



Planning/Building Department
115 Ramsdell Street
Fircrest WA 98466
(253) 564-8901

TENANT IMPROVEMENT PERMIT APPLICATION

Site Address _____

Parcel Number _____

PROPERTY OWNER:

Name _____ Daytime Phone _____

Mailing Address _____ Fax No.: _____

City/State/Zip _____

APPLICANT:

Name _____ Daytime Phone _____

Mailing Address _____ Fax No.: _____

City/State/Zip _____

Will the applicant be the contact person: YES or NO If other, please specify below:

Contact person _____ Daytime Phone _____

Mailing Address _____ Fax No.: _____

City/State/Zip _____

Proposed Scope of Work _____

Estimated Project Value _____ # Stories _____

Occupancy Classification _____ Type of Construction _____

Total Square Footage _____ Square Footage per floor _____

Parking Spaces Provided _____ Barrier Free Spaces _____

Is the space to be occupied served by Pierce County Sewers? If yes, please attach pre-treatment review and approval documentation for this individual space.

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

Applicant's Signature
I certify that I am the owner or the owner's agent

Date

Print Applicant's Name