Town of Camp Verde

Community Development Department – Building Division

♦ 473 S. Main Street, Suite 108 ♦ Camp Verde, Arizona 86322 ♦
♦ Telephone: 928.554.0050 ♦ www.campverde.az.gov ♦

RESIDENTIAL DEMO PERMIT APPLICATION

Note: Prior to the commencement of demolition or a renovation activity of a ***regulated facility***, permit applicants must notify the Arizona Department of Environmental Quality. For your convenience the Asbestos NESHAP Notification Forms for Renovation and Demolition Activities has been included with this application packet. Please refer to the included packet for specific notification requirements. For additional information please contact the Arizona Department of Environmental Quality at (602) 771-2333 or (602) 771-4553.

In order to process a residential demolition 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, and plot plan sketch.
  Please Note: All contractors must have a valid ROC License and Town Issued Business License.

- ☐ **Detailed 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)
  - ☐ Direction of North
  - ☐ Parcel Diagram (Including Property Lines and Dimensions)
    - ☐ Label front of property.
    - ☐ Label adjacent streets or alleys.
    - ☐ Indicate ingress/egress (driveway locations).
    - ☐ Indicate the location and distance of all utilities including propane tanks, septic system, leach lines, and well.
    - ☐ Indicate the location and dimensions of all existing structures.
    - ☐ Indicate the structure(s) or portion(s) of structure(s) to be demolished.
- ☐ **Fees** will be collected upon submittal of application in accordance with the current adopted fee schedule.

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

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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:_____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:_____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:

2018 INTERNATIONAL BUILDING CODE (IBC) & APPENDIX J
2018 INTERNATIONAL EXISTING BUILDING CODE (IEBC)
2018 INTERNATIONAL FUEL GAS CODE (IFGC) & APPENDICES A, B, C, D
2017 NATIONAL ELECTRICAL CODE (NEC)
2018 INTERNATIONAL RESIDENTIAL CODE (IRC) & APPENDICES M, N, Q
TOWN CODE CHAPTER 7 – BUILDING
2018 INTERNATIONAL ENERGY CONSERVATION CODE (IECC)
2018 INTERNATIONAL FIRE CODE (IFC) & APPENDICES B, C, D
2018 INTERNATIONAL MECHANICAL CODE (IMC) & APPENDIX A
2018 INTERNATIONAL PLUMBING CODE (IPC) & APPENDIX F
2018 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 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.

NAME: _____ SIGNATURE: _____ DATE: _____

OFFICIAL USE ONLY:

Building:	**$**
Plan Review:	**$**
Engineering:	**$**
Fire:	**$**
Zoning:	**$**
Subtotal:	**$**
3% Tech Fee:	**$**
Total:	
Deposit Receipt #:	
Balance Due Receipt #:	
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: SELECT 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: _____