



City of Camas  
Community Development | Building Division  
616 NE 4<sup>th</sup> Avenue, Camas, WA 98607  
360-817-1568 | permits@cityofcamas.us

## CERTIFICATE OF OCCUPANCY APPLICATION

Check Applicable Changes:

- New Business
- Fire Department Request
- Change of Owner
- New Location
- Change in Business Use

Permit Number: \_\_\_\_\_  
*(if applicable)*

Business Address: \_\_\_\_\_

Owner: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Owner Phone: \_\_\_\_\_

Portion of Building (Suite, etc): \_\_\_\_\_

To Be Used For: \_\_\_\_\_

Tenant: \_\_\_\_\_

Tenant/Contact Person Phone: \_\_\_\_\_

Signature of Requestor: \_\_\_\_\_ Date: \_\_\_\_\_

OFFICE USE ONLY	
Code Edition	_____
Occupancy Group	_____
Occupant Load	_____
Type of Construction	_____
Sprinklers	_____
Approved by	_____ Date: _____