

REVISIONS TO EXISTING RESIDENTIAL OR COMMERCIAL APPLICATIONS

THIS APPLICATION MUST BE ACCOMPANIED BY 2 (TWO) SETS OF CONSTRUCTION DRAWINGS AND 3 (THREE) ACCURATE, FULLY DIMENSIONED SITE PLANS (IF APPLICABLE)

PERMIT #: PRSG20220511 **PROJECT NAME:** Tandoori Grill

SITE ADDRESS: 4423 meridian Ave ste A721

CONTACT PERSON: Tracey Vogel **PHONE #:** 253 209-6517

CONTACT EMAIL: tdash101@gmail.com

DESCRIPTION OF REVISIONS: no revisions, reviewer comments

NOTE BELOW ANY REVISIONS THAT APPLY TO THE PROJECT:

Indicate if you are increasing or decreasing square footage:
 Building Area (sq. ft.) +/-
 1st floor _____ new _____ remodel 2nd floor _____ new _____ remodel
 Garage _____ new _____ remodel Deck _____ new _____ remodel
 Basement _____ new _____ remodel Other _____ new _____ remodel

Revised Project Valuation: \$ _____

<p>Plumbing Changes Example: +1 sink or -2 water closets _____ sink/lavatories _____ garbage disposal _____ water closet _____ floor drains _____ tub/shower _____ misc _____ _____ dishwasher _____ water heater _____ lawn sprinkler/backflow</p>	<p>Mechanical Changes Example: 1+exhaust fan or -1 heat pump _____ furnace+/-100k _____ air-conditioner _____ gas piping _____ duct work _____ hood _____ fireplace _____ diffusers _____ exhaust fans _____ dryer vent _____ boiler _____ heat pump _____ misc _____</p>
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If this is a change of contractor, please provide the following:
 Contractor _____ Phone _____
 Address _____ City _____ State _____ Zip _____
 License # _____ Expiration Date _____

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT AND THAT THE CONSTRUCTION ON THE ABOVE DESCRIBED PROPERTY, THE OCCUPANCY, AND USE WILL BE IN ACCORDANCE WITH THE LAWS, RULES, AND REGULATIONS OF THE STATE OF WASHINGTON AND THE CITY OF PUYALLUP MUNICIPAL CODE.

Tracey Vogel 253-2096517 DATE: 4/11/22
 SIGNATURE OWNER / AUTHORIZED AGENT PHONE #

OFFICE USE ONLY:

() Building: staff initials _____ Date _____ () Plan: staff initials _____ Date _____
 () Eng: staff initials _____ Date _____ () Fire: staff initials _____ Date _____
 () Traffic: staff initials _____ Date _____ *REVISION FEES DUE _____



City of Puyallup
Building Division
333 S. Meridian, Puyallup, WA 98371
(253) 864-4165
www.cityofpuyallup.org

Comment Notice

Permit Application # PRSG20220511

The City has completed the review of the above-mentioned permit submittal. Below please find the permit submittal review comments from your review team. Should you have any questions regarding the review comments, please contact the plan reviewer associated with the comment listed below.

Building Review (Reviewed By: David Leahy, (253)435-3618, DLeahy@PuyallupWA.gov)

- ◆ Some of the plan details are very hard to read and you show two different types of anchors but not sure which one goes to which sign. Need to be very specific. Also plans need to be a min. of 11 X 17 when resubmitting. Page 2 of set. **2 new very specific 11x 17 sign detail sheets added, one for each sign type**

Planning Review (Reviewed By: Nabila Comstock, (253)770-3361, NComstock@PuyallupWA.gov)

- ◆ Please clarify the dimensions of the sign on the site plan. Use arrows to clearly label the height of the sign as well as the total height of the signs (15.3" vs. 23.3"). [plan set, pg. 1] **Nabila told me on the phone to just re-submit that everything was right on the first submittal. She did not need any corrections after all.**
- ◆ NO COMMENTS AVAILABLE
- ◆ -----24'-----

To resubmit, you must address all comments and complete the [resubmittal form](#). When you are ready to resubmit, you can do so using the customer portal, by uploading a "new version" of the submittal requirement. In addition, you will need to pay your resubmittal fee at the time of resubmittal. Your resubmittal will not be processed until the fee has been paid. Please note, partial resubmittals will be deemed incomplete and returned.

If you need assistance with resubmitting your corrections, please contact the Permit Center.

Sincerely,

City of Puyallup Permit Center

(253) 864-4165 option 1

permitcenter@puyallupwa.gov