



# Tenant Improvement Building Remodel PERMIT

Permit No: BTI-031558-2022

Type: Tenant Improvement Building

Work Class: Remodel

Status: Issued

Online Inspection Request: <https://dbs.lynnwoodwa.gov>

## PROJECT INFORMATION

Job Address: 2322 196TH STSW  
LYNNWOOD, WA 98036

Project: Acadia Healthcare TI  
Parcel: 27042300200800  
Valuation \$321,132.00

Application Date: 06/24/2022  
Issue Date: 10/04/2022  
Final Date:

## PROJECT SCOPE

Description: Acadia Healthcare TI - 5,915 square foot existing assembly occupancy converted to medical clinic. Existing HVAC equipment to remain with some new ductwork. Partial interior demolition, new walls and finishes. New plumbing fixtures and casework also provided. Existing parking is adequate for new use.

|                              |                                      |                            |
|------------------------------|--------------------------------------|----------------------------|
| Number of Stories:           | Occupancy Load:                      |                            |
| Number of Units:             | Construction Type:                   |                            |
| Occupancy:                   | Sprinklers:                          |                            |
|                              | Public Owned:                        |                            |
| Water Closet: 1              | Floor Drain:                         | Slop Sink: 1               |
| Lavatory: 1                  | Floor Sink:                          | Urinal:                    |
| Kit Sink/Disposal: 1         | Bath Tub:                            | Backflow Devices: 1        |
| Dishwasher:                  | Shower:                              | Rainwater System:          |
| Lawn Sprinkler Sys:          | Laundry Tray:                        | Drinking Fountain: 1       |
| Clothes Washer:              | Electric Water Heater:               | Industrial Waste Pretreat: |
| Drainage/Vent Pipe: 1        | Hose Bibs:                           | Med Gas Piping:            |
| Vacuum Breakers:             | Water Piping: 1                      |                            |
| Furnace:                     | To 30hp/1,000,000 BTU:               |                            |
| Gas Water Heater:            | To 50hp/1,750,000 BTU:               |                            |
| Suspended/Wall/Floor Heater: | >50hp/1,750,000 BTU:                 |                            |
| Appliance/Dryer Vent:        | Air Handler to 10,000 cfm:           |                            |
|                              | Air Handler over 10,000 cfm:         |                            |
|                              | Domestic Incinerator:                |                            |
|                              | Commercial / Industrial Incinerator: |                            |

## PERMIT VALUATION

| Valuation Group | Valuation Type | Sq. Ft | Value        |
|-----------------|----------------|--------|--------------|
|                 |                | 0      | \$321,132.00 |
| <b>TOTALS:</b>  |                | 0      | \$321,132.00 |

## CONTACTS

| Contact Type     | Contact Name   | Business Phone | E-mail                              | License Number |
|------------------|--|----------------|-------------------------------------|----------------|
| Architect        | Ben Whittenburg,                                     |                | ben.whittenburg@gmcnetwork.com      |                |
| Tenant/Occupant  | Brian Spalding, Acadia Healthcare                    | 8284216833     | brian.spalding@acadiahealthcare.com |                |
| Property Manager | Christian Kolmodin, Kaleb Group   Ryann Building LLC | 2068597611     | christiank@kalebgroup.com           |                |
| Contractor       | Colvos Construction LLC                              | 2537783134     | mmcglathlin@colvosconstruction.com  | COLVOCL832CZ   |
| Applicant        | Donovan Colon, Permit Advisors                       | 8182612721     | donovan@permitadvisors.com          |                |
| Property Owner   | Ryann Building LLC                                   |                |                                     |                |

## FEES

| Fee Name                | Fee Amount | Paid Amount | Fee Status   |
|-------------------------|------------|-------------|--------------|
| Plan Review Fee         | \$1,891.87 | \$1,891.87  | Paid In Full |
| Building Permit Fee     | \$2,910.57 | \$2,910.57  | Paid In Full |
| Plumbing (C) Permit Fee | \$867.39   | \$867.39    | Paid In Full |



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|--------------------------------|-------------------|-------------------|--------------|
| Plumbing (C) Plan Review Fee   | \$346.96          | \$346.96          | Paid In Full |
| Mechanical (C) Plan Review Fee | \$442.16          | \$442.16          | Paid In Full |
| Mechanical (C) Permit Fee      | \$1,105.39        | \$1,105.39        | Paid In Full |
| Technology Fee                 | \$189.11          | \$189.11          | Paid In Full |
| <b>TOTALS</b>                  | <b>\$7,753.45</b> | <b>\$7,753.45</b> |              |

Permission is hereby given to commence the above described work, according to the conditions hereon and in accordance with the approved plans and specifications pertaining thereto, subject to compliance with City of Lynnwood ordinances and laws of the State of Washington.

- \* I am the owner or the owner’s agent and have permission to apply for this permit.
- \* I am aware that my permit will become null and void if the authorized work has not been inspected within 180 calendar days of issuance or for a period of 180 calendar days from the last inspection.
- \* I am aware that a one-time extension may be granted if a written request is submitted in writing to the building official showing just cause, prior to the expiration.
- \* I have read and examined this application and know the information provided to be true and correct.

Permit Issued Date: 10/04/2022

\_\_\_\_\_  
Applicant Signature



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This Permit is to be conspicuously posted in an appropriate on-site location.

## INSPECTION RECORD

To request an inspection, please log into your DBS Portal account online:  
<https://www.dbs.lynnwoodwa.gov>

| Inspection(s)              | Date | Inspector | Comments |
|----------------------------|------|-----------|----------|
| Fire Dept. Final           |      |           |          |
| Plumbing Final             |      |           |          |
| Mechanical Final           |      |           |          |
| Fire Dept Pre-Inspection   |      |           |          |
| BLD Footing                |      |           |          |
| Building Final             |      |           |          |
| BLD Foundation Wall        |      |           |          |
| BLD Footing Drains         |      |           |          |
| BLD Roof Drains            |      |           |          |
| BLD Slab Insulation        |      |           |          |
| BLD Slab                   |      |           |          |
| BLD Under Floor            |      |           |          |
| BLD Exterior Gypsum Sheatl |      |           |          |
| BLD Shear Nailing          |      |           |          |
| Mech Rough                 |      |           |          |
| Plumbing Rough             |      |           |          |
| BLD Framing                |      |           |          |
| Fire Dept Ceiling Cover    |      |           |          |
| BLD Insulation Wall        |      |           |          |
| BLD Insulation Floor       |      |           |          |
| BLD Insulation Ceiling     |      |           |          |
| BLD Sheetrock Nailing      |      |           |          |
| Landscape Inspection       |      |           |          |



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For more information about how to create an online account or request inspections online, please visit: <https://dbs-training.lynnwoodwa.gov>

## **\*NOTICE\***

THIS PERMIT BECOMES NULL AND VOID IF THE AUTHORIZED WORK HAS NOT BEEN INSPECTED BY THIS DEPARTMENT WITHIN 180 CALENDAR DAYS OF ISSUANCE OR FOR A PERIOD OF 180 CALENDAR DAYS FROM THE LAST INSPECTION.

THE TOTAL LIFE OF THIS PERMIT IS LIMITED TO A MAXIMUM OF 540 CALENDAR DAYS, PROVIDED IT HAS NOT EXPIRED UNDER THE RESTRICTIONS ABOVE.

ONE EXTENSION REQUEST FOR 180 CALENDAR DAYS MAY BE GRANTED IF A WRITTEN REQUEST IS SUBMITTED