



Community Development Department

7501 E. Civic Circle
Prescott Valley, Arizona 86314
Phone 928-759-3050
Fax 928-759-5511
email: comdev@pvaz.net

ZONING PERMIT APPLICATION

CONSTRUCTION ADDRESS: _____ **PERMIT#:** _____

PARCEL #: _____ - _____ - _____ **UNIT#:** _____ **LOT#:** _____

OWNER'S NAME: _____

ADDRESS: _____ **PHONE:** _____

**Please be advised that information supplied on this application is public record and may be released upon request.*

CONTRACTOR:

BUSINESS NAME: _____ **BUS. LIC. #:** _____

CONTRACTOR'S LIC. #: _____ **PHONE #:** _____

FAX #/ _____ **EMAIL** _____

ADDRESS: _____

VALUATION: \$ _____ **FEE:** \$16.05

DESCRIPTION OF WORK:

NAME (PRINTED) _____

SIGNATURE: _____ **DATE:** _____

I respectfully request that my phone number not be released to an individual requesting public information for commercial resale or telemarketing purposes.

APPLICANT SIGNATURE: _____ **DATE:** _____

Phone Number: _____ **Cell Phone Number:** _____

TOWN OF PRESCOTT VALLEY PLOT PLAN

PLEASE INDICATE NORTH

PERMIT #: _____

APPLICANT: _____

ADDRESS: _____

CERTIFICATION

I/We certify that the proposed construction will conform to the dimensions and uses shown and that no changes will be made without first obtaining approval. All structures (including fences, walls and pads), correct setback distances, legal access and easements, cuts, fills, drainage and any water course on or adjacent to the property within 20 feet of any proposed or existing structure has been indicated.

Signature of owner or authorized representative

Date

ALL SIDE YARD SETBACKS MEASURED TO ROOF DRIP LINE

(Show roof drip line with dashed line and indicate side yard setback to roof drip line)

SUGGESTED SCALE: 1 INCH EQUALS 20 FEET