Change of Records Request
Change Owner/Contractor or Correct an Address

NOTE: Request must be submitted in person to the Records department at 7447 E. Indian School Rd. and will only be processed if received from an authorized contact, is complete, and verified as accurate and necessary. Change of Owner requests will NOT be processed after Certificate of Occupancy has been issued. Fees may apply, refer to the fee schedule at www.scottsdaleaz.gov. Search keyword “fees”.

Project Name: ________________________________

Building Address: ________________________________

Apply to (check all that apply):  □ Case #:________  □ Plan #:________  □ Permit #:________

Description of Change Requested:

□ Change Owner (authorized requestor: current owner on record, title company; NOT by new owner)

   Note: Current Title information identifying the new owner MUST be attached to verify ownership.

   Owner on Record: ________________________________________________________________

   New Owner Name: ________________________________

   Address: ________________________________  City: _____________  State: ___  Zip: ______

   E-mail: ________________________________  Phone: ______________  Fax: ______________

□ Change of Participant - CAN ONLY BE REQUESTED BY CURRENT OWNER ON RECORD. The permit will be placed on hold until OWNER submits new information or owner/builder form is provided.

   Change: □ Applicant  □ Architect  □ Engineer  □ Developer  □ Contractor

   Contact: ________________________________  Company: ________________________________

   Address: ________________________________  City: _____________  State: ___  Zip: ______

   E-mail: ________________________________  ROC No.: ________________________________

   Phone: ______________  Fax: ______________  Scottsdale Business License: ______________

□ Correction to Project Address (authorized requestor: owner, applicant) - Clerical corrections only; see Records to legally change a property address.

   Correct Address: ________________________________

Requested By:

Name: ________________________________  Company: ________________________________

Address: ________________________________  City: _____________  State: ___  Zip: ______

E-mail: ________________________________  Phone: ______________  Fax: ______________

Relationship to Project: ________________________________

Reason for change: ________________________________

Signature: ________________________________  Date: ________________________________

Planning & Development Services Department
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