



City of Puyallup

Engineering Services

333 S Meridian Puyallup WA 98371

Tel (253) 841-5577 Fax (253) 840-6678

www.cityofpuyallup.org

Certificate of Water or Sanitary Sewer Availability Application

Applicant Information

Name: Azure Green Consultants		
Mailing address: 409 E Pioneer	Puyallup	WA 98372
Telephone number: 253.770.3144	Alternate number:	
E-mail address: tammy@mailagc.com		

Owner Information

(If applicant is not the property owner)

Name: Taco Time Northwest		
Mailing address: 3401 Lind Ave SW	Renton	WA 98057
Telephone number: 425.226.6656	Alternate number: 206.499.1360	
E-mail address: rtonkin@tacotimenw.com		

Property Information

(Property for which the applicant seeks water or sanitary sewer availability)

Address: 1115 E Main Street	Puyallup	WA
Assessor's tax parcel number: 7845100032		
Submit an 8.5 x 11 site plan showing existing and proposed new construction (if applicable)		

Please check: Residential Commercial

Type of request:

Fees:

- | | |
|---|-------|
| <input checked="" type="checkbox"/> Water availability | \$40 |
| <input type="checkbox"/> Building Permit | |
| <input type="checkbox"/> Septic System Approval | |
| <input checked="" type="checkbox"/> Sanitary sewer availability | \$40 |
| <input type="checkbox"/> Hydraulic Modeling | \$400 |
| <input type="checkbox"/> TPCHD water adequacy verification | \$40 |
| <input type="checkbox"/> TPCHD sewer/septic verification | \$40 |

I declare, under penalty of perjury, of the laws of the State of Washington, that the foregoing is true and correct.

Signature: _____ Date: _____



CERTIFICATE OF WATER AVAILABILITY

City to Add
Application Number

PART A TO BE COMPLETED BY APPLICANT

PROJECT ADDRESS WA

SUBDIVISION/PROJECT NAME PARCEL

Proposed water usage (# connections)

Customer Type Rural residential Residential Multi-family Commercial Industrial

I, the undersigned, or my appointed representative have requested the following purveyor to certify willingness and ability to provide the indicated service. I have read and understand the information provided by the water purveyor on this Certificate, and acknowledge that the proposed project may require improvements to the water system which would incur my financial obligation. Prior to final approval for construction of the water facilities, it is understood that a legal contract between myself and the water utility which specifies the terms of water service, operational responsibility, and financial obligation may be required.

PRINT NAME SIGNATURE

ADDRESS CITY ST ZIP

(Please ensure that the above is completed PRIOR to submittal to the Water Purveyor.

PART B TO BE COMPLETED BY WATER PURVEYOR

Water system to provide service State ID #

The proposed development is is not within our approved service area.

This water utility will will not be providing service.

Approved number of connections Existing source capacity

Number of current/existing users Existing storage

Water service will be provided by:

- Direct connection to approved, existing water main.
- Extension of existing water main(s).
- New water system in accordance with WAC 246-290 and Pierce County Ordinances 86-117S3 and 92-99

Are water system facilities approved according to DOH requirements?

Water service will be made available to this project by (date).

*****NOTE: Completion of page 2 and water purveyor signature are required. *****