



**CITY OF ELOY**  
**BUILDING PERMIT APPLICATION**  
**1137 W. HOUSER ROAD**  
**ELOY, ARIZONA 85131**  
**FOR INSPECTIONS CALL: 520-464-3179**  
**FAX NO: 520-464-1438 / OFFICE 520-466-3082**

PLAN CHECK NO:
<b>BUILDING PERMIT NO:</b>

<b>CONSTRUCTION ADDRESS:</b>	PARCEL:
------------------------------	---------

<b>APPLICANT or OWNER:</b> (Property Owner's Authorization for Permitting if not the owner)	PHONE:
--	--------

ADDRESS:	E-MAIL:
----------	---------

CITY:	STATE:	ZIP:
-------	--------	------

<b>CONTRACTOR:</b>	PHONE:
--------------------	--------

ADDRESS:	E-MAIL:
----------	---------

CITY:	STATE:	ZIP:
-------	--------	------

R.O.C.#	CITY BUSINESS #	STATE TAX #
---------	-----------------	-------------

<b>DESCRIBE WORK TO BE DONE:</b>	<b>ESTIMATED CONSTRUCTION VALUE:</b>
----------------------------------	--------------------------------------

NEW NSF <input type="checkbox"/>	SF ADDITION <input type="checkbox"/>	SF ALTERATION <input type="checkbox"/>	DEMOLITION <input type="checkbox"/>
MECHANICAL <input type="checkbox"/>	PLUMBING <input type="checkbox"/>	ELECTRICAL <input type="checkbox"/>	OTHER <input type="checkbox"/>
STUCCO <input type="checkbox"/>	COMMERCIAL <input type="checkbox"/>	INDUSTRIAL <input type="checkbox"/>	SOLAR <input type="checkbox"/>

**FOR OFFICE USE ONLY**

ZONING DISTRICT:	CASE NO:	FRONT YARD	REAR YARD	SIDE YARD	STREET YARD	BLD. HT.	LOT COV. %
------------------	----------	------------	-----------	-----------	-------------	----------	------------

<b>ZONING COMMENTS:</b>	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	DATE:
-------------------------	---	-------

<b>APPROVED BY:</b>							
OCCUPANCY CONST.	TYPE SQ.	SQ. FT.	SPRINKLER	ALARM	FIRE DISTRICT	CLASSIFICATION	

<b>BUILDING COMMENTS:</b>	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	DATE:
---------------------------	---	-------

**APPROVED BY:**

BUILDING:	WATER:	WATER METER:
PLAN REVIEW:	WASTEWATER:	WATER TAP:
MECHANICAL:	POLICE:	SEWER TAP:
PLUMBING:	STREET:	MISC. FEES:
ELECTRICAL:	PARKS & REC:	
DEMOLITION:		

<b>TOTAL BUILDING PERMIT FEE:</b>	<b>TOTAL IMPACT FEE:</b>	<b>TOTAL CITY UTILITY FEE:</b>
-----------------------------------	--------------------------	--------------------------------

<b>TOTAL FEES PAYABLE:</b>	<b>CASH:</b>	<b>CHECK:</b>	<b>C.C. CONF:</b>
----------------------------	--------------	---------------	-------------------

I CERTIFY THAT I AM THE OWNER OR HIS REPRESENTATIVE, THAT I HAVE READ THIS APPLICATION, AND THAT ALL INFORMATION IS CORRECT. I FURTHER CERTIFY THAT I HAVE READ, UNDERSTAND AND WILL COMPLY WITH ALL OF THE PROVISIONS OUTLINED HEREON. I ALSO CERTIFY THAT THE PLOT PLAN SUBMITTED IS A COMPLETE AND ACCURATE PLAN SHOWING ANY AND ALL EXISTING AND PROPOSED STRUCTURES ON THE SUBJECT PROPERTY. ALL WORK ON THIS PROJECT WILL BE DONE BY A CONTRACTOR HOLDING VALID PRIVILEGE AS LICENSES ISSUED BY THE STATE OF ARIZONA AND THE CITY OF ELOY.

**DATE** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

**PROVISIONS:** THE APPLICANT IS ADVISED THAT ISSUANCE OF THIS PERMIT WILL NOT RELIEVE RESPONSIBILITY OF THE OWNER OR OWNER'S AGENTS TO COMPLY WITH THE PROVISIONS OF ALL LAWS AND ORDINANCES, INCLUDING FEDERAL, STATE AND LOCAL JURISDICTIONS, WHICH REGULATE CONSTRUCTION AND PERFORMANCE OF CONSTRUCTION, OR WITH ANY PRIVATE DEED RESTRICTIONS OR REQUIREMENTS OF THE APPLICABLE FIRE DISTRICT. THIS PERMIT BECOMES NULL AND VOID IF THE CONSTRUCTION WORK AUTHORIZED IS NOT BEGUN WITHIN 180 DAYS FROM DATE OF ISSUE OR IF ANY TIME PRIOR TO FINAL INSPECTION AND APPROVAL THE WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS.