	
Contractor Address:	9520 10th Ave S. Suite 100	City:	Seattle, WA	Zip: 98108
WA License #:	JOHNSCP831PR	Exp. Date:	10/06/2022	City Business License #: 2002191
Contact Person:	Janet Stebbins/Permits	Contact Email Address:	janet.stebbins@jci.com	
Contact Phone #:	206-777-4828	Contact Fax #:	206-291-1500	

PROJECT DESCRIPTION (TO INCLUDE TENANT NAME): Modify existing fire alarm system, Good Sam Hospital, Level 1, Forest Pavillion. Joint venture between Johnson Controls Fire Protection and Precision Electric.

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 checked="" type="checkbox"/> Fire Alarm System - Tenant Improvement	Tenant Improvement to Existing Fire Alarm System	57 devices 13786 s.f.	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 type="checkbox"/> OTHER			

Selection Below Must Be Completed By Applicant ~ Please Check One

- U.L. Certification/Third Party Acknowledgement
- NICET Level of Fire Alarm Designer Acknowledgment Chad McCammon, NICET IV, 090810

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

Signature:		Date:	01/18/2022
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Print Signature:	Janet Stebbins for JCFP	Email:	janet.stebbins@jci.com
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