



THE CITY OF FIRCREST

115 RAMSDELL STREET • FIRCREST, WASHINGTON 98466-6999 • (253) 564-8901 • FAX (253) 566-0762

**TENANT IMPROVEMENT
PERMIT APPLICATION**

PROJECT ADDRESS

Parcel Number

PROJECT VALUATION:

APPLICANT

Phone

Email address

Address (Street, City, State, Zip)

PROPERTY OWNER

Phone

Email address

Address (Street, City, State, Zip)

CONTRACTOR

Phone

Email address

Address (Street, City, State, Zip)

Contractor License #

Exp Date

UBI#

Will the applicant be the contact person: Yes No

If no, please specify (name and phone number):

PROJECT DESCRIPTION

Occupancy Classification:

Is the Building Sprinkled: Yes No

Type of Construction:

of Stories:

Total Square Footage:

Square Footage per floor:

Parking Spaces Provided:

Barrier Free Spaces:

Is the space to be occupied served by Pierce County Sewer? Yes No

If yes, please attach pre-treatment review and approval documentation for this individual space.

I hereby certify that the information provided is correct and that the construction on the above-described property, the occupancy, and use will be in accordance with the laws, rules, and regulations of the state of Washington and the Fircrest Municipal Code.

Print Name: _____ Owner Agent/Other (specify)

Signature: _____ Date: _____

A Fircrest Business License is required for all contractors doing business in the City of Fircrest