



# Town of Camp Verde

## Community Development Department – Building Division

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

◆ Telephone: 928.554.0050 ◆ Fax: 928.567.7401 ◆

◆ [www.campverde.az.gov](http://www.campverde.az.gov) ◆

## FACTORY-BUILT BUILDING (FBB)/MANUFACTURED HOME PERMIT APPLICATION

Note: The Town of Camp Verde has an Intergovernmental Agreement (IGA) with the Arizona Department of Fire, Building and Life Safety, Office of Manufactured Housing (OMH) to enforce the installation standards of manufactured homes and factory-built buildings. All manufactured/modular homes must be installed by a licensed contractor.

In order to process a Factory-Built Building (FBB)/Manufactured Home permit application, the following information must be submitted:

- Completed Application Packet** - including project information, property information, property owner information, applicant information, designation of agent, contractor information, plot plan sketch, manufactured home installation information, lumens calculation sheet, and driveways/culvert application (if applicable).  
*Please Note: All contractors must have a valid OMH/ROC License and Town Issued Business License.*
- Copy of Certificate of Title**
- Soils Classification** - By A Geotechnical (Soils) Engineer
  - Required for all residential structures exceeding 500 sq. ft. Note: When required by the Building Official, a Soils Investigation Report shall be submitted if Soils Classification proves soil conditions necessitate such report.
- Two (2) Sets Of Construction Documents (Plans)**
  - Plans must be submitted on a minimum of 8 ½" x 11" and on a maximum of 36" x 48" size paper. Plans shall be legible and easy to read, and of sufficient clarity to indicate the location, nature and extent of the work proposed.
  - Cover Sheet** – Including The Following Information:
    - Contacts (Principal, Company Name, Address & Phone Number)
    - Parcel Number & Address
    - Owners Name, Address & Phone Number
    - Sheet Index
    - Project Data (Codes Referenced, Zoning, Use, Site Coverage, Occupancy, Building Height, Construction Type, Square Footages, Building Area, Setbacks, Sprinklers, etc.)
  - Site Plan** - Including An 8.5" x 11" Plot Plan Drawn To Scale Or Dimensioned Indicating The Following:
    - Assessor's Parcel Number and Project Address
    - Scale Used (May Be Engineer Or Architect's Scale)
    - 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.
- Floor Plan** –With All Rooms & Fixtures Labeled.

- Manufacturer's Installation Manual** – If Missing, Can Be Obtained By Contacting The Manufacturer Directly.
- Foundation Plan** – Manufactured/Modular Homes Requiring Engineered Foundations Due To Flood Zones, Or Soil Conditions Must Provide Foundation Plans That Have Been Stamped/Approved By The Arizona Department of Fire, Building and Life Safety, Office of Manufactured Housing (OMH) Prior To Application Submittal.
- Anchoring System** – Must Be An Approved Patented System Such As Minute Man Or Tie Down, & Must Be In Compliance With The Manufacturer's Installation Manual Or A Site-Specific Engineered Design Approved by OMH.
- Fees** will be collected upon submittal of application in accordance with the current adopted fee schedule.

**Note: 9-807. Mandated fire sprinklers in certain residences prohibited; exception; permit application format**

A. A municipality shall not adopt a code or ordinance or part of a uniform code or ordinance that prohibits a person or entity from choosing to install or equip or not install or equip fire sprinklers in a single family detached residence or any residential building that contains not more than two dwelling units. A municipality shall not impose any fine, penalty or other requirement on any person or entity for choosing to install or equip or not install or equip fire sprinklers in such a residence. This section does not apply to any code or ordinance that requires fire sprinklers in a residence and that was adopted before December 31, 2009.

**Note:** Additional Information May Be Required As Determined By The Building Official. A Separate Permit Will Be Required For All Deferred Submittal Items.

**AN INCOMPLETE APPLICATION WILL CAUSE YOUR PERMIT TO BE DELAYED**



Handicap Relay: 711 or Voice: 1-800-842-4681 TTD: 1-800-367-8939





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**OFFICIAL USE ONLY:**

PERMIT NUMBER: \_\_\_\_\_

TIME/DATE STAMP: \_\_\_\_\_

**APPLICATION FOR PERMIT**

**PROJECT INFORMATION:**

PROJECT TYPE:  RESIDENTIAL  COMMERCIAL  ADDITION  ALTERATION/REMODELING  DEMOLITION  NEW  OTHER

DESCRIPTION OF PROJECT: \_\_\_\_\_

HAS CONSTRUCTION STARTED ON THIS PROPERTY:  YES  NO SQUARE/LINEAR FOOTAGE: \_\_\_\_\_ VALUATION: \$ \_\_\_\_\_

**PROPERTY INFORMATION:**

PARCEL NUMBER: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ PHYSICAL ADDRESS: \_\_\_\_\_

**DITCH INFORMATION (IF APPLICABLE):**

DITCH NAME: \_\_\_\_\_ PROPOSED PROJECT'S DISTANCE FROM DITCH: \_\_\_\_\_

**SANITATION SERVICE PROVIDED BY:**

CAMP VERDE WASTE WATER DIVISION (SEWER)  SEPTIC SYSTEM - PERMIT NUMBER: \_\_\_\_\_

*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](http://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](http://www.azwater.gov).*

**PROPERTY OWNER INFORMATION:**

OWNER(S) NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ 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 time of application submittal.*

**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 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, mechanical, 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 LICENSED CONTRACTOR:**

NAME: \_\_\_\_\_ COMPANY NAME: \_\_\_\_\_  
 ROC LICENSE NUMBER: \_\_\_\_\_ LICENSE CLASS: \_\_\_\_\_ TOWN BUSINESS LICENSE #: \_\_\_\_\_  
 SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

Note: All contractors performing work within the Town of Camp Verde are required to obtain a Town Business License. Town Business Licenses can be obtained through the Clerk's Office at 473 S. Main St. Ste. 102, Camp Verde, AZ 86322.

**EXEMPTION FROM LICENSING:**

I am exempt from Arizona Contractors' License Laws on the basis of the license exemptions contained 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 this project.
- ARS §32-1121A.6 – I am the owner/developer of this property and I will contract with a licensed general contractor to provide all construction services. All contractors' names and license numbers will be included in all sales documents.
- Other – (Please Specify): \_\_\_\_\_

I understand that the exemption provided by ARS §32-1121A.14 (The Handyman Exemption) does not apply to any construction project which requires a building permit and/or the total cost of materials and labor are \$1,000 or more.

I will be using the following licensed contractors on this project:

GENERAL CONTRACTOR	TOWN BUSINESS LICENSE NUMBER	ROC LICENSE NUMBER	LICENSE CLASS
ELECTRICAL CONTRACTOR	TOWN BUSINESS LICENSE NUMBER	ROC LICENSE NUMBER	LICENSE CLASS
MECHANICAL CONTRACTOR	TOWN BUSINESS LICENSE NUMBER	ROC LICENSE NUMBER	LICENSE CLASS
PLUMBING CONTRACTOR	TOWN BUSINESS LICENSE NUMBER	ROC LICENSE NUMBER	LICENSE CLASS

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**BUILDING CODE REQUIREMENTS:**

2012 INTERNATIONAL BUILDING CODE (IBC) & APPENDIX J  
 2012 INTERNATIONAL EXISTING BUILDING CODE (IEBC)  
 2012 INTERNATIONAL FUEL GAS CODE (IFGC) & APPENDICES A, B, C, D  
 2011 NATIONAL ELECTRICAL CODE (NEC)  
 2012 INTERNATIONAL RESIDENTIAL CODE (IRC) & APPENDICES M, N, Q  
 TOWN CODE CHAPTER 7 – BUILDING

2012 INTERNATIONAL ENERGY CONSERVATION CODE (IECC)  
 2012 INTERNATIONAL FIRE CODE (IFC) & APPENDICES B, C, D  
 2012 INTERNATIONAL MECHANICAL CODE (IMC) & APPENDIX A  
 2012 INTERNATIONAL PLUMBING CODE (IPC) & APPENDIX F  
 2012 INTERNATIONAL SWIMMING POOL AND SPA CODE (ISPSC)

Note: Applicant assumes all responsibility for complying with any deed restrictions (CC&R's) that may apply to the property.

UNDER PENALTY OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY, I DECLARE that I have examined and/or made this 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 hereon 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 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.

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**OFFICIAL USE ONLY:**

Building:	\$
Plan Review:	\$
Engineering:	\$
Fire:	\$
Zoning:	\$
Total:	\$
Deposit Receipt #:	
Balance Due Receipt #:	
Type:	
Application Taken 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: \_\_\_\_\_

INDICATE NORTH:



SCALE: \_\_\_\_\_

I/WE certify that the proposed construction will conform to the dimensions and uses shown and that no changes will be made without first obtaining approval. All structures (including fences, walls and pads, correct setback distances, legal access and easements, cuts, fills, drainage and any water course on or adjacent to the property within twenty (20) feet of any proposed or existing structure has been indicated.

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**OFFICIAL USE ONLY:**

PERMIT NUMBER: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_



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## Factory-Built Building (FBB)/Manufactured Home Installation Information

<b>DESCRIPTION: (descripción)</b>		Unit Serial Number(s): (número de serie de la unidad)	Manufactured Date: (fecha de fabricación)	Size: (tamaño)
<b>INSTALLER INFORMATION: (información instalador)</b>				
Company Name: (nombre de empresa)		OMH License Number: (número de licencia)	Classification:	Phone Number: (número de teléfono)
Address: (Please Include City, State & Zip Code) (dirección)		E-Mail Address: (e - correo electrónico)		
<b>ACCESSORY INSTALLER'S INFORMATION: (información del instalador accesorio)</b>				
Company Name: (nombre de empresa)		OMH License Number: (número de licencia)	Classification:	Phone Number: (número de teléfono)
Address: (Please Include City, State & Zip Code) (dirección)		E-Mail Address: (e - correo electrónico)		
<b>DEALER INFORMATION: (información del distribuidor)</b>				
Company Name: (nombre de empresa)		OMH License Number: (número de licencia)	Classification:	Phone Number: (número de teléfono)
Address: (Please Include City, State & Zip Code) (dirección)		E-Mail Address: (e - correo electrónico)		
<b>ACCESSORY STRUCTURES LISTED ON CONTRACT:</b>		<b>SKIRTING:</b>	<b>UTILITIES:</b>	
<input type="checkbox"/> AC System or Cooler <input type="checkbox"/> Awning <input type="checkbox"/> Covered Deck/Patio/Porch <input type="checkbox"/> Uncovered Deck/Patio/Porch <input type="checkbox"/> Carport <input type="checkbox"/> Garage		<input type="checkbox"/> BLOCK (NON-BEARING) <input type="checkbox"/> BLOCK (LOAD BEARING/RETAINING) STATE APPROVED PLANS REQUIRED <input type="checkbox"/> VINYL <b>OTHER:</b> <input type="checkbox"/> LANDING/STEPS <input type="checkbox"/> GRADING (OVER 50 CUBIC YARDS)*	<input type="checkbox"/> GAS - NAT <input type="checkbox"/> GAS - LP <input type="checkbox"/> ELECTRIC (EXISTING) <input type="checkbox"/> ELECTRIC (NEW)* <input type="checkbox"/> SEPTIC SYSTEM <input type="checkbox"/> SEWER <input type="checkbox"/> CV WATER <input type="checkbox"/> VERDE/LAKES WATER <input type="checkbox"/> WELL	
* REQUIRES SEPARATE PERMIT				



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### Attention Building Permit Applicants:

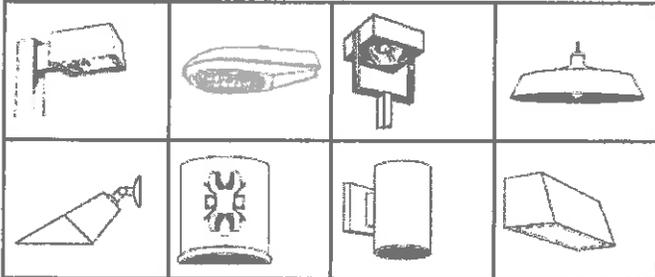
The Town of Camp Verde Community Development Department requires a lumen calculation sheet be submitted with all permit applications for new construction; for both residential and commercial development. To help you understand the information needed to fill out the form, we have included with your building permit application a graphic illustration of the differences between shielded and unshielded light fixtures as well as a lumens chart of different types of light bulbs. *Note:* You must use the maximum size bulb allowed by the manufacturer of the fixture to calculate your lumens. This information can be found on the fixture itself or its packaging material.

*When filling out the lumens calculation sheet please remember to include your existing outdoor lighting fixtures in addition to your proposed lighting fixtures.* Unshielded lights (all types) are limited to a maximum of 5,500 lumens per net acre. Residential parcels and development projects containing one net acre or less are allowed 5,500 lumens of unshielded light (all classes).

For more information on our lighting ordinance please visit our website at <http://www.campverde.az.gov> to view the most current version of the Planning and Zoning Ordinance (Section 405) or call the office of Community Development at (928) 554-0050. Thank you for helping us protect our dark skies and rural lifestyle!

### Fully Shielded Examples:

\* Note: To be fully shielded these fixtures must be closed on top and mounted such that the bottom opening is horizontal.



### Lumen Chart:

Incandescent (Standard) (INC)	
Wattage:	Lumen Output (Initial)
15	120
25	210
40	490
60	855
75	1180
100	1750
150	2800
200	3850

Tungsten Halogen (Quartz) (TH)	
Wattage:	Lumen Output (Initial)
75	1400
100	1800
150	2800
200	3600
250	5000
300	6000
500	10100

Induction Fluorescent (Sylvania Ictron) (IFL)	
Wattage:	Lumen Output (Initial)
70	6200
100	8000
150	12000

T12 Cool White Fluorescent (FL)	
Wattage:	Lumen Output (Initial)
21	1190
30	2050
36	2450
39	3000
50	3700
52	3900
55	4600
70	5400
75	6300

Low Pressure Sodium (LPS)	
Wattage:	Lumen Output (Initial)
18	1800
35	4800
55	8000
90	13500
135	22500
180	33000

High Pressure Sodium (Clear) (HPS)	
Wattage:	Lumen Output (Initial)
35	2250
50	4000
70	6300
100	9500
150	16000
200	22000
250	29000
310	37000
350	46500
400	50000
430	51500
1000	140000

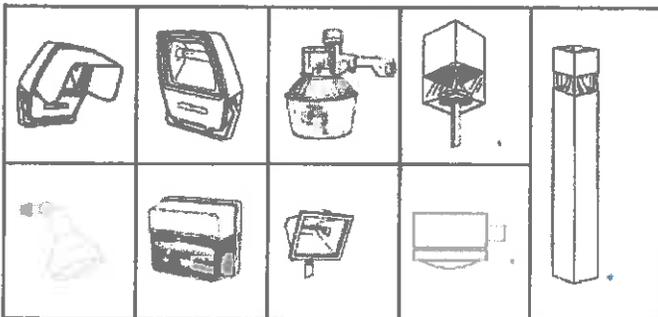
Standard Metal Halide (MH)	
Wattage:	Lumen Output (Initial)
100	8000
150	13500
175	15000
250	23000
360	36000
400	40000
1000	110000

Pulse Start Metal Halide (MH)	
Wattage:	Lumen Output (Initial)
50	3400
70	5600
100	9000
150	14000
175	17500
200	21000
250	25000
320	33000
350	37000
400	44000
450	50000
1000	110000

Light Emitting Diode (LED)	
Wattage:	Lumen Output (Initial)
63	3400
90	5400
140	9996
210	12300

### Unshielded Examples:

\* Note: Even though the lamp in these fixtures is shielded from direct view when viewed from the side or above, reflective surfaces and/or lens covers are directly visible from the side.



Handicap Relay: 711 or Voice: 1-800-842-4681 TTD: 1-800-367-8939





**DRIVEWAYS / CULVERT  
APPLICATION FOR PERMIT TO USE  
TOWN OF CAMP VERDE ROADS OR DEDICATED STREETS**

The undersigned herewith make application for a permit to enter in upon and use a portion of the right-of-way of the Town of Camp Verde roads or dedicated streets for the purpose of installing a driveway and/or driveway culvert.

**LOCATION OF WORK** \_\_\_\_\_

(parcel number and 911 street address if known)

FOR AND IN THE CONSIDERATION of the granting of a permit for the purpose set forth herein the Permittee hereby agrees, covenants and binds said Permittee as follows, to-wit:

**CONDITIONS**

1. That the permittee assumes the responsibility and all liability for any injury or damage to said highway, or to any person while using said highway in a lawful manner, caused by or arising out of the exercise of this permit.
2. **Maintenance of driveway and/or driveway culvert shall be the sole responsibility of the property owner and will in no way be responsibility of the Town of Camp Verde.** All work shall be at the sole cost and expense of the permittee and shall be done at such time and in some manner as to be the least inconvenient to the traveling public. No driveway will be approved which causes a hazard to the traveling public.
3. If at any time hereafter the right-of-way, or any portion thereof, occupied and used by the permittee may be needed or required by the Permittee, application may be revoked by the Permitter and all right thereunder terminated and upon sufficient notice, the Permittee shall and will remove all property belonging to said Permittee.
4. All culverts shall be set at the apparent flow line of the ditch. No construction done under this permit shall alter the existing characteristics of the roadway and/or the drainage ditch without prior permission from the Town of Camp Verde Engineer's office.
5. Permit shall be in effect for thirty (30) days from the date issued.
6. MISCELLANEOUS -
  - a. Any and all work performed within a Town right-of-way and/or a Town maintained road shall require a permit from the Town of Camp Verde engineer's Office and shall be subject to whatever inspections that shall be deemed necessary by the Town Engineer.
  - b. The Permittee shall replace all signs moved or damaged during construction.
  - c. During the course of work, the Permittee shall maintain the work area in a clean and orderly condition. When a hazardous condition is created to the traveling public, barricades or proper warning devices should be used. Excess excavation, debris, etc., will not be permitted to accumulate on the road surface of shoulders. Work shall progress in such a manner that no condition such as soft trenches, drop-offs from the edge of the pavement, etc., will exist. Upon completion of installation, the Permittee shall clean the pavement surface, pull and dress shoulders, and otherwise put in order the entire work area covered by the permit to the satisfaction of the Town Engineer or his representative.

IN WITNESS WHEREOF this application has been duly signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Name (Please Print): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

\_\_\_\_\_

Signature of Applicant

\*\*\*\*\*  
THIS APPLICATION IS APPROVED WITH THE FOLLOWING REQUIREMENTS:

\_\_\_\_\_ NCR - No culvert is required at this time. However, if in the future this road is improved,  
a culvert of the proper size will be required at the owner's expense.

\_\_\_\_\_ " (inside diameter) CMP 16-gauge culvert required.

\_\_\_\_\_ " (inside Diameter) CMP 16-gauge culvert or arch equivalent required.

\*\*\*\*\*

\_\_\_\_\_

\_\_\_\_\_

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DEPARTMENT OF FIRE, BUILDING AND LIFE SAFETY**

1110 WEST WASHINGTON, SUITE 100  
PHOENIX, ARIZONA 85007  
OFFICE 602-364-1003 FAX 602-364-1052

**UTILITY TESTING REPORT FORM**

Permit Number \_\_\_\_\_

Installation Address \_\_\_\_\_

Unit Manufacturer \_\_\_\_\_

HUD Number \_\_\_\_\_ Serial Number \_\_\_\_\_

Installer Name \_\_\_\_\_ License Number \_\_\_\_\_

Installation Certificate Number \_\_\_\_\_

Dealer Name \_\_\_\_\_ License Number \_\_\_\_\_

Dealer Address \_\_\_\_\_

**ALL TESTS SHALL COMPLY WITH 24 CFR §§ 3280 AND 3285**

**Note:**

Water -3285.603

Sewer -3285.604

Electric -3285.701

Gas -3285.605

WATER TEST 3280.612 \_\_\_\_\_

SEWER TEST 3280.612 \_\_\_\_\_

GAS TEST 3280.705 \_\_\_\_\_

ELECTRICAL TEST 3280.810 (b) \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**NOTES:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_