



• "Most Livable City" U.S. Conference of Mayors •

ANNUAL FACILITIES REGISTRATION APPLICATION

FACILITY NAME: _____

FACILITY ADDRESS: _____

OWNER OR
REPRESENTATIVE: _____ PHONE: _____

MAILING ADDRESS: _____

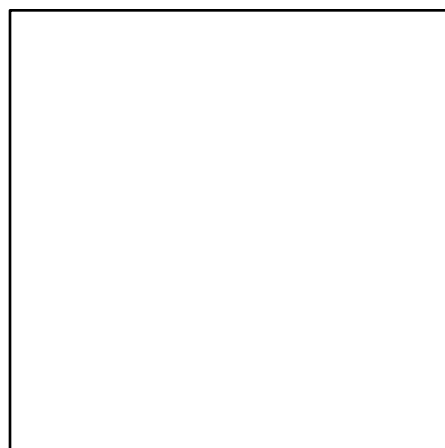
REGISTERED
PROFESSIONAL: _____ PHONE: _____

PROFESSIONAL'S ADDRESS: _____

WORK TO BE PERMITTED IN ACCORDANCE WITH
2015 IBC, SECTION 105.1.1, AMENDED.

FACILITY REGISTRATION FEE OF \$4200.00*.
PLEASE RETURN COMPLETED FORM AND A CHECK
PAYABLE TO THE CITY OF SCOTTSDALE TO:

CITY OF SCOTTSDALE
DEVELOPMENT SERVICES DIVISION
ATTN: Michael L. Clack
7447 E. INDIAN SCHOOL RD., SUITE 125
SCOTTSDALE, AZ 85251-3915



REGISTRANT SEAL

BUILDING DEPARTMENT REPRESENTATIVE

DATE