

OFFICIAL USE ONLY

PERMIT FEES: **\$115.00**

DATE RECEIVED:

DATE ISSUED: _____

ISSUED BY: _____



230 2nd Street, Raymond, Washington 98577
360.942.4100, www.cityofraymond.com

OCCUPANCY PERMIT APPLICATION

PROPERTY OWNER INFORMATION Contact Person

Name: _____

Mailing Address: _____

City/State/Zip: _____

Phone: _____ Phone: _____

Email: _____

OCCUPANCY INFO

Type: _____

If changing occupancy type, what is the requested new occupancy type:

FR: _____ TO: _____

Commercial Residential

APPLICANT INFORMATION Contact Person

Name: _____

Mailing Address: _____

City/State/Zip: _____

Phone: _____ Phone: _____

Email: _____

JOB SITE INFORMATION AND LOCATION

Job Site Address: _____

Tax Parcel ID No.: _____

Legal Description: _____

Township/Range/Section / /

Directions to site: _____

Legal Description and Tax Parcel Number can be found on your tax statement, the Pacific County web site or by calling the Assessor's office at 360-875-9301.
Applications cannot be processed without this information.

I hereby certify under penalty of perjury under the laws of the State of Washington that the following is true and correct:

1. *I have read and examined this Mechanical Permit Application.*
2. *The information provided in this application contains no misstatement of fact.*
3. *I am the owner(s), or the authorized agent(s) of the owner(s) of the property which is the subject of this development application.*

Authorized Signature: _____

Print Name _____

Date: _____