

Building Permit Application

Application
City of Camas, Community Development
616 NE Fourth Ave, Suite 4, Camas, WA 98607

Phone: 360-817-1568

Email: permits@cityofcamas.us

Date Received:			
Application #:			
Permit Entry By:		A A RANGE	
Planning Review Required: Planning Case #:	Yes □	Ву:	
Engineering Review Required	d: Yes □	Ву:	

TYPE OF WORK									
☐ New Construction	☐ Addition	☐ Remodel/Alteration							
☐ Commercial T.I.	☐ Change of Occupancy	☐ Reroof/Siding							
☐ Mech/Plumb	☐ Deck	☐ Covered Patio							
□ Windows	Other (Specify):								
CATEGORY OF CONSTRUCTION									
☐ 1 & 2 Family Dwelling ☐ Commercial/Multi-Family									
☐ Other (specify):									
Accessory Dwelling Unit (ADU) If yes, please fill out ADU supplemental application DESCRIPTION OF WORK									
JOB SITE LOCATION									
Property Address or Ta Subdivision:	Lot	#							
Subulvision.	PROPERTY OWNE								
Name:	TROFERT OWNE								
Address:									
City, State, Zip:									
Phone:	Fax:								
E-Mail:	1								
CO	CONTRACTOR/APPLICANT								
Company Name:									
Address:									
City, State, Zip:									
Phone: Fax:									
E-Mail:									
License #	License # Exp								
I hereby certify that I have read and examined this application. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. I agree to build to the approved plans. I understand that it is the responsibility of the applicant/owner to comply with all private conditions, covenants and restrictions (CC&R's) associated with this property. I understand that other permits/approvals such as Fire, Planning, Engineering, Water-Sewer, may be required.									
Applicant's Signature:									
Print Name:	Date:								

Engineering Review Required. Tes \Box by.							
NEW SQUARE FOOTAGE/VALUATION							
				sq ft will mas Eng			stormwater Dept.**
Valuation*	,			9		- 5	
New Dwelling	Are	a					
Garage/Carport Area							
Covered Porch Area							
Deck Area							
SQ Ft Imperv	iou	s Surfac	e:				
Lot Size:		Ţ	ot (Coverage	: %:		
*Valuation is or such as but no	nly r t lim	equired w ited to, ar	here inte	e square fo erior remo	ootag del oi	e is a re	not added, etaining wall.
	ń.	PLUMBIN	IG II	NFORMA	TION		
Water Meter S	Size	□ 3/	4"			1"	_
Toilets			FI	oor Drain			
Tub/Shower			W	ashing M	achir	ie	
Bathroom Sinl	<		Water Heater				
Kitchen Sink			Disposal				
Dishwasher			Hose Bibs				
Laundry Tray			Backflow Device				
Other/Descrip	tion						W
. Pauli	M	ECHANIC	AL	INFORMA	ATIOI	N	2 7 66,
Fuel Type				ric 🗆 Oth			
	Νι			Piping O			
System Type		☐ Force ☐ Other		ir □ Roor	n He	ater	
Furnace		_BTU	Ai	r Conditio	ner_		TONS
Fireplace(s)				Wood s	Stove	e(s)	
Exhaust of Fans							
Bath Kitchen Laundry Whole House							
		Ene	ergy	Option			
Table 406.2 E			-2.0				
Has this exact code cycle? If							
**FIRE SPRIN	KLE	ERS ARE	RE	QUIRED F	OR A	ALL	NEW SFR **
CC	MM	ERCIAL	8 M	ULTI-FAN	IILY (ONL	Υ
Valuation**							
New Building Area							
Tenant Improvement Area		t					