

Home Business Permit

CITY OF THE DALLES
Community Development Department
313 Court Street
The Dalles, OR 97058
(541) 296-5481, ext. 1125
Fax (541) 298-5490 www.thedalles.com

Date Filed _____
File # _____
\$65.00 application fee received _____
Date Deemed Complete _____
Approval Date _____

APPLICANT

Business Name _____
Address _____

Telephone # _____
Email address _____

LEGAL OWNER (If Different than Applicant)

Name _____
Address _____

Telephone # _____

PROPERTY INFORMATION

Address _____
Map and Tax Lot _____
Zone District/Overlay _____ In City Limits: Yes _____ No _____

Waste Water Survey: Must be returned with this application

General Information: Describe current use of property

Signature of Applicant

Signature of Property Owner* or Owners Agent

Date

Date

** Notarized Owner Consent Letter may substitute for signature of property owner if applicant is not the owner.*



