

COMMERCIAL PLUMBING PERMIT APPLICATION 2024

Phone: 360-817-1568 | Email: <u>permits@cityofcamas.us</u>

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Project	t Name:					
Job Site A	ddress:					
Applicant	t Name:					
Applicant	Phone:					
Applican	t Email:					
Contractor	Name:					
WA Sta	te Lic #:					
Project Valuation:						
Work Description:						
I CERTIFY THAT I AM CURRENTLY REGISTERED AND PROPERLY LICENSED AS A GENERAL CONTRACTOR OR SPECIALTY CONTRACTOR						
AS DEFINED UNDER RCW18.27.010 AND I AM LEGALLY QUALIFIED TO PERFORM THE WORK SOUGHT BY THIS APPLICATION OR, THAT I						
AM EXEMPT FROM THE REQUIREMENTS OF THE CONTRACTOR LAWS, RCW18.27.110 AND 18.27.010, AND WILL DO ALL MY WORK OR						
USE ALL REGISTERED LICENSED SUBCONTRACTORS.						
21211						
SIGNED					DATE	

Permit Issuance	Unit Cost	Qty of Units
For issuance of each permit	47.00	1
Unit Fee Schedule	(in addition to	o item 1 above)
Plumbing Fixtures		
Water Closet/Toilet	16.00	
Tubs/Showers/Jacuzzi	16.00	
Bathroom Sinks, Lavs	16.00	
Kitchen Sink, Laundry Sink	16.00	
Dishwasher	16.00	
Laundry Tray	16.00	
Floor Drain	16.00	
Washing Machine	16.00	
Disposal	16.00	
Water Heater and/or Vent	16.00	
Hose Bib	16.00	
Sewer (Building & Trailer Park)	32.00	
Rainwater System – per drain (inside building)	16.00	



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Plumbing Fixtures (Cont.)	Unit Cost	Qty of Units
Industrial waste pretreatment interceptor including its trap and vent, except kitchen-type grease interceptors functioning as fixture traps	16.00	
Alteration/repair of water piping and/or water treating equipment	16.00	
Alteration/repair of drainage or vent piping	16.00	
Backflow Device (AVBs are prohibited in the City of Camas)		
2-inch (51mm) diameter and smaller	16.00	
Over 2-inch (51mm) diameter	32.00	
Greywater System	78.00	
For each gas-piping system of 1 to 4 outlets	10.00	
Each additional outlets	3.00	
Medical gas piping system, serving 1 to 4 inlets/outlets for a specific gas	97.00	
Each additional medical gas inlets/outlets	10.00	