

City of Camarillo

Home
Select Permit
Schedule / Cancel Inspections
Submit
Application
Email Us

Welcome to the Building Permits on-line service. Here you can apply for simple permits and schedule or cancel inspections.

To schedule an inspection you will need the permit or application number. This number can be found at the top of your inspection record card or on the upper right hand corner of your permit.

To apply for a permit, please complete the applicable declaration, which can be found here for contractors and here for corner/owners. After you have completed the declarations, return to this page and submit an application. You will need the exact property address. Permits are not issued until the Building and Safety Department has verified the application information. Building and Safety will contact you when the permit is issued.

If you have any questions or need additional information, please email us at bdpsafe@ci.camarillo.ca.us or call us at (805) 388-5395.

Thank you for using our online system!
City of Camarillo Building and Safety Department.

Security/Insurance
VPCI Certified

ABOUT ALL CERTIFICATES

Select "Submit Application"

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Submit an Application

There are three ways you can enter the location:

- Street Address:
- Enter the parcel number:
- Enter the owner's name:

Select one way to search for a location by selecting the radio button

Enter the location

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Submit an Application

There are three ways you can enter the location:

- Street Address:
- Enter the parcel number:
- Enter the owner's name:

Street Number:
Street Direction:
Street Name: *required
Street Suffix:

Submit

Select one way to search for a location by selecting the radio button

Enter the required information

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Please select the correct address.

Address	Owner Name	Parcel Id
1801 CARMEN DR	CAMARILLO CITY OF	165-0-316-03
1801 CARMEN DR 102	CAMARILLO CITY OF	165-0-316-03
1801 CARMEN DR	CARMEN PROF BLDG LLC	165-0-316-03
1801 CARMEN DR 100	CARMEN PROF BLDG LLC	165-0-316-03
1801 CARMEN DR 10	CARMEN PROF BLDG LLC	165-0-316-03
1801 CARMEN DR 102	CARMEN PROF BLDG LLC	165-0-316-03

Next

Security/Insurance
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ABOUT ALL CERTIFICATES

Select the address where the work is to be performed.

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Submit an Application

Select the Application Type.

Complete the following information.

Address: 601 CARMEN DR
Parcel: 165-0-316-03
Land ID #: 69478
Name: CAMARILLO CITY OF
General Location:

* Application Type: A/C CHANGED/OUT, ONLINE - SAME LOCATION
Tenant Unit Number:
Tenant Name:
Is it a public building?: Yes No

Contractor Type: Contractor Owner

Search for contractor name:
 Beginning with Containing

Notes:

Continue Clear

Select an application type from the drop down menu.

Select who is going to perform the work; contractor or property owner. If A contractor, enter contractor's name

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Select a Contractor

Click on the contractor name hyperlink to choose that contractor.

Name	Number	Type
RENEE MERRILL	0002479	GENERAL

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ABOUT ALL CERTIFICATES

Select the contractor

If you do not see the contractor listed, please call the office at 805-388-5395

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Submit an Application

Complete the following information.

Address: 601 CARMEN DR
 Parcel: 165-0-010-74
 Land ID #: 69476
 Name: CAMARILLO CITY OF
 General Location:

Contractor Name: RENEE MERIAUX

Please enter the contact information:

* Contact Name:

Address:

Zip:

Home Phone: () -

Work Phone: () -

Mobile Phone: () -

Misc Phone: () -

* E-mail:

* denotes required field

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Enter the required information

Submit an Application

Please confirm that the following information is correct. If you need to change something, select the "Cancel" button. Otherwise, select "Submit" to submit your application.

Address: 601 CARMEN DR
 Parcel: 165-0-010-74
 Land ID #: 69476
 Name: CAMARILLO CITY OF
 General Location:

Application Type: A/C CHANGEOUT, ONLINE - SAME LOCATION
 Tenant Number / Name: /
 Public Building Flag:

Contractor: RENEE MERIAUX
 Contact Name: RENEE MERIAUX
 Contact Address: 601 CARMEN DR, CAMARILLO CA, , 93010
 Home Phone: (805) 388-5395
 Work Phone: (805) 388-5395
 Mobile Phone: (805) 388-5395
 Misc Phone: (800) 000-0000
 Email Address: BLEDSAFE@CICAMARILLO.CA.US

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Verify the information is correct

City of Camarillo

Submit an Application

Application Information:

The following fees are applied to a/c changeout, online - same location applications.

Permit Type Code	Fee Code	Description	Fee Amount
AD	PP	A/C CHANGEOUT ONLINE	\$21.00
	AF	ARCHIVE FEE	\$2.52
	IF	ISSUANCE FEE	\$32.00

The total fees for this application are \$55.52

By continuing you verify that you wish for an official application to be created and for the fees listed above to be applied.

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Select "Create Application"

Submit an Application

Please print out and retain the following information for your records. Upon acceptance of your application, you will receive an email.

Address: 601 CARMEN DR
 Parcel: 165-0-010-74
 Land ID #: 69476
 Name: CAMARILLO CITY OF
 General Location:

Your application number is: 12 - 00001115
 Your PIN # for this application is: 0090997380

Permit Type Code	Fee Code	Description	Fee Amount
	AF	ARCHIVE FEE	\$2.52
	IF	ISSUANCE FEE	\$32.00
AD	PP	ONLINE A/C CHANGEOUT	\$21.00

The standard fee for A/C CHANGEOUT, ONLINE - SAME LOCATION is \$55.52

Note Text:
 This permit is for the replacement of an existing a/c in the same location.

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Select "Pay Now"

Submit an Application

Please print out and retain the following information for your records. Upon acceptance of your application, you will receive an email.

Address: 601 CARMEN DR
 Parcel: 165-0-010-74
 Land ID #: 69476
 Name: CAMARILLO CITY OF
 General Location:

Your application number is: 12 - 00001115
 Your PIN # for this application is: 0090997380

Permit Type Code	Fee Code	Description	Fee Amount
	AF	ARCHIVE FEE	\$2.52
	IF	ISSUANCE FEE	\$32.00
AD	PP	ONLINE A/C CHANGEOUT	\$21.00

The standard fee for A/C CHANGEOUT, ONLINE - SAME LOCATION is \$55.52

Note Text:
 This permit is for the replacement of an existing a/c in the same location.

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Select "Pay Now"

Please fill in the fields below with your card information. Please remember that the cardholder name must appear exactly as it does on your credit card. Also, be sure to use the billing address of the credit card which may be different from your home address.

Account Information

Card Type:

Payment Amount: \$55.52

Card Number (No dashes or spaces):

Expiration: /

CVV2:

Cardholder Name:

First Name: MI: Last Name:

Credit Card Billing Street Address:

City: State:

ZIP (no dashes):

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Enter the required information

Select "Continue" and complete the transaction