



City of Puyallup – Fire Prevention Department

Application for Fire Code – Construction Permit

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

Building Permit # _____ (in association to the fire sprinkler/alarm submittal)

Parcel #: 0420352148	Site Address: 815 21ST ST
Owner Name: CASCADE CHRISTIAN JR. HIGH	Phone #:
Owner Address: 815 21ST ST SE	City: PUYALUP Zip: 98372
Contractor Name: LINX INTEGRATED	Phone #: 253-848-3036
Contractor Address: 11409 58TH AVE E	City: PUYALLUP, WA Zip: 98373
WA License #: 602450514	Exp. Date: 05/31/23 City Business License #: 02004150
Contact Person: DAVID JUSTICE	Contact Email Address: DAVID-J@LINXNW.COM
Contact Phone #: 253-241-4125	Contact Fax #:

PROJECT DESCRIPTION (TO INCLUDE TENANT NAME): **INSTALLATION OF NEW FIRE ALARM DEVICES FOR 6 PORTABLE CLASS ROOMS LOCATED ON NW SIDE OF THE PARKING LOT, PORTABLES 5-10.**

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	48-DEVICES 2- CONTROLLERS	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)**

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

Signature:	<i>David A Justice</i>	Date:	07-16-2024
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Print Signature:	DAVID A JUSTICE	Email:	DAVID-J@LINXNW.COM
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