

WALLA WALLA COUNTY COMMUNITY DEVELOPMENT DEPARTMENT

310 W Poplar St., Suite 200

Walla Walla, WA 99362

509-524-2610

Submit all documents to: [permits@co.walla-walla.wa.us](mailto:permits@co.walla-walla.wa.us)

You will receive an auto-generated email once your application has been entered in our electronic system (TRAKIT) for processing and screening. If you do not receive an email within five business days, please call the number listed above to let us know.

**Change of Occupancy/ Use Permit Application** (Applicable only when no alterations or additions are proposed)

Original Permit # \_\_\_\_\_

12-digit Parcel # \_\_\_\_\_

Site Address \_\_\_\_\_

Applicant (required) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail address: \_\_\_\_\_

Property Owner (required) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail address: \_\_\_\_\_

Contractor (if applicable) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail address: \_\_\_\_\_

Contractor's Registration # \_\_\_\_\_

Prior/existing Occupancy/use \_\_\_\_\_

Proposed Occupancy / use (Describe in detail) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*The above information relating to the structure for which this application is submitted is correct and an accurate representation of this project.*

Signature \_\_\_\_\_ Date \_\_\_\_\_