



TOWN OF CAMP VERDE
Community Development Department
Building Safety Division
473 S. Main St., Suite 108
Camp Verde, AZ 86322
Phone: (928) 554-0050 Fax: (928) 567-7401
Website: www.campverde.az.gov

BUILDING PERMIT APPLICATION

Tenant Improvement

TO ENSURE THE MOST EXPEDIENT PERMIT PROCESSING, APPLICANTS MUST RECEIVE APPROVAL FOR DEVELOPMENT STANDARDS REQUIREMENTS THROUGH THE PLANNING & ZONING DEPARTMENT AND PUBLIC WORKS DEPARTMENT, PRIOR TO SUBMITTING APPLICATIONS FOR CONSTRUCTION.

ITEMS REQUIRED TO SUBMIT PERMIT APPLICATION:

(Please initial or place a check mark in each box to verify completion of each item)

- Three (3) sets of plans must be submitted on a minimum of 18"x 24" and a maximum of 36"x 48" size paper at no less than 1/4" = 1' and details at 1/2" = 1' based on the currently adopted Codes:**
 - 2006 International Building; Plumbing and Mechanical; Fuel Gas; Energy Conservation and Existing Building Codes
 - 2005 National Electric Code
 - 2003 International Fire Code
- Cover sheet shall include**
 - Contacts (principal, company name, address and phone number)
 - Parcel number & Address
 - Owners name, address and phone number
 - Sheet index
 - Project data (codes referenced, zoning, use, site coverage, occupancy, building height, construction type, square footages, building area, setbacks, sprinklers etc.)
- Development Standards Approval Letter and Approved Site Plan OR**
- Site Plan** (including an 8.5" x 11" site plan to scale) showing the following:
 - Dimensions of property
 - Show all existing and proposed buildings and structures (actual footprints)
 - Show setbacks from all buildings/structures to all property lines, and between buildings/structures
 - Adjacent streets and alleys within 150' of property. Indicate width, length, turning radius and grade
 - Location and dimensions of easements that apply
 - Indicate front of property
 - Indicate north
 - Ingress/Egress driveway location
 - Delineate parking spaces and include ADA accessibility
 - Show calculations for number of parking spaces for type of use
 - Show landscaping area and list plants type and size @ 15% of parking area
 - Location of existing or proposed septic tank, leach line (include dimensions, size and setback or distance from proposed and existing building) sewer line, water line(s), fire hydrants, electric and any other utility lines.

- Location of any terrain features that affect placement including washes, creeks or ditches within 20 feet of the building site
 - Utility easements and lines
 - Topography both existing and proposed, contour lines shown in two foot increments
- **Architectural Plans** shall include and be designed by an Arizona Registered Design Professional, as applicable
 - Floor plan for each story showing square footages
 - Architectural details for fire resistive construction and penetrations
 - Accessibility requirements and emergency exit plan
 - Window, door and room finish schedules
 - Proposed uses
 - Fire wall location and type
- **Structural Plans and calculations** shall include and be designed and sealed by an Arizona Registered Design Professional
 - All structural components of the proposed work
 - Roof framing plan, wall section, details and calculations for all the above
 - Truss design drawings (with consideration for roof mounted equipment)
 - I-joint Include but not limited to the following: foundation plan, floor framing plan, systems with manufactures layout and engineering sheets
- **Mechanical Plans** shall include and be designed by an Arizona Registered Design Professional, as applicable
 - Complete mechanical system layout
 - Calculations and methods of meeting ventilation requirements
 - Details of equipment installation and condensation drains
 - Fire damper and penetration details
 - Kitchen hood system details
- **Plumbing Plans** shall include and be designed by an Arizona Registered Design Professional, as applicable
 - Complete layout for water, gas and drainage systems
 - Pipe sizing for all proposed systems
 - Isometric of waste, vent, hot/cold water, and gas systems
- **Electrical Plans** shall include and be designed by an Arizona Registered Design Professional, as applicable
 - Complete layout including location of the service and sub-panels
 - Details of any special systems
 - Load calculations, panel schedules and one-line diagram
- **Fire Alarm plans** shall include and be designed by an Arizona Registered Design Professional , as applicable (see attached Fire Department requirements)
- **Fire sprinkler plans** shall include and be designed by an Arizona Registered Design Professional, as applicable (see attached Fire Department requirements)
- **Commercial Kitchen Hood/Ansul System** if not submitted as part of the mechanical drawings an additional three sets of mechanical drawings are required (see attached Fire Department requirements)
- **Designation of Agent**, as applicable
- **Completed permit application**
- **Water & Sanitation form** (include well #'s and septic #'s if applicable. Building permits will not be issued until required approvals are acquired from Yavapai County and a Certificate of Occupancy will not be issued until a copy of the approval to operate (septic) or approval to discharge (sewer district) is received.
- **Contractor Information form** (must list appropriately licensed commercial contractors and subcontractors and all contractors must have a business license with the Town of Camp Verde)
- **Completed lumen calculation sheet for all outside lighting.**
- **Special Inspection Certificate** (as applicable)

- ❑ **Deposit** (Consists of civil, building and fire review fees calculated based on valuation of the project)
- ❑ **Note:** Additional information may be required as determined by the Building Official. A separate permit will be required for all tenant improvements.

APPROVALS REQUIRED BEFORE BUILDING PERMIT WILL BE ISSUED, AS APPLICABLE:

1. Camp Verde Planning & Zoning Department (Contact Planning Department for submittal requirements).
2. Camp Verde Building Department
3. Camp Verde Fire District
4. Yavapai County Flood Control District
5. Yavapai County Environmental Services
6. Yavapai County Health Services (Plans submitted directly)
7. Town of Camp Verde Engineer
8. Letter of Assurance from Water/Sewer providers (for properties within service areas; Plans submitted directly)
9. ADOT (Plans submitted directly)
10. ADEQ (Contact ADEQ for submittal requirements)

Note: Plans that do not meet the exception requirements of ARS§ 32-144 shall be designed and sealed by an Architect/Engineer licensed to practice in the State of Arizona. This shall include plans, calculations, and drawings including plumbing, mechanical and electrical in which one set will require an original wet seal.

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



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*Designation of Agent
Property Development*

Parcel Number: _____ Date: _____

Owner: _____

Address: _____

Phone: () _____ E-mail: _____

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 to _____, 200__, or the application process is complete, whichever is later, or as may be earlier revoked in writing.

_____,
_____, Owners (s)



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DATE
 RECV'D: _____

PERMIT
 NO. _____

APPLICATION FOR PERMIT

PROPERTY AND BUILDING INFORMATION

PARCEL NO: _____ LEGAL DESCRIPTION _____

PROJECT ADDRESS _____

DESCRIPTION OF PROJECT _____

HAS WORK COMMENCED ON THIS PROPERTY? _____ SQUARE FOOTAGE _____ APPLICANT'S VALUATION _____

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

PROPERTY OWNER INFORMATION

OWNER NAME _____

MAILING ADDRESS _____ CITY _____

STATE _____ ZIP _____ PHONE _____

Attention Applicant: If you are not the owner of this parcel, you must have something in writing from the owner granting you permission to take out this permit. Also, if you recently purchased this parcel you may have to show proof of ownership documentation.

APPLICANT OR CONTRACTOR INFORMATION

OWNER AGENT CONTRACTOR TENANT

APPLICANT NAME _____

MAILING ADDRESS _____ CITY _____

STATE _____ ZIP _____ PHONE _____

CONTRACTOR'S LICENSE # _____ CLASS _____ TOWN BUSINESS LICENSE # _____

THE FOLLOWING INFORMATION IS REQUIRED FOR COMMERCIAL, INDUSTRIAL, AND MULTI-FAMILY PROJECTS ONLY

PROPOSED USE _____ EXISTING USE _____

PROPOSED CONSTRUCTION TYPE WALLS: Combustible Non-Combustible ROOF STRUCTURE: Combustible Non-Combustible

EXISTING CONSTRUCTION TYPE WALLS: Combustible Non-Combustible ROOF STRUCTURE: Combustible Non-Combustible

IF THIS IS AN EXISTING BUILDING, DOES IT HAVE A FIRE SPRINKLER SYSTEM?: _____ FIRE ALARM SYSTEM?: _____

OCCUPANCY LOAD: _____ IBC OCCUPANCY TYPE: _____ IBC CONSTRUCTION TYPE: _____

CURRENT CODE REQUIREMENTS:

2006 INTERNATIONAL BUILDING CODE
 2005 NATIONAL ELECTRIC CODE
 2006 INTERNATIONAL MECHANICAL CODE
 2006 INTERNATIONAL PLUMBING CODE
 2006 INTERNATIONAL FUEL GAS CODE
 2006 INTERNATIONAL RESIDENTIAL CODE
 2003 INTERNATIONAL FIRE CODE
 2006 ENERGY CONSERVATION CODE
 2006 EXISTING BUILDING CODE

The 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 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 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.

OWNER APPLICANT

NAME (Printed) _____ SIGNATURE: _____

BUILDING		
ELECTRICAL		
PLUMBING		
ZONING CLEARANCE		
MECHANICAL		
POOLS		
FENCES		
DEPOSIT		
TOTAL		
RECEIPT#:		
CHECK #		
APPLICATION TAKEN BY:		

COMMERCIAL BUILDING CHECKLIST

- _____ Lighting in compliance with Town lighting ordinance
- _____ Parking requirements compliance
- _____ Use district compliance
- _____ Structure height and screening requirements
- _____ Hydrology study (if applicable)
- _____ Business license number
- _____ Sales tax number
- _____ Sign permit (if applicable)
- _____ Highway access approval (if applicable)

APPROVAL FROM OTHER AGENCIES (IF APPLICABLE)

- _____ Camp Verde Marshals Office
- _____ Camp Verde Fire Dept.
- _____ Camp Verde Streets Dept.
- _____ Camp Verde Town Engineer
- _____ Camp Verde Sanitary Dist.
- _____ Camp Verde Water Co.
- _____ A.P.S.

EXAMPLE: COMMERCIAL SITE PLAN

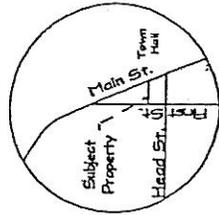
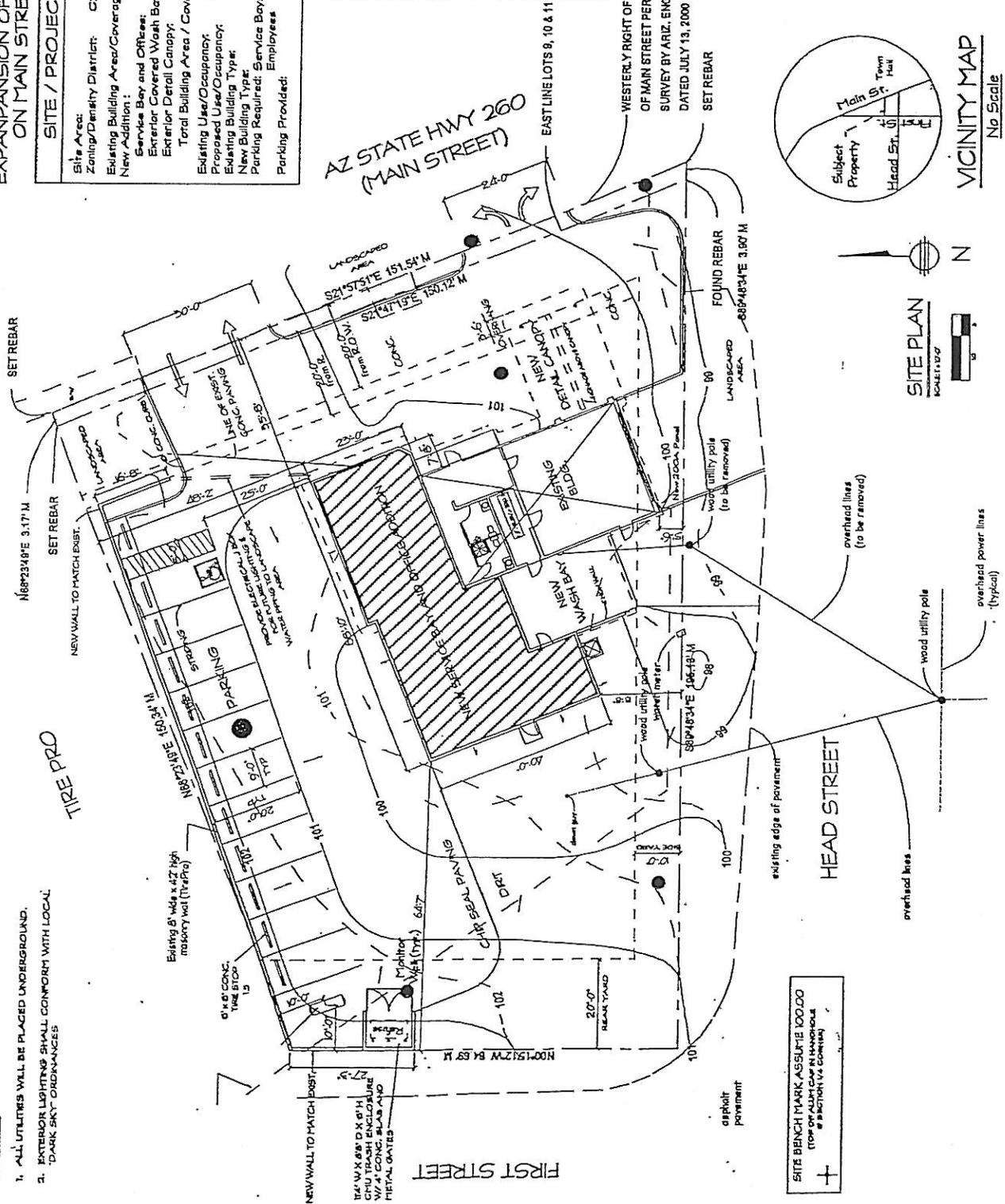
NOTES:

1. ALL UTILITIES WILL BE PLACED UNDERGROUND.
2. EXTERIOR LIGHTING SHALL CONFORM WITH LOCAL TANK SRT. ORDINANCES

EXPANSION OF 'MISTER WINDSHIELD' ON MAIN STREET, CAMP VERDE

SITE / PROJECT INFORMATION	
Site Area:	19,726 sq. ft. (-4.93 ac.)
Zoning/Density District:	C2-4 (Commercial-General Sales)
Existing Building Area/Coverage:	12,922 sq. ft. / 6.53%
New Addition:	19,328 sq. ft.
Service Bay and Offices:	451 sq. ft.
Exterior Covered Wash Bay:	527 sq. ft.
Exterior Detail Canopy:	2,916 sq. ft. / 14.8%
Total Building Area / Coverage:	
Existing Use/Occupancy:	S-3 Automotive Glass & Detail
Proposed Use/Occupancy:	S-3 Automotive Glass & Detail
Existing Building Type:	V-Non-rated
New Building Type:	V-Non-rated
Parking Required: Service Bays	4
Parking Provided: Employees	5
Parking Provided:	Total Required: 9
	12

SHEET INDEX	
S1	SITE PLAN
A1	FOUNDATION PLAN
A2	FLOOR PLAN AND GENERAL NOTES
A3	SCHEDULES AND SPECIFICATIONS
A4	EXTERIOR ELEVATIONS
A5	FRONTING PLAN
A6	ROOF PLAN
A7	REFLECTED CEILING PLAN
A8	BUILDING SECTIONS AND DETAILS
D1	DETAILS
E	ELECTRICAL PLAN
M	MECHANICAL PLAN



LEGAL DESCRIPTION
 LOT 9, 10 & 11
 OF BLOCK 10
 OF THE CAMP VERDE TOWNSITE
 BEING A PORTION
 OF SECTION 32
 T14N-R6E-G & BRW,
 YAVAPAI COUNTY, AZ

SITE PLAN
 SCALE: 1"=20'-0"



N

overhead lines
 (to be removed)

wood utility poles
 (typical)

overhead power lines
 (typical)

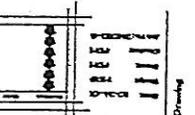
SITE BENCH MARK, ASSUME 100.00
 (TOP OF ALL UTILITY MARKERS
 IS 4' BELOW 1/4" CORNER)

RED MILLER ARCHITECT
 1076 E. BENTON AVENUE
 PHOENIX, AZ 85016
 PHONE (602) 624-6900 FAX (602) 624-5839



CASA VERDE CONSULTING
 PLANNING and DESIGN
 1076 E. BENTON AVENUE
 PHOENIX, AZ 85016

A BUILDING ADDITION FOR
 MISTER WINDSHIELD
 CAMP VERDE, ARIZONA



S1

TOWN OF CAMP VERDE
COMMUNITY DEVELOPMENT DEPARTMENT
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 20 feet of the property.

PERMIT #	ASSESSOR'S PARCEL #	ADDRESS

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 20 feet of any proposed or existing structure has been indicated.



INDICATE
NORTH

Scale: _____

Approved By: _____

Date: _____

Signature of Owner or Authorized Representative

Date

Memo

To: All building permit applicants
From: Town of Camp Verde Building Department
Date: November 1, 2007
Re: Fire Review and Inspection Fees

The Town of Camp Verde has entered into an Intergovernmental Agreement with the Camp Verde Fire District effective July 10, 2007. This agreement establishes a working relationship between the Town and the District, the District will provide plan review and inspection services for new commercial buildings being built in the Town, and the Town will collect the associated fees for these services. Attached is a fee schedule for your convenience.

If you have any questions regarding the Camp Verde Fire District fee schedule, please call Camp Verde Fire Department at (928) 567-9401.

Camp Verde Fire Department

26 W. Salt Mine Rd.

P.O. BOX 386 • CAMP VERDE, AZ 86322-0386

Phillip R. Harbeson Sr.
Fire Chief

BUSINESS 567-9401 • EMERGENCY 567-4123 OR 911

Jack E. Blum
Secretary-Treasurer

PERMIT FEE SCHEDULE

Section 1: Permit fees for new construction projects. The fees in this section will be collected as part of the building permit application process.

Permit Type	Plan Review Fee	Inspection Fee
New construction, additions and alterations.	35% of building permit Plan Review Fee \$20.00 for additional review after 2 nd review	\$25.00 for up to 3 inspections \$20.00 for re-inspection if not ready
Subdivision Plat Review	\$40.00	
Commercial Kitchen Exhaust Hoods	\$25.00	\$20.00 for re-inspection if not ready
Spray Booths	\$20.00	\$20.00 \$20.00 re-inspection fee if not ready
Fire Sprinkler System	\$40.00 (under 100 heads) \$60.00 (101-300 heads) \$100.00 (over 300 heads)	\$25.00 for up to 3 inspections \$20.00 for re-inspection if not ready
Fire Alarm System	\$40.00 (up to 50 devices)	\$25.00 for up to 3 inspections \$20.00 for re-inspection if not ready
Fire Pumps	\$20.00	\$25.00
Above Ground Tanks	\$20.00	\$20.00 for reinspection if not ready
Penalty for starting work without a Permit	Double the Permit Fee	
Special Request for Inspections after hours, on weekends, or on holidays	Per Hour \$40.00 (*Minimum fee paid in advance-2hrs)	



Camp Verde Fire Department

26 W. Salt Mine Rd.
P.O. BOX 386 • CAMP VERDE, AZ 86322-0386
BUSINESS 567-9401 • EMERGENCY 567-4123 OR 911

FIRE SPRINKLER PERMIT SUBMITTAL REQUIREMENTS

A fire sprinkler permit is required for the installation, addition or modification of any fire sprinkler system. Sprinkler systems shall comply with the International Fire Code and NFPA 13, 13R, 13D or other applicable standards.

Submit **3** sets of plans and **one** set of hydraulic calculations and manufacturer's data sheets for components of the system for review by the Fire Prevention Office.

Plans shall provide the following information:

- Business/Location Name and Street Address
- Property Owner/Rep Name and Contact Information
- Installation Contractor Contact Information and applicable License numbers
- Occupancy Classification(s), Building Construction Type
- Square footage of project area
- Number of risers
- System Type (Wet, dry, pre-action, deluge, antifreeze, etc.)
- Hazard Class
- Area of sprinkler operation and density
- Standpipes
- Scale, date of plans, any revision dates, point of compass, designer information including minimum NICET Level III certification information.
- Location of all wall partitions, firewalls, floor openings, concealed spaces, etc. Clearly label each area/room as to its use or title.
- Site/plot plan indicating location of roads, fire lanes, parking, and building orientation, hydrants, underground piping and location of thrust blocks and valves, and FDC's. Access roads, fire lanes, etc. shall have width dimensions and slope indicated on site plan.
- Information on any backflow preventers or double-check detectors required by water purveyor.
- System design data at each design area. Hydraulic reference points shown on the plan shall correspond with comparable reference on the hydraulic calculations.
- Include full height cross-section and elevations. Include ceiling construction.
- Indicate location and type of inspector test. Show all control valves, switches, and alarm/flow devices.
- Indicate all duct work, ceiling layouts, lighting, diffusers, etc. which may affect the system coverage.
- Show size, type, piping, drainage, location and elevation of: risers, drains, hose outlets, etc.
- Show settings for pressure reducing valves at all levels.
- Legend shall clearly indicate the sprinkler type, temperature, manufacturer, etc. of each head.
- Indicate spacing of sprinklers and number of sprinkler in each story or fire area.
- Indicate type and location of hangers, sleeves, flexible couplings, and braces. Provide location spacing, direction, and calculations on loads for sizing of sway bracing.
- Water flow data that includes date of test, name of parties involved in flow testing, static, residual and flow available.



Fire Sprinkler Permit Application

Section A, Site Information: Complete for all permits

Job Address: _____
Number and Street name, City/Town, Zip code

Name of Tenant: _____
 (if business)

Owner Name: _____

Owner Address: _____ Zip Code: _____

Owner Phone Number: () _____

Section B, Project Information: Complete for all permits.

Indicate what the permit is being obtained for below, check all that apply:

New System Installation Renovation/Alteration of Existing System

Type of System: Hazard Classification

Wet Dry Other _____ Light OH I OH II Extra Hazard

General Type of Installation Number of Risers _____

Above Ceiling Below Ceiling Obstructed Unobstructed

Description of project: _____

Section C, Building Information: Complete for all permits: new construction, renovation, alterations.

Occupancy Classification: _____ Number of Stories: _____

Square Footage: _____ Number of floors: _____

Section D, Applicant, Project Contractor/Designer Information:

Sprinkler Contractor: _____
Name Address Phone

Fire Protection Engineer/Nicet III Info: _____
Name Address Phone

Applicant Name:	Address:	Phone:
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I hereby certify that the information contained within this application is correct and accurate.

Signature of Applicant: _____ Date: _____



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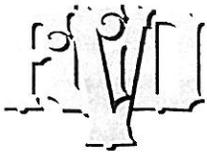
FIRE ALARM PERMIT SUBMITTAL REQUIREMENTS

A fire alarm permit is required for the installation, addition or modification of any fire alarm system. Alarm systems shall comply with the International Fire Code and NFPA 72 or other applicable standards.

Submit **3** sets of plans and **one** set of battery/voltage drop calculations and manufacturer's data sheets for components of the system for review by the Fire Prevention Office.

Plans shall provide the following information:

- Business/Location Name and Street Address
- Property Owner/Rep Name and Contact Information
- Installation Contractor Contact Information and applicable License numbers
- Monitoring Company Contact Information and applicable License numbers
- Scale, date of plans, any revision dates, point of compass, designer information including minimum NICET Level III certification information and stamp
- Occupancy Classification(s), Building Construction Type and Hazard Type
- Square footage of project area
- All devices and appliances (detectors, pull stations, control panel, annunciators etc.)
- System Type (Class A, B, addressable, analog, local, proprietary, etc.)
- Battery/voltage drop calculations
- Manufacturer's data sheets and compatibility listings
- Operating instructions for the system (Copy of what will be posted at the FACP).
- Plans shall include floor plan of entire building, location and spacing of all detectors and notification devices, wiring legend and symbol list.
- Include full height cross-section and elevations. Include ceiling construction.



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 BUSINESS 567-9401 • EMERGENCY 567-4123 OR 911

Fire Alarm Permit Application

Section A, Site Information: Complete for all permits

Job Address: _____
Number and Street name, City/Town, Zip code

Name of Tenant: _____
 (if business)

Owner Name: _____

Owner Address: _____ Zip Code: _____

Owner Phone Number: () _____

Section B, Project Information: Complete for all permits.

Occupancy Classification: _____ Number of Stories: _____ Square footage: _____

New System Installation Renovation/Alteration of Existing System

Signal Initiating Devices	Quantity
Detectors (heat, smoke, rate of rise, etc.)	
Manual Pull Stations	
Tamper Switches	
Water Flow Switches	
Other (FF phones, UL/Ansul systems, etc.)	
Notification Devices	Quantity
Horns, strobes, combination devices, speakers, etc.	
Items Controlled by Alarm	Quantity
Fan shutdown/start	
Elevator recall/shutdown	
Door closure devices	
Fire alarm control panel, annunciators	

Section D, Applicant, Project Contractor/Designer Information:

Installing Contractor:

Name _____ Address _____ Phone _____

Designer/Nicet III Info:

Name _____ Address _____ Phone _____

Applicant Name:	Address:	Phone

I hereby certify that the information contained within this application is correct and accurate.

Signature of Applicant: _____ **Date:** _____



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Hood & Extinguishing System Permit Application

PLEASE PRINT

Section A, Site Information: *Attention: Sections A, B & D (and C when applicable) must be completely filled out for all projects.*

Name of Building/Site: _____

Physical Location: _____

Applicant Information: _____

Building Owner Name: _____

Owner Mailing Address: _____ Zip Code _____

Owner Phone Number: () _____

Section B, Project Information: *Complete for all Hood installations.*

Size of Hood: Length	Width	Size of Duct:
Total Square Feet of Hood opening:		Sq. Feet of Duct:
Filter Size:	Sq Inches Per Filter:	Fan CFM:
Total Number of Filters:		Calculated Duct Velocity:
Is hood mounted on a combustible surface: <input type="checkbox"/> YES <input type="checkbox"/> NO		Hood Construction: <input type="checkbox"/> No. 18ga. Carbon Steel (Check one) <input type="checkbox"/> No. 20ga. Stainless Steel
If <u>Yes</u> , indicate clearance provided: inches Indicate on plan if necessary.		Duct Construction: <input type="checkbox"/> No. 16ga. Carbon Steel (Check one) <input type="checkbox"/> No. 18ga. Stainless Steel

Section C, Automatic Fire Suppression Systems: *Complete for all Suppression System installations.*

Name of Installer: _____

Agent Type: Wet Chemical Other: _____

System Make: _____ System Model: _____

Kitchen Hood, where installed is provided with a portable fire extinguisher rated 40B: Yes No N/A

This application must be accompanied by the following:

- Drawing of coverage area to include all appliances/equipment, piping and device locations.
- Manufacturer's specifications and information.

Signature of Applicant: _____ Date: _____



TOWN OF CAMP VERDE
Community Development Department
473 S. Main Street, Suite 108
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UTILITIES INFORMATION FORM

NAME: _____ DATE: _____

PARCEL NO.: _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____

PHONE NO.: _____

SANITATION SERVICE PROVIDED BY:

CAMP VERDE SANITARY DISTRICT (SEWER) _____

SEPTIC TANK PERMIT NO: _____

.....
WATER SERVICE PROVIDED BY:

CAMP VERDE WATER COMPANY _____

VERDE LAKES WATER COMPANY _____

WELL NO.: _____

.....
DITCH INFORMATION:

THE ABOVE DESCRIBED PROPERTY IS SET BACK _____ (DISTANCE) FROM THE
_____ DITCH. **OR** _____ NOT LOCATED CLOSE TO AN IRRIGATION DITCH.

.....
CAMP VERDE SANITARY DISTRICT:

SEWER HOOK-UP PERMITS MUST BE OBTAINED FROM THE SANITARY DISTRICT AND A SEPARATE SET OF PLANS MUST BE SUBMITTED TO THE SANITARY DISTRICT.

BELOW INFORMATION TO BE FILLED OUT BY SANITARY DISTRICT

_____ IS LOCATED WITHIN THE SANITARY DISTRICT AND IS PRESENTLY CONNECTED TO AND SERVED BY THE SEWER.

_____ IS LOCATED WITHIN THE SANITARY DISTRICT AND REQUIRED TO BE CONNECTED TO AND SERVED BY THE SEWER.
PERMIT ISSUED ON _____.

_____ IS LOCATED WITHIN THE SANITARY DISTRICT BUT IS NOT WITHIN AN AREA PRESENTLY SERVED BY THE DISTRICT.

_____ IS NOT WITHIN CAMP VERDE SANITARY DISTRICT.

SANITARY DISTRICT REP. SIGNATURE X _____

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 this chapter with the applicant's license number and the applicant's privilege license number required pursuant to 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 section 13-2704.

I am currently a licensed contractor: Name _____

License No. ROC _____ License Class _____

Signature _____ Title: _____

EXEMPTION FROM LICENSING

I am exempt from Arizona contractors' license laws on the basis of the license exemptions contained in A.R.S. §32-1121A, namely:

- A.R.S. §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.
- A.R.S. §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 A.R.S. §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 \$1000 or more.

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

_____ License No. ROC _____ Class _____
(General Contractor)

_____ License No. ROC _____ Class _____
(Mechanical Contractor)

_____ License No. ROC _____ Class _____
(Electrical Contractor)

_____ License No. ROC _____ Class _____
(Plumbing Contractor)

SIGNATURE _____ DATE _____

Falsification of information on this document for the purpose of evading State licensing laws is a Class II misdemeanor pursuant to A.R.S. §13-2704.



Attention Building Permit Applicant:

The Town of Camp Verde Building Department is now requiring that a lighting permit and 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 and a lumens calculation sheet of different types of light bulbs. You must use the maximum size bulb allowed by the manufacture of the lamp to figure your lumens. This will be found on the lamp itself or on the packing material.

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 you may visit our website at www.campverde.az.gov and look at the Planning & Zoning Ordinance Section 405 or call the Planning & Zoning office at 928.554-0050 and staff will answer any of your questions.

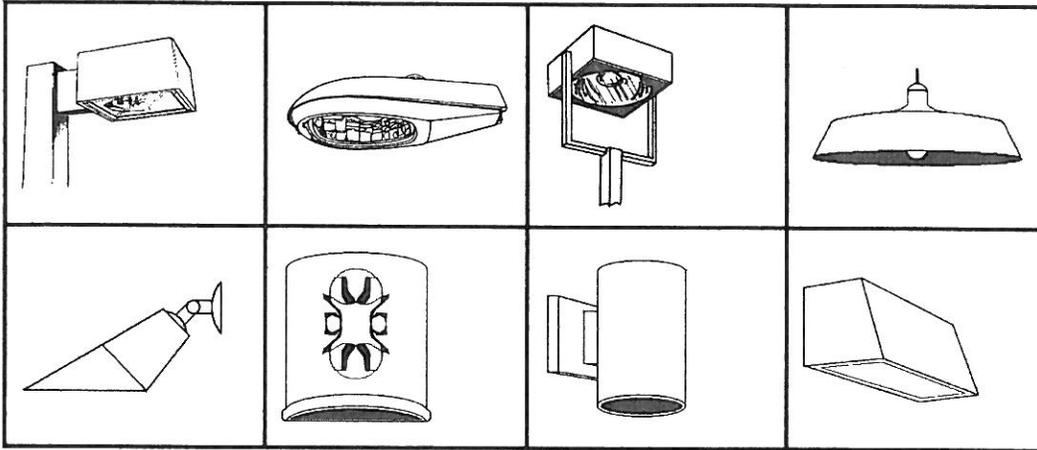
Please help us protect our dark skies and rural lifestyle.

The Community Development Department
Town of Camp Verde, Arizona

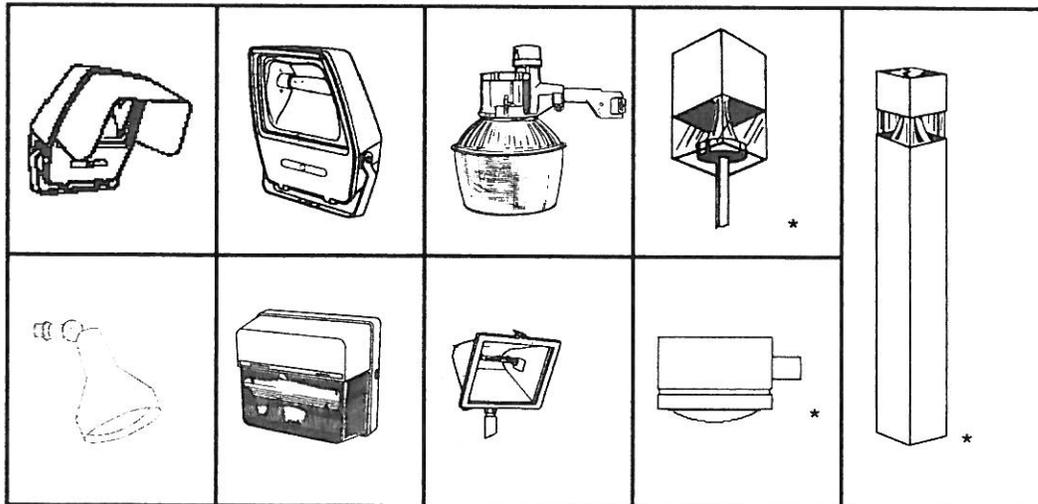
1. Shielding:

A practical working way to determine if a fixture or tube is fully shielded: if the lamp or tube, any reflective surface, or lens cover (clear or prismatic) is visible when viewed from above or directly from the side, or from any angle around the fixture or tube, the fixture or tube *is not* fully shielded.

Examples of fixtures that are Fully Shielded (Note: to be fully shielded these fixtures must be closed on top and mounted such that the bottom opening is horizontal):



Examples of fixtures that are NOT Fully Shielded:



* 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.

Note for luminous (neon) tubes: when such lighting is installed under or behind a roof overhang, if the roof-line or eave is not horizontal the tubing may be visible from above when viewed from the side and therefore be unshielded.

Lamp Type	Lumen Output (Initial)
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**Low Pressure Sodium
(LPS):**

18 Watt	1800
35 Watt	4800
55 Watt	8000
90 Watt	13500
135 Watt	22500
180 Watt	33000

**High Pressure Sodium
(HPS):**

35 Watt Clear	2250
50 Watt Clear	4000
70 Watt Clear	6300
100 Watt Clear	9500
150 Watt Clear	16000
200 Watt Clear	22000
250 Watt Clear	29000
400 Watt Clear	50000
1000 Watt Clear	140000

**Metal Halide (MH)
(Example Sylvania
'Metalarc' series):**

100 Watt	8000
175 Watt	14000
250 Watt	16000
400 Watt	36000
1000 Watt	84000

**Fluorescent (Standard
Cool-White, 1.5-inch
tubes):**

21 Watt F24T12/CW	1190
30 Watt F36T12/CW	2050
36 Watt F42T12/CW	2450
39 Watt F48T12/CW	3000

50 Watt F60T12/CW	3700
52 Watt F64T12/CW	3900
55 Watt F72T12/CW	4600
70 Watt F84T12/CW	5400
75 Watt F96T12/CW	6300

Incandescent Lights:

15 Watt Standard	120
25 Watt Standard	210
40 Watt Standard	490
60 Watt Standard	855
75 Watt Standard	1180
100 Watt Standard	1750
150 Watt Standard	2800
200 Watt Standard	3850

**Tungsten Halogen
(Quartz):**

75 Watt	1400
100Watt	1800
150 Watt	2800
250 Watt	5000
500 Watt	10100



Town of Camp Verde

Phone: (928) 554-0050

Fax: (928) 567-7401

Community Development

473 S. Main Street, Suite 108/109

Camp Verde, AZ 86322

Special Structural Inspections Certificate

TO BE COMPLETED BY ENGINEER/ARCHITECT RESPONSIBLE FOR SPECIAL INSPECTIONS

PERMIT #	PROJECT NAME	PROJECT ADDRESS
PARCEL #		
PROJECT OWNER/OWNERS AGENT	MAILING ADDRESS	PHONE #
ENGINEER/ARCHITECT NAME	MAILING ADDRESS	PHONE #
FIRM NAME	EMAIL ADDRESS	FAX #

I hereby affirm that I am familiar with the design of this project and have been designated by the Owner/Owner's Agent as the Engineer/Architect responsible for implementing the Special Structural Inspections Program required by the 2006 International Building Code, Chapter 17. I have determined that the types of work checked below require Special Structural Inspection and the individuals(s) or firm(s) named below are qualified to perform the Special Inspections. I understand and agree to inform the project owner, the contractor(s), and the Special Inspector(s) about all Special Inspection Program requirements and limitations, including that the Special Inspector(s) must be independent third-party individual(s) or firm(s) and shall not be the installing contractor(s).

(Seal, sign and date)

YES	NO	TYPES OF WORK REQUIRING SPECIAL STRUCTURAL INSPECTION (ATTACH SUPPLEMENT IF NECESSARY)	QUALIFIED SPECIAL INSPECTOR, INDIVIDUAL(S) OR FIRM(S) (ATTACH SUPPLEMENTAL IF NECESSARY)
		CONCRETE	
		BOLTS INTALLED IN CONCRETE	
		SPECIAL MOMENT-RESISTING CONCRETE FRAME	
		REINFORCING STEEL AND PRE-STRESSING STEEL TENDONS	
		STRUCTURAL WELDING	
		HIGH-STRENGTH BOLTING	
		STRUCTURAL MASONRY	
		EXPANSION/EPOXY ANCHORS	
		SOILS	
		COMPACTION	
		OTHER (PLEASE SPECIFY)	

BUILDING OFFICIAL'S APPROVAL OF PROPOSAL OF SPECIAL INSPECTION:

BUILDING OFFICIAL: _____ **DATE:** _____

OWNER CERTIFICATION:

I hereby certify that I will employ the aforementioned Special Inspector to perform the inspections shown above.

OWNER/owner applicant: _____ **DATE:** _____

NOTES: Special Inspection weekly reports must be submitted to the owner and to the Building Official within 5 working days of the last day of the week being reported to avoid suspension of the building permit and possible Stop Work Order. A monthly summary letter is required for overall status including any outstanding items that require follow-up. The final special inspection approval letter(s) must be submitted before use or occupancy. Any variation to the special inspection proposal requires prior approval of the Building Official.