

City of Puyallup Application for Building Permit

PRMU20220123

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

permitcenter@ci.puyallup.wa.us

Parcel No: 7600200051	Site Address: 000	2nd Street NE
Owner Name: 2nd Street LLC	Tel:	
Owner Address: P.O. Box 64160	^{City:} Tacoma	^{Zip:} 98464
Contractor Name:	Tel:	
Contractor Address:	City:	Zip:
WA State License:	Exp Date:	City Business License:
Contact Name:	Email:	
Contact Tel:	Fax:	
Lender Name:	Address:	Tel:

Project Description: Twenty-nine units of multi-family on three floors above a parking garage

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

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COMMERCIAL OR RESIDENTIAL	Commercial	TYPE OF CONSTRUCTION	1-B, V-N
OCCUPANCY TYPE	R-2, S-2	FIRST FLOOR SQ. FT.	9,020
OCCUPANCY LOAD	165	SECOND FLOOR SQ. FT. THIRD FLOOR	9,033 & 9,033
# OF DWELLING UNITS	29	BASEMENT SQ. FT.	7,576
# OF BEDROOMS	40	GARAGE SQ. FT.	same as basement
# OF BATHROOMS	40	COVERED PORCH SQ. FT.	44
BUILDING HEIGHT	35.5'	PATIO SQ. FT.	725
ZONING	CBD	DECK SQ. FT.	1,740
LOT SIZE SQ. FT.	33,600	HEAT TYPE	ELECTRIC
LOT COVERAGE: (%)	75%	CHANGE OF USE?	N
IMPERVIOUS SURFACE SQ. FT.	22,630	AIR CONDITIONED?	N
PROJECT DISTURBED AREA SQ. FT.	30,774	FIRE SPRINKLERS?	Υ
SEWER OR SEPTIC	SEWER	LOCATED IN FLOOD PLAIN?	N
WATER PURVEYOR	PUYALLUP	VALUATION	\$ 5,900,000.00

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

Ponold Habr-PRINT NAME 12/23/21

DATE



City of Puyallup Application for Mechanical Permit

PRMU20220123

Building Division 333 S. Meridian Puyallup, WA 98371) 864-4165 Fax: (253) 840-6678 permitcenter@ci.puyallup.wa.us

Parcel #: 7600200051	Site Address: 000 2nd Street NE	
Owner: 2nd St LLC, Don Huber	Owner Phone #: 253-564-6069	
Owner Address: P.O. Box 64160	City: Tacoma	Zip: 98464
Contractor Name:	Contractor Phone #:	
Contractor Address:	City:	Zip:
WA License #:	Exp. Date: City Business Licens	se #:
Contact Name: Rhene Johns	Email Address: rhene@jgarch.net	
Contact Phone #: 253-581-6000	Fax #:	
MINIMUM SUBMITTAL REQUIREMENTS FOR	COMMERCIAL PROJECTS: ONE SIGNED APPLICATION	TWO SETS OF

MECHANICAL DETAIL DRAWINGS TWO COPIES OF SITE PLAN IF MECHANICAL DEVICES ARE LOCATED OUTSIDE OF BUILDING PLAN REVIEW FEE REQUIRED AT TIME OF SUBMITTAL. PENGINEERING PLANS AND OR CALCULATIONS MUST BE PROVIDED WITH ORIGINAL STAMP/SIGNATURE. PLANS PROVIDED WITH ORIGINAL STAMP/SIGNATURE. PLANS PLANS PLANS PLANS PLANS PLANS PROVIDED WITH ORIGINAL STAMP/SIGNATURE.

PROJECT DESCRIPTION:

Apartment building with parking below containing 29 units

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	
72	Install / Relocate Recessed Wall Space Heater	19.55	1,407.60
29	Appliance Vent – Separate	9.60	278.40
	Repair Heating / Cooling Unit	18.11	
1	Heat Pump / Boiler / Compress 3 HP; up to 6 Tons; 100,000 BTU	19.55	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 BTU	122.48	
	Separate Air Handling Unit to 10,000 CFM	14.10	
	Separate Air Handling Unit over 10,000 CFM	23.92	
	Stationary Evaporative Cooler	14.10	
40	Exhaust Vent Fan with Single Duct (Bath Fan)	14.10	564.00
29 HRV	Vent System Apart from Heating or AC	14.10	408.90
29	Mechanical Exhaust Hood / Duct (Range Hood) - Residential	14.10	408.90
1 corridor	Mechanical Exhaust Hood w/Make-up Air - Commercial	35.95	35.95
exhaust	Commercial / Industrial Incinerator	24.00	
	Gas Piping: (1 - 4 outlets)	6.30	
	(5 or more outlets / per outlet)	1.30	
	Unclassified Appliance or Equipment (Fireplace, etc)	14.10	
	Mechanical Duct Work: (1 – 5 Diffusers)	14.10	
11+	(6 – 10 Diffusers)	19.55	24.00
111	(11 or more Diffusers)	24.00	30
		TOTAL:	3,147.50

CONTRACTORS AFFIDAVIT: I HEREBY MAKE APPLICATION FOR A MECHANICAL PERMIT AND CERIFY THAT OUR BUSINESS IS REGISTERED AS A CONTRACTOR WITH THE STATE OF WASHINGTON AND THAT ALL WORK SHALL BE PERFORMED IN ACCORDANCE WITH ALL CODES AND ORDINANCES OF THE CITY OF PUYALLUP.

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.

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SIGNATURE OWNER / AUTHORIZED AGENT

Dylan Hub

DATE: 3 / 23/ 22

Rev 5/17

City of Puyallup Application for Plumbing Permit



PRMU20220123

Building Division 333 S. Meridian Puyallup, WA 98371 253) 864-4165 Fax: (253) 840-6678 permitcenter@ci.puyallup.wa.us

Parcel #: 7600200051	Site Ad	ddress:	000 2nd	d Street NE		
Owner: 2nd Street LLC, Don Huber		Owner	Phone #:	253-564-60	069	
Owner Address: P.O. Box 64160			С	ity: Tacoma	Zip:	9846
Contractor Name:		Contra	ctor Phone	#:		
Contractor Address:			Ci	ty:	Zip:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
WA State License #:	E	xp. Date:		City Business	License #:	- W
Contact Person: Rhene Johns		Contac	t Email: rhe	ne@jgarch.net		
Contact Phone #: 253-581-6000		Fax #:				
MINIMUM SUBMITTAL REQUIREMENTS FOR COMPLUMBING DETAIL DRAWLINGS (FIXTURE LAYOUT AND REVIEW FEE REQUIRED AT TIME OF SUBMITTAL PEQWORKSHEET A water availability/approval letter shall be submitted area. To confirm your water service area, please contact Fruitland Mutual Water (253) 848-5519 - Valley Water (253)	ISOMETR QUIPMENT d with this t Engineer	RIC) WITH F SCHEDULE application ring Services	IXTURE UNIT REQUIRED (for any properties at (253) 841	S AND SIZES AS F ON ALL PLANS erty located outsic -5577.	REQUIRED PLA PLUMBING FIX	AN Ture
PROJECT DESCRIPTION: 29-unit apar	tment	building	with park	ing below		

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	
F	RESIDENTIAL (1 & 2 DW	ELLINGS	5)		Grease Trap	13.00	
	1 Bathroom	160.00			Grease Interceptor	13.00	
	2 Bathroom	200.00			BACK FLOW DEVI		
	3 Bathroom	240.00		2	Per Unit	26.00	52
	Alterations each fixture	13.00			MEDICAL GAS SYST	ГЕМ	
	Water Heater	13.00			Medical Gas Piping System	80.00	
	***COMMERCIAL	***			Surgical Vacuum System	80.00	
207	New Const. each fixture	13.00	2,691		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		0.77	OTHER (NOT LISTE	D)	
	Sump, Sewage Ejector Pump	13.00					
	Garbage Disposal	13.00					
29	Water Heater	13.00	377				
	SUB-	TOTAL:	3,068		SUB-1	OTAL:	52

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PRINT NAME

DATE: 3 / 23/ 22

Rev 5/17

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Plan Submittal Checklist for Single Family Residence

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_	2 (two) copies of a site plan, drawn to scale on 8½" 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.
	2 (two) sets of plans (Engineer or Architect Stamped 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 – Engineer stamped Basement & retaining walls 4 feet and higher Beams supporting combined roof & floor loads Deams 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
	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
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	Plan Review Fee
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☑ Traffic Scoping Worksheet

Plan Review Fee