



# 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 #:	Site Address: 310 31ST AVE SE
Owner Name: WALMART	Phone #:
Owner Address: 702 SW 8TH ST	City: BENTONVILLE      Zip: 72716
Contractor Name: FIRESHIELD INC	Phone #:
Contractor Address: 5202 OLYMPIC DR NW	City: GIG HARBOR      Zip: 98335
WA License #: FIRESI*024C5	Exp. Date: 12/31/25      City Business License #: 2007409
Contact Person: CHANDLER STREULI	Contact Email Address: CHANDLER@FIRESHIELDINC.COM
Contact Phone #: 253-851-0030	Contact Fax #:

**PROJECT DESCRIPTION (TO INCLUDE TENANT NAME):**

Alteration of sprinkler system with 46 sprinkler heads

**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 checked="" type="checkbox"/> Fire Sprinkler – Tenant Improvement	Tenant Improvement to Existing Fire Sprinkler System	46	
<input type="checkbox"/> Fire Alarm System -New	Installation of a New Fire Alarm System		Designed to total coverage NFPA72
<input type="checkbox"/> Fire Alarm System - Tenant Improvement	Tenant Improvement to Existing Fire Alarm System		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:	Date: March 7, 2025
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Print Signature: CHANDLER STREULI	Email: CHANDLER@FIRESHIELDINC.COM
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