

Town of Camp Verde

Community Development Department – Building Division

♦ 473 S. Main Street, Suite 108 ♦ Camp Verde, Arizona 86322 ♦

◆ Telephone: 928.554.0050 ◆ <u>www.campverde.az.gov</u> ◆

ZONING CLEARANCE PERMIT APPLICATION

Fences Not Exceeding 6ft; Sheds Less Than 120 sq. ft. (Commercial)/200 sq. ft. (Residential); etc.

Zoning projects include residential one-story detached accessory structures, including tool and storage sheds, shipping containers, playhouses, and similar uses, that do not require a building permit and which floor area does not exceed 200 square feet for residential and 120 square feet for commercial, and residential fences not exceeding six (6) feet in height. Block walls will require the submittal of a building permit. A separate permit will be required for any electric, plumbing or mechanical, as applicable.

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	eted Application Packet including project information, property information, property owner information, applicant ation, contractor information, plot plan sketch and <i>if applicable</i> :
	Designation of Agent
	Lumens Calculation Sheet
Detaile	d Site Plan drawn to scale on 8 ½" x 11" size paper or larger showing:
	Assessor's Parcel Number and Project Address
	Scale Used (May Be Engineer Or Architect's Scale, no less than 1"=50")
	Direction of North
	Parcel Diagram (Including Property Lines and Dimensions)
	Label front of property.
	Label adjacent streets or alleys.
	Indicate location and dimensions of easements that apply with proof of legal access.
	Indicate ingress/egress (driveway locations).
	Indicate existing topographical contours (solid line) and proposed contours (dashed line).
	Indicate the location of any terrain features that affect placements including washes, creeks or ditches within twenty (20) feet of the building site.
	Indicate dimension and setbacks of all buildings to property lines and between new and existing structures.
_	Indication location of septic tank and leach lines (including dimensions, size and setback or distance from proposed
_	building).
	Indicate location of well.
	Indicate location of propane tanks (including dimensions, size and setback or distance from proposed building).
	Indicate any required cut and fills and cubic yards of each.
	Indicate proposed fence locations(s) with an 'x' and include linear footage, height and type of material to be used.
Fees wi	ll be collected upon submittal of application in accordance with the current adopted fee schedule.

AN INCOMPLETE APPLICATION WILL NOT BE ACCEPTED

Note: All contractors must have a valid ROC License in the State of Arizona. A Town issued Business License is also required to perform services in the Town of Camp Verde.

Note: 9-495. Arizona Revised Statute In any written communication between a city or town and a person, the city or town shall provide the name, telephone number and email address of the employee who is authorized and able to provide information about the communication if the communication does any of the following:

- 1. Demands payment of a tax, fee, penalty fine or assessment;
- 2. Denies an application for a permit or license that is issued by the city or town; or
- 3. Requests corrections, revisions or additional information or materials needed for approval of any application for a permit, license or other authorization that is issued by the city or town.

An employee who is authorized and able to provide information about any communication that is described above shall reply within five (5) business days after the city or town receives that communication.







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PERMIT NUMBER:	
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OFFICIAL USE ONLY:

APPLICATION FOR PERMIT

TIME/DATE STAMP:

PROJECT INFORMATION:	
PROJECT TYPE: ☐ RESIDENTIAL ☐ COMMERCIAL ☐ ADDITION ☐ ALTERATION/REMODELING ☐ DEMOLITION ☐ NEW ☐ OTHER	۲.
DESCRIPTION OF PROJECT:VALUATION: \$	
HAS CONSTRUCTION STARTED ON THIS PROPERTY: ☐ YES ☐ NO SQUARE/LINEAR FOOTAGE: BLDG HEIGHT:	
DO YOU INTEND TO CONVERT THIS STRUCTURE INTO AN ACCESSORY DWELLING UNIT (Circle Response) YES NO N/A	
PROPERTY INFORMATION:	
PARCEL NUMBER:PHYSICAL ADDRESS:	
□ PROPANE □ NATURAL GAS □ ALL ELECTRIC	
SANITATION SERVICE PROVIDED BY:	
□ CAMP VERDE WASTEWATER (SEWER) PERMIT # □ SEPTIC SYSTEM PERMIT #□ SEPTIC SYSTEM S	 uined
WATER SERVICE PROVIDED BY:	
□ CAMP VERDE WATER COMPANY □ VERDE LAKES WATER COMPANY □ WELL – PERMIT NUMBER:	
Note: Well licensing information can be obtained through Arizona Department of Water Resources (ADWR). Please contact ADWR at (602) 771-8500 or www.azwater.gov.	
PROPERTY OWNER INFORMATION:	
OWNER(S) NAME:	
MAILING ADDRESS: STATE:	
ZIP CODE:PHONE: () E-MAIL:	
Note: If you recently purchased this property and Yavapai County does not yet reflect you as the current property owner, you will be required to show proof of ownership documentation at the tof application submittal.	time
APPLICANT INFORMATION:	
□ OWNER □ TENANT □ AGENT □ CONTRACTOR □ OTHER	
APPLICANT NAME:	
MAILING ADDRESS: CITY: STATE:	
ZIP CODE: PHONE: () - E-MAIL:	
Attention Applicant: If you are not the property owner, you must have something in writing from the property owner granting you permission to act on their behalf as agent. Or the follo Designation of Agent clause must be signed by the property owner:	wing
DESIGNATION OF AGENT	
WHEREAS, the above property owner is seeking to develop or improve real property within the municipal limits of the Town of Camp Verde, Yavapai County, Arizona, will require the filing, processing, and payment of certain zoning, construction and inspection permits and reports, both from the Town and related agencies, and WHERE owner elects to designate an agent with authority to file and process all necessary permits and information related to property zoning and improvement, including the authority pay fees and consent to inspections, NOW THEREFORE, the undersigned owner hereby designates:	AS, the
, whose address is:	
whose email is:	y be ,

CONTRACTOR INFORMATION:

ARS §32-1169. Local proof of valid license; violation; penalty. A. Each county, city, or other political subdivision or authority of this state or any agency, department, board or commission of this state which requires the issuance of a building permit as a condition precedent to the construction, alteration, improvement, demolition or repair of a building, structure or other improvement to real property for which a license is required under this chapter, as part of the application procedures which it utilizes, shall require that each applicant for a building permit file a signed statement that the applicant is currently licensed under the provisions of the chapter with the applicant's license number and the applicant's privilege license number required pursuant to ARS Section §42-5005. If the applicant purports to be exempt from the licensing requirements of this chapter, the statement shall contain the basis of the asserted exemption and the name and license number of any general, nechanical, electrical or plumbing contractor who will be employed on the work. The local issuing authority may require from the applicant a statement signed by the registrar to verify any purported exemption. B. The filing of an application containing false or incorrect information concerning an applicant's contractor's license or transaction privilege license with the intent to avoid the licensing requirements of this chapter is unsworn falsification pursuant to ARS Section§13-2704.

I AM CURREN	TLY A LICEN	NSED CONTRACTOR:					
NAME:		CC)MPANY NAMI	E:			
ROC LICENSE NUMBER: LICENSE CLASS: TOWN BUSINESS LICENSE #:							
SIGNATURE: TITLE: DATE:					E:		
Note: All contractors p 473 S. Main St. Ste. 102			obtain a Town Bu	siness License. Town Business Licenses ca	n be obtained thr	ough the Clerk's Ofj	fice at
EXEMPTION I	ROM LICEN	SING:					
I am exempt from Ar	izona Contractors' I	License Laws on the basis of the licen	se exemptions co	ontained in ARS §32-1121A, namely:			
☐ ARS §32-1	☐ ARS §32-1121A.5 – I am the owner/builder of the property and the property will not be sold or rented for at least one year after completion of this project.						
☐ Other – (Ple	ease Specify):						
I understand that the	ne exemption prov	-	-	otion) does not apply to any construct nd labor are \$1,000 or more.	ion project whi	ich requires a bui	lding
I will be using the following	lowing licensed cor	ntractors on this project:					
GENERAL CONTR	ACTOR	TOWN BUSINESS LICENSE N	UMBER	ROC LICENSE NUMBER	Ll	ICENSE CLASS	
ELECTRICAL CON	ELECTRICAL CONTRACTOR TOWN BUSINESS LICENSE NUMBER ROC LICENSE NUMBER LICENSE CLASS						
MECHANICAL CO	NTRACTOR	TOWN BUSINESS LICENSE N	NUMBER	ROC LICENSE NUMBER	Ll	ICENSE CLASS	
PLUMBING CONTRACTOR TOWN BUSINESS LICENSE NUMBER ROC LICENSE NUMBER LICENSE CLASS							
NAME:		SIGNAT	URE:		DAT	E:	
					OFFICIAL USE ONLY		
BUILDING CODE REQUIREMENTS:					Building:	\$	
2018 INTERNATIONAL BUILDING CODE (IBC) & APPENDIX J 2018 INTERNATIONAL ENERGY CONSERVATION CODE (IECC) 2018 INTERNATIONAL EXISTING BUILDING CODE (IEBC) 2018 INTERNATIONAL FIRE CODE (IFC) & APPENDICES B, C, D 2018 INTERNATIONAL FIRE CODE (IFC) & APPENDIC B, C, D 2018 INTERNATIONAL MECHANICAL CODE (IMC) & APPENDIX A 2017 NATIONAL ELECTRICAL CODE (NEC) 2018 INTERNATIONAL PLUMBING CODE (IPC) & APPENDIX F 2018 INTERNATIONAL SWIMMING POOL AND SPA CODE (ISPSC) TOWN CODE CHAPTER 7 – BUILDING				` ′	Plan Review:	\$	
				Engineering:	\$		
					\$		
		r complying with any deed restrictions (CO	C&R's) that may ap	pply to the property.		Fire:	\$
						Zoning:	
				DECLARE that I have examined and t said improvement in compliance with		Inv. Fee:	\$
application and it is true and correct to the best of my knowledge and belief. I agree to construct said improvement in compliance with all provisions of the Ordinances of the Town of Camp Verde. I realize that the information that I have stated heron forms a basis for the issuance of the Building Permit herein applied for and approval of any plans in connection therewith shall not be construed to permit any construction upon said premises or use thereof in violation of any provision of the Town Code or any other ordinance or to excuse the owner or his successors from complying					f the Building	ICC Valuation:	\$
					om complying	Subtotal:	\$
therewith. WHERE NO WORK HAS COMMENCED WITHIN 180 DAYS AFTER THE ISSUANCE OF A PERMIT OR WHEN MORE THAN 180 DAYS LAPSES BETWEEN APPROVAL OF REQUIRED INSPECTIONS, SUCH PERMIT SHALL BE VOID. I hereby certify that I am the OWNER at this address or that, for the purposes of obtaining this approval; I am acting on behalf of the owner. All contract work on this project will be done by a contractor holding a valid privilege tax license issued by the Town of Camp Verde and contractor's license issued by the State of Arizona.				3% Tech Fee:	\$		
				Total Due:			
				Deposit Amount:			
NAME:		SIGNATURE:		DATE:		Balance Due:	
						Application Taker	n By:

	PLOT PLAN SKETCH: Show lot/parcel lines and dimensions, adjacent streets and alleys, front of property, driveway, location of all proposed and existing buildings including dimensions, all building setbacks and distances between buildings, location of septic tank and leach lines, locations of incoming water yard lines and meter, electric yard line and meter, gas lines and tanks, any terrain features that affect placements, location and dimensions of easements and any washes, creeks or ditches within twenty (20) feet of the property.
	PARCEL NUMBER SCALE: INDICATE NORTH:
	I/WE,
	OFFICIAL USE ONLY: DEDMIT NUMBER: APPROVED BY: DATE:
ı	PERMIT NUMBER: DATE: DATE: