TOWN OF QUARTZSITE

PLANNING AND ZONING DEPARTMENT
465 NORTH PLYMOUTH AVENUE • PO BOX 2812 • QUARTZSITE, AZ 85346
PHONE: 928 927-4333 • FAX: 928 927-4400
ARIZONA RELAY SERVICE (928) 927-3762 (TDD)
WEB SITE: WWW.CI.QUARTZSITE.AZ.US

□ **Building Permit** □ **Grading Permit (check one)**
□ **Residential** □ **Commercial** □ **Industrial (check one)**
□ **Owner Builder** □ **Contractor (check one)**

Project /Site Address_____
Lot #_____**Subdivision**_____ **Zoning**_____ **Parcel Number**_____
Lot Area (sq. ft.) _____ **Lot Setbacks: Front** _____ **Back** _____ **Side** _____ **Side**_____

Applicant_____ **Are you the renter/lessee of this property?** _____
Mailing Address_____ **City**_____ **State** _____ **Zip**_____ **Phone#** _____

Property Owner_____**Phone#**_____
Mailing Address_____ **City**_____ **State**_____ **Zip**_____
Property Owner Signature_____

Contractor _____ **Contact Name** _____
Mailing Address_____ **City** _____ **State**_____ **Zip**_____ **Email** _____
Phone# _____ **Cell Phone** _____ **Fax** _____
AZ License #_____ **Class**_____ **Town of Quartzsite License#**_____

AZ Architect/Engineer _____ **Contact Name**_____ **License#** _____
Mailing Address_____ **City**_____ **State**_____ **Zip**_____ **Phone#**_____

Occupancy Type: □ **Assembly** □ **Business** □ **Education** □ **Hazardous** □ **Utility** □ **Factory-Industrial** □ **Institutional**
□**Mercantile** □**Residential** □ **Storage**
Business Type: _____
Type of Work: □ **New Construction** □ **Patio Cover** □ **Re-roof** □ **Re-model** □ **Addition** □ **Repair** □**Other**
Proposed Construction (Be Explicit)
_____
_____
_____
_____
Construction Type: □ **Wood** □**Masonry** □ **Metal** □ **Other** **Project Valuation $**_____
Building Length _____ **Building Width** _____ **Building Height**_____
Septic Tank □ **Yes** □ **No** (must have copy of La Paz County Health Department Approval) □ **Well Water** □ **Town Water System**
Attachments □ **Plot Plan** □ **Foundation Plan** □ **Structural Section** □ **Exterior Elevation** □ **Floor Plan**

I certify that I have read this application and state that the information is correct. I agree to comply with all Town and County ordinances and State laws relating to building construction, and hereby authorize representatives of this Town to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant:_____ **Date:** _____
Owner □ **Contractor** □ **Agent** □

ACCEPTANCE OF APPLICATION IS NOT AN APPROVAL TO CONSTRUCT

OFFICE USE ONLY

Zoned_____ **Flood Plain**_____ **Is an Elevation Certificate Required** □ **yes** □**no** **Zoning Approval**_____

Fees: BLDG _____ **PLAN CHECK** _____ **MECH.**_____ **OTHER** _____ **TOTAL**_____

Receipt Number _____ **Amount** _____ **Date** _____ **Rec'd**_____ **Authorized Town Official**_____