

Commercial Building Permit Application
City Of Sedona Community Development Department



102 Roadrunner Drive Sedona, AZ 86336
 (928) 282-1154 • www.sedonaz.gov/cd

Check <u>all</u> that apply:	<input type="checkbox"/> New Construction	<input type="checkbox"/> Demo	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration	<input type="checkbox"/> Tenant Improvement
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PRIMARY CONTACT:		Phone:		Permit #:	
Address:		Cell Phone:		Parent Permit #:	
E-mail:				Date Rec'd:	
Job Site Address:		Parcel #:		Deposit Pd.:	
Tenant Name:					
Complex Name:				Suite #:	
Project Valuation*	\$				

*(do not include cosmetic improvements such as paint and carpet)

Scope of Work:	
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OWNER NAME:		CONTRACTOR NAME:	
Address:		Company:	
Phone:		Address:	
Cell Phone:		Phone:	
E-Mail		Cell Phone:	
		E-mail:	
		City Business License #:	
		ROC State License #:	
ARCHITECT:		ENGINEER:	
Company:		Company:	
Address:		Address:	
Phone:		Phone:	
Cell Phone:		Cell Phone:	
E-mail:		E-mail:	
ID #/Exp. Date:		ID #/Exp. Date:	

PLEASE LIST YOUR SUBCONTRACTORS:			
ELECTRICAL CONTRACTOR			
Name:		ROC License #:	
Phone:		City of Sedona Business License #:	
MECHANICAL CONTRACTOR			
Name:		ROC License #:	
Phone:		City of Sedona Business License #:	
PLUMBING CONTRACTOR			
Name:		ROC License #:	
Phone:		City of Sedona Business License #:	

Number of Stories:		Vacant Site: <input type="checkbox"/> Yes <input type="checkbox"/> No
Current Building/Tenant Sq. Footage:		Fire Alarms: <input type="checkbox"/> Yes <input type="checkbox"/> No
Proposed Building/Tenant Sq. Footage:		Existing Sprinklers: <input type="checkbox"/> Yes <input type="checkbox"/> No

Is the Property Within a Flood Hazard Area? Yes No

APPLICANT

(Check one of the following): Owner Owner's Agent Contractor Contractor's Agent

I certify that I have read this application and declare under penalty of perjury that the information contained herein is correct and complete. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes. I am either the owner of the property on this permit application, the Arizona State registered contractor for the work, or I represent the owner or contractor as signified above and am acting with the owner's/contractors full knowledge or consent.

Print Name

Signature

Date