



Application for Permitting

All Project Types - Excludes Demo, Fire, Pools & Backflow Preventer

***PROJECT ADDRESS:** _____ Suite # _____ Unit # _____

Subdivision: _____ Lot #: _____

Zoning District(s): _____ Parcel Number(s): _____

Quarter Section(s): _____ Flood Zone(s): _____

***PROJECT NAME:** _____

***Associated Plan/Case Numbers** _____ (If Applicable)

***PERMIT/PLAN TYPE:**

(Check all that apply) **Revision to Approved Plan?** Yes No **Green Building Program?** Yes No

SINGLE FAMILY RESIDENTIAL:

New SFR Remodel Addition New SFR Standard Guest House New Fence/Wall

Minimum: Mechanical Plumbing Electrical Building Combo

COMMERCIAL: New Commercial New Shell Tenant Improvement Addition

Interior Remodel Exterior Remodel Interior & Exterior Remodel New Fence/Wall

Minimum: Electrical Building Mechanical Plumbing Combo

CIVIL: Number of Sheets _____

Grading Drainage Water Sewer Paving Concrete

Utilities Landscaping/Misc. Misc Row Encroachment WCF Cellular

MULTI FAMILY: Number of Units _____ Apartment Condominium Townhouse

LAND DIVISION/MAP OF DEDICATION: Number of Sheets _____

Final Plat Minor Subdivision Revision

Full Subdivision Easements & ROW MOD Condo Plat

***Scope of work:** _____

***PROJECT SQ FOOTAGE COMMERCIAL & RESIDENTIAL:** Lot Sq Ft _____ NAOS Sq Ft _____

New A/C _____ New Non A/C _____ Remodel A/C _____ Remodel Non A/C _____

Addition A/C _____ Addition Non A/C _____ Fence LF _____ Retaining Wall LF _____

Guest House A/C _____ Guest House Non A/C _____

***PROJECT DETAILS COMMERCIAL:** Occupant Type _____ Construction Type _____ Occupant Load _____

Planning, Neighborhood & Transportation Division

7447 E Indian School Road, Suite 100, Scottsdale, AZ 85251 • Phone: 480-312-2500 • Fax: 480-312-7088



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***Property Owner:** _____
 Address: _____
 City _____ State _____ Zip _____
 Phone: _____ Fax: _____
 Email: _____

Contractor: _____
 Address: _____
 City _____ State _____ Zip _____
 Phone: _____ Fax: _____
 Email: _____
 Roc# _____ COS Tax License# _____

Architect: _____
 Company: _____
 Address: _____
 City _____ State _____ Zip _____
 Phone: _____ Fax: _____
 Email: _____

Civil Engineer: _____
 Company: _____
 Address: _____
 City _____ State _____ Zip _____
 Phone: _____ Fax: _____
 Email: _____

The property owner shall designate an agent as the applicant for the project

PLANS & PERMITS WILL ONLY BE RELEASED TO THE PERSON(S) LISTED AS THE APPLICANT CONTACT BELOW. ANY PERSONS NOT LISTED AS CONTACT WILL REQUIRE AUTHORIZATION LETTER FROM THE CONTACT PERSON LISTED.

***Applicant Contact:** _____ Company: _____

***E-mail:** _____ Phone: _____ Fax: _____
 Address: _____ City _____ State _____ Zip _____

***Others authorized to pick up plans & permits:** _____

I (the undersigned) understand and agree that the issuance of the permit for which I am applying does not relieve me of the responsibility that this work will be done in conformity with the laws of the City of Scottsdale, Maricopa County and the State of Arizona. I further agree that the Scottsdale Inspections Division has the authority to enforce adopted building codes and appropriate State, County and City laws and regulations not indicated on the construction documents. I acknowledge that this application will expire 180 days after the last plan submittal.

_____ **OR** _____
***Owner Signature** Date ***Applicant Signature** Date

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