



# 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](http://www.campverde.az.gov) ◆

## COMMERCIAL PERMIT APPLICATION

Note: To ensure the most expedient permit processing, commercial applicants must receive approval for Development Standards Requirements through the Planning & Zoning Department prior to submitting an application for construction. 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 (1) set will require an original wet seal.

**In order to process a commercial tenant improvement 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 and *if applicable*, request for temporary electric service, lumens calculation sheet, soils classification, special structural inspections certificate, driveways/culvert application, fire alarm permit application, fire sprinkler permit application, hood and extinguishing system permit application, solar photovoltaic permit application, above ground storage tank permit application and ADEQ Asbestos NESHAP packet.
  - **Please Note: All contractors must have a valid ROC License and Town Issued Business License.**
- Development Standards Approval Letter and Approved Site Plan** – If Applicable.
- One (1) Electronic PDF Set Of Construction Documents (Plans)**
- Five (5) Sets Of Construction Documents (Plans)** – One (1) Set with Original Wet Seal
  - Plans must be submitted on a minimum of 18" x 24" and a maximum of 36" x 48" size paper at no less than ¼" = 1' and details at ½" = 1'. Plans, including calculations 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 within 150' of property. Indicate width, length, turning radius and grade.
      - Indicate location and dimensions of easements that apply with proof of legal access.
      - Indicate ingress/egress (driveway locations).
      - Indicate topography, both existing and proposed, with contour lines shown in two (2) foot increments.
      - Indicate the location of any terrain features that affect placements including washes, creeks or ditches within twenty (20) feet of the building site.
      - Indicate all existing and proposed buildings and structures (actual footprints).
      - Indicate dimension and setbacks of all buildings to property lines and between new and existing structures.
      - Indicate utility easements and lines.
      - Indicate location of existing or proposed septic tank and leach lines, sewer line(s), water line(s), fire hydrant(s), electric and any other utility lines (including dimensions, size and setback or distance from proposed building).
      - Indicate location of well (if applicable).
      - Indicate location of propane tanks (including dimensions, size and setback or distance from proposed building, if applicable).
      - Delineate parking spaces and include ADA accessibility.
      - Show calculations for number of required parking spaces for type of use.
      - Indicate areas to be landscaped (15% of parking area) and list plant types and size.
  - Civil Plans** – Shall include and be designed and sealed by an Arizona Registered Design Professional.
    - Storm Water Pollution Prevention Plan and Notice of Intent (NOI) Authorization (if applicable).
    - Paving, Grading and Drainage Plan.
    - Four (4) Copies of Bound Drainage Reports.
    - Water and Sewer Plans.
    - Utility Locations and Connections.

- ❑ Sealed Engineers cost estimate for off-site improvements to include a 10% contingency to be approved by the Town Engineer.
  - ❑ Notarized Bond for off-site improvements with additional 20% contingency of Engineer's total cost estimate, to be approved by Town Attorney.
- ❑ **Architectural Plans** – Shall Include and Be Designed and Sealed by an Arizona Registered Design Professional (As Applicable).
  - ❑ Floor plan for each story showing square footage.
  - ❑ 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.
  - ❑ All four building elevations shall be provided for the exterior showing relation to existing and proposed grade and exterior coverings.
- ❑ **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 manufacturer's layout and engineering sheets.
- ❑ **Mechanical Plans** – Shall Include and Be Designed and Sealed 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 and Sealed 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 and Sealed 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 and Sealed by an Arizona Registered Design Professional (As Applicable).
  - ❑ **Fire Sprinkler Plans** – Shall Include and Be Designed and Sealed by an Arizona Registered Design Professional (As Applicable).
  - ❑ **Commercial Kitchen Hood/Ansul System Plans** – If Not Submitted As Part Of The Mechanical Drawings An Additional Three (3) Sets Of Mechanical Drawings Are Required.
- ❑ **Two (2) Copies of Engineered Soils Report** – One (1) Copy Provided Must Be Original Wet Seal.
- ❑ **ADEQ Asbestos Demolition and Renovation Activities NESHAP Notification Form** – If Applicable.
  - ❑ Copies of any testing and abatement information to be conducted at the project site.
- ❑ **Deposit** 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**

Please Note: The Following Approvals May Be Required Before A Commercial Building Permit Is Issued:

Camp Verde Building Department - Camp Verde Planning & Zoning Department - Camp Verde Public Works Department - Camp Verde Waste Water Division  
 Camp Verde Fire District - Yavapai County Environmental Services - Yavapai County Flood Control - Yavapai County Health Services – (Submit Plans Directly To  
 Yavapai County For Approval) - Arizona Department of Transportation – ADOT (Submit Plans Directly To ADOT For Approval)  
 Arizona Department of Environmental Quality – ADEQ (Submit Plans Directly To ADEQ For Approval)



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: \_\_\_\_\_ VALUATION: \$ \_\_\_\_\_

HAS CONSTRUCTION STARTED ON THIS PROPERTY:  YES  NO SQUARE/LINEAR FOOTAGE: \_\_\_\_\_ BLDG HEIGHT: \_\_\_\_\_

**PROPERTY INFORMATION:**

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

DITCH INFORMATION (IF APPLICABLE):

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

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](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 CONTRACOR:**

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 (ISPSA)

*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:	\$
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: \_\_\_\_\_

**REQUEST FOR SOILS CLASSIFICATION WAIVER:**

Section 1803.1 of the 2018 International Building Code (IBC), and Section R401.4 of the 2018 International Residential Code (IRC) requires the soil at each construction site to be classified and the bearing capacity to be determined by soils analysis. These determinations are required to be made by a licensed architect or engineer. In lieu of the above, for **RESIDENTIAL, NON-HABITABLE, ACCESSORY STRUCTURES OF 500 SQUARE FEET OR LESS ONLY**, the owner of the property or his/her agent may attest to the on-site soil conditions and agree to follow minimum Town standards as required by the International Residential Code (IRC). Although the Town allows for a request of waiver, the Town is not obligated to grant the waiver.

I, \_\_\_\_\_, being the owner or duly authorized representative of the owner of the property located at:

\_\_\_\_\_, parcel number \_\_\_\_\_, hereby request the requirements of the International Code Council (ICC) Code relative to soils reports be waived for the following reasons:

- No Fill On Site
- Existing Structures Have No Foundation Problems
- No Expansive Soil On Site
- Existing Soil Will Be Removed And Replaces With Engineered Fill
- Undisturbed Soil
- Footings Will Extend Through Fill And Into Undisturbed Soil To The Required Depth
- Other
- Soils Have Been Classified By An Arizona Architect Or Engineer Who Has Designed The Foundation System

I/We agree to abide by an additional requirements the Town may impose as a condition of granting this request, or alternatively, I/We will exercise the option to retain an Arizona Registered Civil Engineer in the private sector to submit an alternative design for review and approval.

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

**FOR OFFICIAL USE ONLY:**

- WAIVER REQUEST GRANTED BASED ON THE DESIGN SUBMITTED AS SHOWN ON PLANS**
- WAIVER REQUEST DENIED**

Your request for waiver of a soils classification/soils investigation report cannot be granted for this project. USDA Survey Maps indicate problem soil conditions in the immediate area. A soils classification by an Arizona Registered Civil Engineer or a Geotechnical Soils Engineer will be required.

DEPARTMENT AUTHORIZATION: \_\_\_\_\_ DATE: \_\_\_\_\_

**REQUEST FOR TEMPORARY ELECTRIC SERVICE:**

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

I, \_\_\_\_\_, by signing this request hereby understand that the issuance of this request for temporary electric service for the address listed above does not constitute the right to occupy said premise without final inspection and certificate of occupancy. A violation of this agreement may result in discontinuance of service.

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

**FOR OFFICIAL USE ONLY:**

- REQUEST FOR TEMPORARY ELECTRIC SERVICE GRANTED**
  - REQUEST FOR TEMPORARY ELECTRIC SERVICE DENIED**
- Your request for temporary electric service cannot be granted for this project.

Reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DEPARTMENT AUTHORIZATION: \_\_\_\_\_ DATE: \_\_\_\_\_



# Town of Camp Verde

## Community Development Department – Building Division

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 ◆ Telephone: 928.554.0050 ◆ [www.campverde.az.gov](http://www.campverde.az.gov) ◆

Attention Building Permit Applicants:

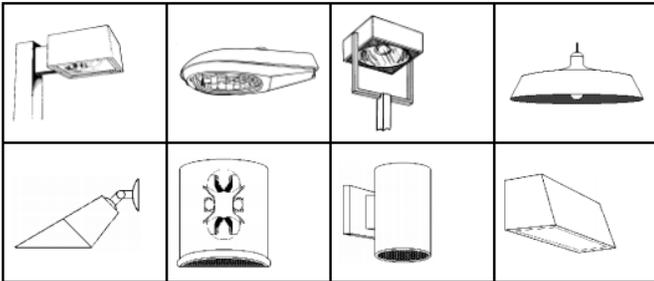
The Town of Camp Verde Community Development Department requires a lumen calculation sheet be submitted with all permit applications for new construction; for both residential and commercial development. To help you understand the information needed to fill out the form, we have included with your building 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!

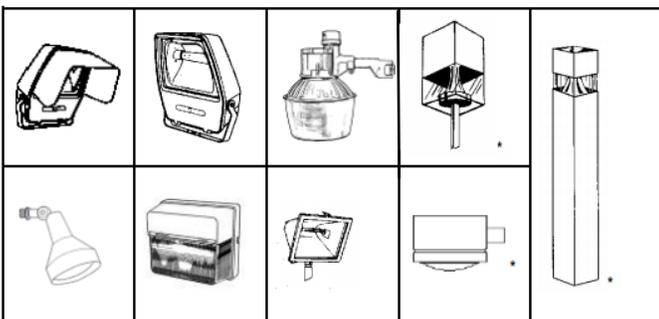
### Fully Shielded Examples:

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



### 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 converts are directly visible from the side.



### 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 Icetron) (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



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







# Town of Camp Verde

Phone: (928) 554-0050

## Community Development

473 S. Main Street, Suite 108  
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 2018 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)

Y E S	N O	TYPES OF WORK REQUIRING SPECIAL STRUCTURAL INSPECTION	QUALIFIED SPECIAL INSPECTOR, INDIVIDUAL(S) OR FIRM(S)
		(ATTACH SUPPLEMENT IF NECESSARY)	(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.

**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.

\*\*\*\*\*

\_\_\_\_\_ Date

\_\_\_\_\_ Town of Camp Verde

COMMENTS:

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



**Town of Camp Verde**  
**Public Works Department**  
 395 S. Main Street  
 Camp Verde, AZ 86322  
 (928) 554-0820  
 (928) 567-1540 Fax  
 www.cvaz.org

**PUBLIC WORKS FEE**  
**SCHEDULE**

<b>SITE PLAN REVIEW</b>	
1 <sup>st</sup> and 2 <sup>nd</sup> Reviews	\$225.00 Per Applicable Sheet
<b>ENGINEERING REPORT REVIEW</b>	
1 <sup>st</sup> and 2 <sup>nd</sup> Reviews <u>Includes:</u> Drainage Reports, Design Reports, Traffic Reports (TIA), Soils Reports and Other Reports	\$250.00 Per Report \$150.00 For Each Subsequent Review
<b>CONSTRUCTION PLANS &amp; GRADING PLAN</b>	
1 <sup>st</sup> and 2 <sup>nd</sup> Reviews <u>Includes:</u> Civil Grading & Drainage, SWPPP, Water, Sewer, Streets, Signing & Striping, Irrigation, and Other <i>(Note: Each separate infrastructure component shall be counted and billed separately regardless of the number of components placed on one sheet)</i>	\$225.00 Per Applicable Sheet \$250.00 For Each Subsequent Review
<b>AS BUILT PLAN REVIEW</b>	
	\$91.00 Per Applicable Sheet
<b>PLAT REVIEW</b>	
1 <sup>st</sup> and 2 <sup>nd</sup> Reviews <u>Includes:</u> Preliminary and Final Plat Reviews	\$250.00 Per Applicable Sheet \$150.00 For Each Subsequent Review
<b>RIGHT-OF-WAY</b>	
Encroachment Permit	\$291.00
<b>MISCELLANEOUS PLAN REVIEW</b>	
<u>Includes:</u> Engineer's Cost Estimates, Residential Grading Plan Review, and Plan Revision Reviews	\$100.00 Per Applicable Sheet \$100.00 For Entire Residential Grading Plan Submittal/ Review
<b>ANY ADDITIONAL INSPECTIONS</b>	
Note: Request Form Must Be Submitted	\$50.00 Per Inspection
<b>PRIVATE ROAD SIGNS</b>	
New Private Road Street Signs <u>Includes:</u> Installation	\$85.00 Each
<b>ROAD CUT PERMITS</b>	
Excludes Utility Companies	\$50.00 Each
<b>PUBLIC IMPROVEMENT CONSTRUCTION INSPECTION</b>	
	\$225.00 Per Inspection

## TOWN OF CAMP VERDE ENGINEERING PLAN REVIEW FEE SCHEDULE

1<sup>st</sup> Submittal     2<sup>nd</sup> Submittal     3<sup>rd</sup> Submittal *(additional fees apply)*

**A COPY OF THIS FEE SCHEDULE IS TO ACCOMPANY EACH SUBMITTAL.**

**PROJECT NAME:** \_\_\_\_\_  
**PROJECT ADDRESS:** \_\_\_\_\_  
**Engineer:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_  
**Contact Person:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_  
**email:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_  
**Who is the contact person:**    Architect    Owner    Engineer    other \_\_\_\_\_

TYPE OF REVIEW	NO. SHEETS or REPORTS REVIEWED	COST PER SHEET OR REPORT *	REVIEW FEE
1.) Site Plan*		\$ 225 per Sheet	
2.) Preliminary Plat*		\$ 250 per Sheet	
3.) Final Plat*		\$ 250 per Sheet	
4.) Engineering Design Reports			
a.) Grading & Drainage* <i>Stormwater (SW)</i>		\$ 250 per Report	
b.) Soils*		\$ 250 per Report	
c.) Traffic*		\$ 250 per Report	
d.) Streets*		\$ 250 per Report	
e.) Water*		\$ 250 per Report	
f.) Sewer*		\$ 250 per Report	
g.) Other*		\$ 250 per Report	
5.) Construction Plans			
a.) Grading & Drainage* <i>(SW)</i>		\$ 225 per Sheet	
b.) SWPPP* <i>(Stormwater)</i>		\$ 225 per Sheet	
c.) Water*		\$ 225 per Sheet	
d.) Sewer*		\$ 225 per Sheet	
e.) Signing & Striping*		\$ 225 per Sheet	
f.) Irrigation*		\$ 225 per Sheet	
g.) Other*		\$ 225 per Sheet	
6.) Engineer's Cost Estimate		\$ 100 per Sheet	
7.) As-Built Plan Review		\$ 91	
8.) Miscellaneous Plan Review <i>(Residential Grading, Non-Classified..)</i>		\$ 100	
9.) Public Improvement Insp.		\$ 225	
10.) Additional Inspection*		\$ 50. Per Insp.*	

<b>TOTAL FEES</b>	<b>\$ _____</b>
ENGINEER PLAN RVW 01-40-40-4140 \$ _____	STORMWATER 01-40-41-4140 \$ _____

**PLAN REVIEW FEES ARE DUE AND PAYABLE UPON CONFIRMATION OF SUBMITTAL FROM ENGINEER.**

*\*Cost includes 1<sup>st</sup> and 2<sup>nd</sup> Reviews and up to 3 Inspections; Third and subsequent reviews apply at \$150 per sheet/report.*

**STAFF TO COMPLETE**

Rec'd by: \_\_\_\_\_ Date Rec'd: \_\_\_\_\_ Date due: \_\_\_\_\_ Review # \_\_\_\_\_  
 Returned red lines? Yes / No    Routed to: \_\_\_\_\_ Comments: \_\_\_\_\_  
 Fees Due \$ \_\_\_\_\_    Completed Fee schedule: Yes / No

# Camp Verde Fire District

26 B Salt Mine Road  
P.O. Box 386  
Camp Verde, Arizona 86322

Phone: 928.567.9401  
Fax: 928.567.2444  
www.campverdefire.org



## Fee Schedule

Fire Code Plan Reviews, Inspections and Permits	Fee
<b>New Construction, additions, and alterations (1 Plan Review and 2 Inspections)</b>	<b>Plan Review: 40% of building permit Plan Review Fee</b>
<b>Subdivisions Plat Review</b>	<b>\$60</b>
<b>Fire Alarm &amp; Detection System</b>	<b>1 Plan Review and 2 Inspections</b>
New Installation up to 5,000 sq. ft.	\$150
New Installation 5,000+ sq. ft.	\$150 + .01 per square foot over 5,000
Modifications (Including TI)	\$75
<b>Automatic Fire Sprinkler System</b>	<b>1 Plan Review and 2 Inspections</b>
New Installation up to 5,000 sq. ft.	\$250
New Installation 5,000+ sq. ft.	\$250 + .01 per sq. ft. over 5,000
Modifications (Including TI)	\$125
<b>Alternative Fire-Extinguishing System</b>	<b>1 Plan Review and 2 Inspections</b>
New Installation: Foam, CO2, Clean Agent, Chemical, etc	\$100
New Installation Commercial Cooking (Hood)	\$100
<b>Fire Pump</b>	<b>1 Plan Review and 1 Inspection</b>
New Installation and Modifications	\$100
<b>Underground Fire Lines</b>	<b>1 Plan Review and 1 Inspection</b>
Installation	\$75
<b>Spray Booth and Dipping Operations</b>	<b>1 Plan Review and 1 Inspection</b>
Pre-Manufactured Spray Booth	\$100
Non-Pre-Manufactured Spray Booth	\$200
<b>Fire Department Access (Permanent)</b>	<b>1 Plan Review and 1 Inspection</b>
New Installation – Access Gate (each)	\$60
<b>Solar Photovoltaic Power Systems</b>	<b>\$50</b>
<b>Liquid Petroleum Gas</b>	<b>1 Plan Review and 1 Inspection</b>
New Installation: Aboveground Tank	\$100

<b>High Piled Combustible Storage</b>	<b>\$60 for 1 Plan Review and 1 Inspection</b>
<b>Tents, Canopies, Membrane Structures</b>	<b>1 Plan Review and 1 Inspection</b>
Single Tent Over 400 sq. ft.	\$25
Single Canopy Over 700 sq. ft.	\$25
Sites with Multiple Tents and/or Canopies	\$50
<b>Blasting</b>	<b>1 Plan Review and Inspections as Required by the AHJ</b>
3 Day Single Project, No On-Site Storage	\$50
30 Day Single Project, Non On-Site Storage	\$100
Magazine Storage (Each Site)	\$100
<b>Fireworks/Pyrotechnics Display</b>	<b>\$50 plus Standby Fees</b>
<b>Special Events</b>	<b>\$25 for 1 Plan Review and 1 On-Duty Inspection Off-Duty and Standby Fees may be required</b>
<b>Hazardous Materials Storage</b>	<b>\$50 per site for 1 Plan Review and 1 Inspection</b>
<b>Flammable/Combustible Liquids Storage</b>	<b>\$50 per site for 1 Plan Review and 1 Inspection</b>
<b>Compressed Gasses Storage</b>	<b>\$50 per site for 1 Plan Review and 1 Inspection</b>
<b>Additional Plan Review Fee</b>	<b>50% of Original Plan Review Fee</b>
<b>Re-Inspection Fee</b>	<b>\$50</b>
<b>Penalty for Starting Work Without a Permit</b>	<b>Double the Permit Fee</b>

*Updated: October 1<sup>st</sup>, 2014*



# Camp Verde Fire Department

26 W. Salt Mine Rd.  
CAMP VERDE, AZ 86322-0386  
BUSINESS 567-9401 • EMERGENCY 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  
 System Class:  A  B  Addressable  Other \_\_\_\_\_

Signal Initiating Devices	Gauge of Wire _____	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	Gauge of Wire _____	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		
Number of Zones (Identify Zones on Plans)		

### Section C, Applicant, Project Contractor/Designer Information:

**Installing Contractor:**

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

**Designer/Nicet III Info:**

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

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

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_



*Camp Verde Fire Department*

26 W. Salt Mine Rd.  
CAMP VERDE, AZ 86322-0386  
BUSINESS 567-9401 • EMERGENCY 911

**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:

13     13R     13D                       Light     OH I     OH II     Extra Hazard

Wet     Dry     Other \_\_\_\_\_                       Number of Risers \_\_\_\_\_

General Type of Installation                       High Piled Storage

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

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_



*Camp Verde Fire Department*  
 26 W. Salt Mine Rd.  
 CAMP VERDE, AZ 86322-0386  
 BUSINESS 567-9401 • EMERGENCY 911

**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:

Name	Phone
Address	License

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: \_\_\_\_\_



*Camp Verde Fire Department*

26 W. Salt Mine Rd.  
CAMP VERDE, AZ 86322-0386  
BUSINESS 567-9401 • EMERGENCY 911

**Solar Photovoltaic Permit Application**

**Section A, Site Information: Complete for all permits**

Job Address: \_\_\_\_\_  
*Number and Street name, City/Town, Zip code*

Name of Building Owner: \_\_\_\_\_

Owner Address (Street): \_\_\_\_\_

Owner Address (City, State): \_\_\_\_\_ Zip Code: \_\_\_\_\_

Owner Phone Number: ( ) \_\_\_\_\_

**Section B, Project Information: Complete for all permits.**

Roof Square Footage: \_\_\_\_\_ Array Square Footage: \_\_\_\_\_

Roof Style:  Hip Roof  Single Ridge Roof  Gable Roof  Other \_\_\_\_\_

<b>Roof Access:</b>	
Number of Roof Access Points	
Width of Roof Access Points	
Is the roof access point over a door or window?	
Are roof access points located at strong points of building construction?	
Are panels/modules located no higher than 3' below the ridge?	
<b>Markings (Interior and Exterior)</b>	
Are all DC conduits, enclosures and raceways marked every 10 feet?	
Are all DC cable assemblies, junction and combiner boxes marked?	
Area all disconnects marked?	

**Section C, Applicant, Project Contractor/Designer Information:**

**Installing Contractor:** \_\_\_\_\_  
*Name Address Phone*

**License Information:** \_\_\_\_\_

Applicant Name:	Address:	Phone
-----------------	----------	-------

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

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_