



City of Puyallup – Fire Prevention Department

Application for Fire Code – Construction Permit

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

(*Performed online search, but didn't find match)

Building Permit # * (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: 10/06/2023 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 East. Adding (5) relays, (1) notification device. Joint venture between Johnson Controls Fire Protection and Precision Electric Group.

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	6 devices	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 Acknowledge BOTH REQUIRED *****

- U.L. Certification/Third Party Acknowledgement (check box for acknowledgment)**
- NICET Level of Fire Alarm Designer Acknowledgment (check box for acknowledgment)** Eric Beck, Level III

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

Signature:	<i>Janet Stebbins</i>	Date:	10/10/2022
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Print Signature:	Janet Stebbins	Email:	janet.stebbins@jci.com
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