

PERMIT APPLICATION CREDIT CARD
AUTHORIZATION FORM

To: **Permits** From: _____
Company: **Clackamas County** Date: _____
Fax Number: **503-742-4741** Fax Number: _____
Phone Number: **503-742-4240** Phone Number: _____
RE: **Permit Application** Number of Pages Including Cover: _____

(VISA/Mastercard only)

CREDIT CARD
NUMBER: _____

EXPIRATION
DATE: _____

NAME AS IT APPEARS ON
CARD: _____

3 DIGIT SECURITY CODE
(See reverse side of credit card) _____

CONTACT PHONE #: _____

JOBSITE ADDRESS: _____

**THIS DOCUMENT WILL BE DESTROYED AFTER YOUR
PERMIT IS PROCESSED.**

New Address:
CLACKAMAS COUNTY BUILDING CODES
150 Beaver Creek Road
Oregon City, OR 97045
New Telephone Number: 503-742-4240

New Hours
Regular Business Hours:
Monday thru Thursday 7 AM to 6 PM
Customer Service Counter Hours:
Monday thru Thursday 7 AM to 5:30 PM