

# Town of Camp Verde

## **Community Development Department**

- ♦ 473 S. Main Street, Suite 108 ♦ Camp Verde, Arizona 86322 ♦
  - ◆ Telephone: 928.554.0050 ◆ <u>www.campverde.az.gov</u> ◆

### SIGN PERMIT APPLICATION

Sign regulations protect property values; provide an improved visual environment for citizens and visitors; promote and aid the tourist industry; protect the general public from damage and injury which may be caused by faulty and uncontrolled construction of signs; protect motorists and pedestrians from possible injury caused by the distractions or obstruction on improperly situated signs; and promote the public safety, welfare, convenience, and enjoyment of travel and the free flow of traffic within the Town.

Note: The Town of Camp Verde has a Dark Sky Ordinance, which affects light intensity, hours of use, and color/design of signs.

#### In order to process a sign permit, the following information must be submitted:

Completed Sign Permit Application Form including project information, property information, property owner
information, applicant/contact information, designation of agent, contractor information, plot plan sketch and
lumens calculation sheet (if applicable).

#### ☐ ALL COMMERCIAL SIGNS MUST BE INSTALLED BY A LICENSED SIGN CONTRACTOR

- ☐ The following is a list of ROC License classifications that are accepted for sign installations. For additional information on ROC License classifications please visit the Arizona Registrar of Contractors website at <a href="http://www.azroc.gov">http://www.azroc.gov</a>.
  - B-01 General Commercial Contractor
  - B-02 General Small Commercial Contractor

and locations of fasteners to be used.

☐ Electrical Diagram – If applicable for type of sign being installed.

- KB-1 Dual Building Contractor
- KB-2 Dual Residential and Small Commercial Contractor
- CR-38 Signs Contractor

Please Note: All contractors must have a valid ROC License and Town Issued Business License.

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Monument, Pole and Wall Signs
Site Plan drawn to scale or dimensioned on 8 ½" x 11" size paper including the following:
☐ Property lines with any existing easements and streets
Existing buildings
Locations and a separate drawing showing the sizes of existing signage
☐ Indicate location of proposed sign
Detailed graphic or photo of proposed sign in color and dimensions
<ul> <li>Note: If a sign face or sign is being replaced, a photo of the existing sign and a photo of the proposed sign in color would be preferred.</li> </ul>
Two (2) Sets of Construction Documents (If Applicable) and one electronic .pdf version (which can be emailed directly to us).
Footing Detail – Required for pole and monument signs. Please indicate size and depth of
footing(s); rebar size(s) and location(s); and strength of concrete to be used.

Attachment Detail – Required for all mounted signs. Please indicate size(s), type(s), quantities

illumination for signs is not included in the overall lumen calculations.

Note: External lights must be fully shielded and observe all aspects of Outdoor Lighting per Part 4 Section 405 of the Planning & Zoning Ordinance. Internal

☐ A-Frame Signs are only allowed on private property; only one per business.
Sign Application Fee will be collected upon submittal of the application in accordance with the current adopted fee schedule. Please note additional fees will apply for review of footing, attachment, and electrical plans.
Please Note: Submittal of an application does not constitute a complete application until the application is verified as complete and confirmation has been given by the Planning & Zoning Division to the applicant verbally.
AN INCOMPLETE APPLICATION <u>WILL</u> CAUSE YOUR PERMIT TO BE DELAYED



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Community Development

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PERMIT NUMBER:	

### APPLICATION FOR PERMIT

TIME/DATE STAMP:

OFFICIAL USE ONLY:

PROJECT INFORMATION:					
TROJECT INTORMATION.					
PROJECT TYPE: ☐ RESIDENTIAL ☐ COMMERCIAL ☐ ADDITION ☐ ALTERATION/REMODELING ☐ DEMOLITION ☐ NEW ☐ OTHER					
DESCRIPTION OF PROJECT:VALUATION: \$					
HAS CONSTRUCTION STARTED ON THIS PROPERTY: ☐ YES ☐ NO SQUARE/LINEAR FOOTAGE: BLDG HEIGHT:					
PROPERTY INFORMATION:					
PARCEL NUMBER: PHYSICAL ADDRESS:					
□ PROPANE □ NATURAL GAS					
SANITATION SERVICE PROVIDED BY:					
□ CAMP VERDE WASTE WATER (SEWER) PERMIT # □ SEPTIC SYSTEM PERMIT #					
Note: Sewer connection permits must be obtained directly from the Camp Verde Waster Water Division. Please contact the Waste Water Division at (928) 567-6794. Septic permits must be obtained directly from Yavapai County Development Services. Please contact Yavapai County at (928) 639-8151 or www.yavapai.us.					
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: (					
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 time of application submittal.					
APPLICANT INFORMATION:					
$\square$ OWNER $\square$ TENANT $\square$ AGENT $\square$ CONTRACTOR $\square$ 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 following Designation of Agent clause must be signed by the property owner:					
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, which will require the filing, processing, and payment of certain zoning, construction and inspection permits and reports, both from the Town and related agencies, and WHEREAS, the 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 to pay fees and consent to inspections, NOW THEREFORE, the undersigned owner hereby designates:					
, whose address is:, as agent to file the permit applications and related documents with the Town of Camp Verde, with such authority to continue until the application process is complete or as may be earlier revoked in writing.					
OWNER NAME: SIGNATURE: DATE:					

#### **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	CURRENTLY A LICE	NSED CONTRACTOR:					
NAME:		C	OMPANY NAMI	B:			
ROC LICENSE NUMBER:		LICENSE CLA	SS:	TOWN BUSINESS LICE	TOWN BUSINESS LICENSE #:		
SIGNATURE:		TI	ΓLE:		DATE:		
	l contractors performing work with ain St. Ste. 102, Camp Verde, AZ 8		to obtain a Town Bu	ssiness License. Town Business Licenses can b	e obtained thr	ough the Clerk's O	ffice at
EXEN	IPTION FROM LICEN	NSING:					
I am exe	empt from Arizona Contractors'	License Laws on the basis of the licen	nse exemptions co	ontained in ARS §32-1121A, namely:			
	□ 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					of this project.	
	Other – (Please Specify):						
	using the following licensed co	permit and/or the total co		otion) does not apply to any construction and labor are \$1,000 or more.	ı project wh	ich requires a bu	nilding
GENER	AL CONTRACTOR	TOWN BUSINESS LICENSE	NUMBER	ROC LICENSE NUMBER	L	ICENSE CLASS	
ELECTRICAL CONTRACTOR TOWN BUSINESS LICENSE NUMBER ROC LICENSE NUMBER LICENSE NUMBER LICENSE NUMBER				ICENSE CLASS			
MECHANICAL CONTRACTOR TOWN BUSINESS LICENSE NUMBER ROC LICENSE NUMBER LICENSE NUMBER LICENSE NUMBER				ICENSE CLASS			
PLUMBING CONTRACTOR TOWN BUSINESS LICENSE NUMBER ROC LICENSE NUMBER LICENSE NUMBER LICENSE NUMBER					ICENSE CLASS		
NAME: DATE:					E:		
BUILI	DING CODE REQUIRI	EMENTS:				OFFICIAL U	ISE ONLY
	ERNATIONAL BUILDING CODE ERNATIONAL EXISTING BUILD			TIONAL ENERGY CONSERVATION CODE ( TIONAL FIRE CODE (IFC) & APPENDICES I		Building:	\$
2018 INT		E (IFGC) & APPENDICES A, B, C, D	2018 INTERNA	FIONAL PIRE CODE (IPC) & AITEMPICES I FIONAL MECHANICAL CODE (IMC) & APPENI FIONAL PLUMBING CODE (IPC) & APPENI	PENDIX A	Plan Review:	\$
2018 INT	ERNATIONAL RESIDENTIAL CO	ODE (IRC) & APPENDICES M, N, Q		TIONAL PLUMBING CODE (IPC) & APPENI TIONAL SWIMMING POOL AND SPA CODI		Engineering:	\$
TOWN CODE CHAPTER 7 – BUILDING  Note: Applicant assumes all responsibility for complying with any deed restrictions (CC&R's) that may apply to the property.						Fire:	\$
A TO THE THE TAX TO TH						Zoning:	\$
			,	DECLARE that I have examined and/or		Subtotal:	\$
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							\$
							¥
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						Total:	
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.					Deposit Receipt #:		
						Balance Due Rec	ceipt #:
NAME: DATE: DATE:					Application Tal	ken By:	

Sho exi line tha	OT PLAN SKETCH:  ow lot/parcel lines and dimensions, adjacent stree sting buildings including dimensions, all building s s, locations of incoming water yard lines and met affect placements, location and dimensions of ear perty.	etbacks and distances between build er, electric yard line and meter, ga	dings, location of septic tank and leach s lines and tanks, any terrain features
PA	RCEL NUMBER:	INDICATE NORTH	I: SCALE:
obt	E certify that the proposed construction will conform to ining approval. All structures (including fences, wal nage and any water course on or adjacent to the property	ls, and pads, correct setback distances	s, legal access and easements, cuts, fills,
NA	ME: S	SIGNATURE:	DATE: