

Acceptance Criteria Checklist

Applicant		Documents	City Received	
Yes	No		Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	Plan Sheets - (8 copies plus CD)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Cover Sheet	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Notes and Details	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Existing Conditions	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Erosion and Sediment Control	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Grading	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Road Plan and Profile	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Utility Plans (water, sanitary and storm)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Street Lighting	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Channelization (i.e. signalization)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Landscape Plan (2 copies)	<input type="checkbox"/>	<input type="checkbox"/>
Technical Information Report (TIR) - (2 copies)				
<input type="checkbox"/>	<input type="checkbox"/>	Stormwater Site Plan Report (Bound, indexed, & tabbed)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Critical Areas Report (If applicable)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	<input type="checkbox"/>

Checked in by : _____

Date: _____

Office Use Only:

Submittal Date: ____/____/____ Civil Permit No: ____-____-____ Related Case No: ____-____

Applicant must include this completed form with the initial application submittal.

Civil Construction Permit Application

OWNER	
Name: Tac Build LLC	Address: P.O. Box 7619
Contact No: 253-581-4500	City: Tacoma
Email: mike@tacbuildllc.com	State, Zip: WA, 98417
APPLICANT	
Name: Tac Build LLC	Address: P.O. Box 7619
Contact No: 253-581-4500	City: Tacoma
Email: mike@tacbuildllc.com	State, Zip: WA 98417
ENGINEER / ARCHITECT	
Name: CES-NW, Inc Dan Smith	Address: 429 29th St NE Suite D
Contact No: 253-848-4282	City: Puyallup
Email: dsmith@cesnwinc.com	State, Zip: WA, 98372
CONTRACTOR	
Name: _____	Address: _____
Contact No: _____	City: _____
Email: _____	State, Zip: _____

Site Information

Project Name: 1200 7th Townhouses	P - 20-0057
Site Address: 1200 7th Ave SE	Parcel No: 7845001330
Puyallup, WA	Zoning: RM 10

Site Information

Project Type:

Commercial/ Medical/ Multi- Family

Improvements associated with the Building Permit

Residential; Single Family/ Duplex

Residential Short Plat

Residential Subdivision

Frontage Improvements

Other

Short Plat:

Short Plat is recorded

Short Plat is not recorded

Review Fees

Plan review and record drawing review fee:

Commercial/ Multi- Family/ Major Plat/Short Plat \$670.00

Off-site, water/ sewer/ storm main extension/ grease interceptor/ oil separator \$560.00

Plan review plus \$200 record drawing review fee:

Clearing only \$70.00

0-50 cubic yards \$130.00

51-100 cubic yards \$240.00

101-1,000 cubic yards \$510.00

1,000-10,000 cubic yards \$760.00

10,001-100,000 cubic yards \$1,000.00

+100,000 cubic yards \$1,240.00

CERTIFICATION:

I certify that I have read this application and declare that the info contained herein is correct and complete.

Signature of Applicant: Michael G. Adams Date: 4/20/23

Print Name: Michael G. Adams