



CLARK COUNTY
WASHINGTON

COMMUNITY DEVELOPMENT
BUILDING SAFETY

Commercial Building Permit

Application

Rev 04.25.19

Working together. Securing your safety. Protecting your investment.

Permit Number:		Shell Number:	
Applicant			
Name:		Phone:	
Address:		Email:	
Contact			
Name:		Phone:	
Address:		Email:	
Owner			
Name:		Phone:	
Address:		Email:	
Contractor/Builder			
Name:		Phone:	
License:		Email:	
Certified Erosion Control Contact			
Name:		Phone:	
Project information			
Site Plan Review/ Final Site Plan number:		Project name:	
Current zone:	Use table:	Project valuation:	
Previous tenant:			
Property address and suite number:			Parcel number:
Will proposal affect existing parking or access? YES / NO			
Application type		Utilities	
<input type="checkbox"/> New building <input type="checkbox"/> Shell only <input type="checkbox"/> Tenant improvement <input type="checkbox"/> Portable structure <input type="checkbox"/> Addition <input type="checkbox"/> Interior only <input type="checkbox"/> Landlord improvement <input type="checkbox"/> Other: _____		<input type="checkbox"/> Septic <input type="checkbox"/> Sewer, district: _____ <input type="checkbox"/> Well <input type="checkbox"/> Water, district: _____	
Restaurant use		Square footage	
Current seating: _____		Existing: _____	
Proposed seating: _____		Proposed: _____	
		First story: _____	
		Second story: _____	
		Additional: _____	
		Carport: _____	
		Garage: _____	
		Deck/Porch: _____	
		Elevator: YES / NO	
Other permits needed - separate permit required		Type of heat	
<input type="checkbox"/> Mechanical - furnace, gas piping, woodstove, heat pump <input type="checkbox"/> Plumbing - water service, moving fixtures, lawn sprinklers <input type="checkbox"/> Signs <input type="checkbox"/> Retaining walls <input type="checkbox"/> Trash enclosures <input type="checkbox"/> Out buildings		<input type="checkbox"/> Electric <input type="checkbox"/> Natural gas <input type="checkbox"/> Other: _____	
		Number of buildings: _____	
		Number of units: _____	
		Number of stories: _____	
		Finished basement: _____	
		Unfinished basement: _____	
Project description			
Describe project and use:			
Name of new tenant/business:			

Applicant / Authorized signature

Print Name

Date

Public Service Center
1300 Franklin St., Vancouver, WA 98660
564.397.2375, permitservices@clark.wa.gov
www.clark.wa.gov/community-development

For other formats, contact the Clark County ADA Office
Voice: 564.397.2322 Relay: 711 or 800.833.6388 Fax: 360.397.6165
Email: ADA@clark.wa.gov