



Apache County Building Safety Department

P.O. Box 238
St. Johns, AZ 85936
(928) 337-7527

AUG 28 2023
AP

Permit # 2023-270

MANUFACTURED HOME PERMIT APPLICATION

PROPERTY OWNER INFORMATION

Owners Name: <u>Dan & Karen Williams</u>	Phone:
Mailing Address:	Parcel number:A.P.N. <u>106-25-017B</u>
City: <u>Buckeye</u> State: <u>AZ</u> Zip: <u>85326</u>	Construction Address:
E-mail Address:	Valuation: \$ <u>160,550.</u>

MANUFACTURE HOME INFORMATION

Unit Manufacturer: <u>CMH manufacturing west</u>	Date of Manufacture: <u>09/23</u>
Unit Serial Number A: <u>BUC014813AZ</u>	HUD Number: <u>SITEM16763AH23</u>
Unit Serial Number B:	Septic Permit Number:
# of Bedrooms: <u>3</u>	Snow Roof Load: <u>40lb.</u>
#of Bathrooms: <u>2</u>	Areas within Apache County have specific Roof Snow load requirements. Homes which do not meet the standared will require an accessory "snow roof" construction over the home. Additional permitting will be required in these instances.
Length: <u>76</u> Width: <u>16</u>	

INSTALLER INFORMATION

Installer Name: <u>Jeff Baldwin</u>	Installer Address: <u>P.O. Box 2905</u>
Installer License Number: <u>6940</u>	Installer Phone Number: <u>928-243-3907</u>
City: <u>snowflake</u> State: <u>AZ</u> Zip Code: <u>85937</u>	Email: <u>BaldwinMHS@gmail.com</u>

DEALER INFORMATION

Dealers Name: <u>CMH Homes Inc.</u>	Dealers License Number: <u>6849</u>
Dealers Mailing Address: <u>474 S. Main st.</u>	Dealers E-mail Address: <u>HC1045@claytonhomes.com</u>
Dealers Phone Number: <u>928-536-2336</u>	Dealers City: <u>snowflake</u> State: <u>AZ</u> Zip Code: <u>85937</u>

Dealer Signature: Beth Case Date: 8-8-23

NO OCCUPANCY WITHOUT FINAL INSPECTION

Building Official:

I hereby certify I have read and examined this application and the pertaining documents, and know same to be true and correct.

Building Official: Heather DellKam

Date: 082923

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-269

Please fill in the information within the black line. Please print.
PERMIT APPROVAL FOR
 NEW CONST. REMODEL SOLAR
 ADDITION MANU.HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: **BNSF**

MAILING ADDRESS: _____

CITY: **kansas City**

STATE: **KS**

ZIP: **66106**

PHONE NUMBER: _____

EMAIL: _____

Parcel No. **207-12-008**

JOB SITE ADDRESS: _____

CONTRACTOR NAME:
Hulcher Resources Inc

ADDRESS:
611 Kimberly Ave

PHONE: _____

CITY:
Denton

STATE:
TX

ZIP:
76208

ARIZONA LICENSE NO. _____

CLASS: _____

WORK TO BE DONE:
Demolition

UTILITY INFO.
 WATER: SEWER: _____
 ELECT: GAS:

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: **8/29/2023**

SIGNATURE: _____

William Gusick

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: **AG**

A.P.N **207-12-008**

FR. YD: _____

RR. YD: _____

R-S YD: _____

L-S YD: _____

ADD'L PERMIT (VARIANCE, FLOOD USE): _____

APPROVED BY P&Z DATE: _____

APPROVED F.P DATE: _____

DWLG. AREA

GARAGE AREA

ACC. AREA

NO. BDRMS

OCC: _____

LENGTH: _____

WIDTH: _____

HEIGHT: _____

APPROVED BLDG: _____

DATE: _____

Forster Dill Weber 8-29-2023

DWLG AREA

S.F. _____

@ \$ _____

GARAGE

S.F. _____

@ \$ _____

ACCESSORY

S.F. _____

@ \$ _____

TOTAL VALUATION \$ _____

BUILDING FEE \$ _____

PLAN REVIEW \$ _____

INVESTIGATION FEE \$ _____

ELECTRICAL PERMIT FEE \$ _____

RURAL ADDRESSING FEE \$ _____

FLOOD PLAIN FEE \$ _____

INSPECTION FEE X \$ _____

OTHER *Demo* \$ _____

TOTAL \$ _____

FOR OFFICE USE ONLY

RECEIVED

AUG 29 2023

BY: *JP*

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A
CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____
 BUILDING OFFICIAL _____

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-268

Please fill in the information within the black line. Please print.
PERMIT APPROVAL FOR
 NEW CONST. REMODEL SOLAR
 ADDITION MANU.HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: DOUGLAS & KATHRYN DAVIDSON
MAILING ADDRESS: _____
CITY: St. David **STATE:** AZ **ZIP:** 85630
PHONE NUMBER: _____ **EMAIL:** _____
Parcel No. 101-33-057
JOB SITE ADDRESS: _____
CONTRACTOR NAME: _____
ADDRESS: _____ **PHONE:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____
ARIZONA LICENSE NO. _____ **CLASS:** _____
WORK TO BE DONE:
METER UTILITY INFO. WATER: _____ SEWER: _____
 ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined herein.

DATE: 8-29-23 **SIGNATURE:** Douglas Davidson

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: AC **A.P.N** 101-33-057
FR. YD: _____ **RR. YD:** _____ **R-S YD:** _____ **L-S YD:** _____
ADD'L PERMIT (VARIANCE, FLOOD USE): _____
APPROVED BY P&Z **DATE:** _____ **APPROVED F.P** **DATE:** _____
DWLG. AREA **GARAGE AREA** **ACC. AREA** **NO. BDRMS**
OCC: _____ **LENGTH:** _____ **WIDTH:** _____ **HEIGHT:** _____
APPROVED BLDG. OFFICIAL: *Patricia J. Williams* **DATE:** 8-29-23
DWLG AREA S.F. _____ @ \$ _____
GARAGE S.F. _____ @ \$ _____
ACCESSORY S.F. _____ @ \$ _____
TOTAL VALUATION \$ _____
BUILDING FEE \$ _____
PLAN REVIEW \$ _____
INVESTIGATION FEE \$ _____
ELECTRICAL PERMIT FEE \$ 62.00
RURAL ADDRESSING FEE \$ _____
FLOOD PLAIN FEE \$ _____
INSPECTION FEE X \$ _____
OTHER \$ _____
TOTAL \$ 62.00

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RECEIVED

AUG 29 2023

BY: *JP*

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A **CERTIFICATE OF OCCUPANCY/ COMPLETION**
DATE _____
BUILDING OFFICIAL _____

Apache County Building Department
75 W. Cleveland • PO Box 238
St. Johns, AZ 85936-0238
(928) 337-7527

PERMIT NO.
2023-267

Please fill in the information within the black line. Please print.
PERMIT NEW CONST. REMODEL SOLAR
APPROVAL ADDITION MANU./HM GAS
FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: David & Nancy Woods
MARITIME ADDRESS: _____

CITY: Gilbert **STATE:** AZ **ZIP:** 85295
PHONE NUMBER: _____ **CALL:** _____

Parcel No. 102 58 014
JOB SITE ADDRESS: _____

CONTRACTOR NAME: C. CARDELLA CONSTRUCTION INC.
ADDRESS: 7 AOR 1050 **PHONE:** 520 405 3534
CITY: GREEK **STATE:** AZ **ZIP:** 85927
ARIZONA LICENSE NO. 226 197 **CLASS:** B

WORK TO BE DONE: BUILD NEW GARAGE
 624 #
UTILITY INFO: WATER: _____ SEWER: _____
 ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8/21/23 **SIGNATURE:** [Signature]

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: AG **APN:** 102-58-014
FR. YD: 55+ **RR. YD:** 30+ **R-S YD:** 75+ **L-S YD:** 18+
ADD'L PERMIT (VARIANCE, FLOOD USE): _____

APPROVED BY P&Z: _____ **DATE:** _____
APPROVED F.P.: [Signature] **DATE:** 8/5/23

DWLG. AREA: ✓ **GARAGE AREA:** 864 **ACC. AREA:** 140 **NO. BDRMS:** ✓
OCC: U **LENGTH:** 26 **WIDTH:** 24 **HEIGHT:** 15+/-

APPROVED BLDG.: [Signature] **DATE:** 082823

DWL'G AREA: ✓ **S.F. @ \$:** 624 @ \$ 44 63
GARAGE: **S.F. @ \$:** 240 @ \$ 44 63
ACCESSORY: _____

TOTAL VALUATION: \$ 38560
BUILDING FEE: \$ 343
PLAN REVIEW: \$ 50
INVESTIGATION FEE: \$ _____

ELECTRICAL PERMIT FEE: \$ _____
RURAL ADDRESSING FEE: \$ _____
FLOOD PLAIN FEE: \$ _____
INSPECTION FEE X: \$ _____

OTHER: \$ _____
TOTAL: \$ 393.00

FOR OFFICE USE ONLY

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AUG 24 2023

BY: _____

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A
CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE: _____
BUILDING OFFICIAL: _____

Apache County Building Department
 75 W. Cleveland - PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-266

Please fill in the information within the black line. Please print.
PERMIT NEW CONST. REMODEL SOLAR
APPROVAL ADDITION MANU. HM. GAS
FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: Elizabeth Clark
MAILING ADDRESS: Walker & Jones Road

CITY: Jones Road **STATE:** Jz **ZIP:** 85901
PHONE NUMBER: _____ **EMAIL:** _____

Parcel No. 201-79-102
JOB SITE ADDRESS: _____

CONTRACTOR NAME: Owner Builder
ADDRESS: _____ **PHONE:** _____

CITY: SMA **STATE:** _____ **ZIP:** _____
ARIZONA LICENSE NO. _____ **CLASS:** _____

WORK TO BE DONE: Solar array & other solar components
UTILITY INFO: WATER: _____ SEWER: _____
 ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8/21/23 **SIGNATURE:** Elizabeth Clark

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: AG **A.P.N.** 201-79-102
FR. YD.: _____ **RR. YD.:** _____ **R-S. YD.:** _____ **L-S. YD.:** _____

ADD'L PERMIT (VARIANCE, FLOOD USE): _____
APPROVED BY P&Z **DATE:** _____ **APPROVED F.P** **DATE:** 8/28/23

DWLG. AREA **GARAGE AREA** **ACC. AREA** **NO. BDRMS**
OCC: _____ **LENGTH:** _____ **WIDTH:** _____ **HEIGHT:** _____

APPROVED BLDG: Paul DeWitt **DATE:** 08-29-23

DWLG AREA	S.F.	@ \$
GARAGE	S.F.	@ \$
ACCESSORY	S.F.	@ \$
TOTAL VALUATION	\$ 13001	
BUILDING FEE	\$	
PLAN REVIEW	\$	
INVESTIGATION FEE	\$	
ELECTRICAL PERMIT FEE	\$	
RURAL ADDRESSING FEE	\$	
FLOOD PLAIN FEE	\$	
INSPECTION FEE X	\$ 150.00	
OTHER Solar	\$ 24.23	
TOTAL	\$	

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AUG 24 2023

BY: [Signature]

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____
 BUILDING OFFICIAL _____

2023-265

Please fill in the information within the black line. Please print.

PERMIT APPROVAL FOR

NEW CONST. REMODEL SOLAR
 ADDITION MANU.HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER

OWNERS NAME: Jeffrey & Vicki Moore

MAILING ADDRESS:

CITY: Snow Lake

PHONE NUMBER:

STATE: AZ

EMAIL: m

ZIP: 85901

Parcel No. 107-40-013C

JOB SITE ADDRESS:

CONTRACTOR NAME: Moore Contracting, LLC

ADDRESS: 650 N. Bearwood Rd Suite A #1316

CITY: Snow Lake

STATE: AZ

ZIP: 85901

ARIZONA LICENSE NO. 329319

CLASS:

UTILITY INFO.

WATER: _____ SEWER: _____

ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8/24/23

SIGNATURE:

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R305.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: AG A.P.N. 107-40-013C

FR. YD: 290 + RR. YD: 250 + R-3 YD: 334 + L-3 YD: 384 +

ADD'L PERMIT (VARIANCE, FLOOD USE):

APPROVED BY PRZ DATE: 08/28/23 APPROVED F.P. DATE: 8/28/23

DWLG. AREA GARAGE AREA ACC. AREA NO. DBRMS

OCC: U LENGTH: 40 WIDTH: 24 HEIGHT: 12' 4"

APPROVED BLDG: Fruit Valley DATE: 08/28/23

DWLG AREA S.F. @ \$ GARAGE S.F. @ \$ ACCESSORY S.F. @ \$

960 @ \$ 44.65
 2 @ \$

TOTAL VALUATION \$ 42,844

BUILDING FEE \$ 369

PLAN REVIEW \$ 50

INVESTIGATION FEE \$

ELECTRICAL PERMIT FEE \$

RURAL ADDRESSING FEE \$

FLOOD PLAN FEE \$

INSPECTION FEE X \$

OTHER \$

TOTAL \$ 419

FOR OFFICE USE ONLY

RECEIVED

AUG 24 2023

BY: M. Fulk

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/ FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____

BUILDING OFFICIAL _____

2023-264

75 W. Cleveland - PO Box 238
St. Johns, AZ 85936-0238
(928) 337-7527

Please fill in the information within the black line. Please print.

- PERMIT APPROVAL FOR
- NEW CONST.
 - REMODEL
 - SOLAR
 - ADDITION
 - MANU.HM
 - GAS
 - ELECTRICAL
 - PLUMBING
 - DEMO.
 - OTHER

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

FOR OFFICE USE ONLY

OWNERS NAME: GALLOWAY

ZONE: A6 A.P.N. 102-55-015

MAILING ADDRESS:

FR. YD: RR. YD: R.S. YD: L.S. YD:

CITY: Tucson STATE: AZ ZIP: 85711

ADD'L PERMIT (VARIANCE, FLOOD USE):

PHONE NUMBER: EMAIL:

APPROVED BY P&Z DATE: APPROVED F.P. DATE:

Parcel No. 102-55-015

DWLG. AREA GARAGE AREA ACC. AREA NO. BDRMS

JOB SITE ADDRESS:

OCC. LENGTH: WIDTH: HEIGHT:

CONTRACTOR NAME: JDS Elec

APPROVED BLDG. DATE: 08/28/23

ADDRESS: #114 CR 2223 PHONE: 928-701-2590

DWLG AREA S.F. @ \$ GARAGE S.F. @ \$ ACCESSORY S.F. @ \$

CITY: MARICOPA STATE: AZ ZIP: 85932

TOTAL VALUATION \$

ARIZONA LICENSE NO. 190474 CLASS: CR11

BUILDING FEE \$

WORK TO BE DONE: 100A TO 200A

PLAN REVIEW \$

UTILITY INFO. WATER: SEWER:

INVESTIGATION FEE \$

ELECT: GAS:

ELECTRICAL PERMIT FEE \$ 62.50

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

RURAL ADDRESSING FEE \$

DATE: 8-28-23 SIGNATURE: [Signature]

FLOOD PLAIN FEE \$

OTHER \$

INSPECTION FEE X \$

TOTAL \$ 62.00

pd. cash 8-28-23

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____ BUILDING OFFICIAL _____

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 90833-263

Please fill in the information within the black line. Please print.
PERMIT NEW CONST. REMODEL SOLAR
APPROVAL ADDITION MANU. HM GAS
FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

FOR OFFICE USE ONLY

OWNERS NAME: Parcel Behner
MAILING ADDRESS: _____
CITY: Concho **STATE:** AZ **ZIP:** 85924
PHONE NUMBER: _____ **EMAIL:** _____
Parcel No.: 107-38-003D
JOB SITE ADDRESS: _____
CONTRACTOR NAME: _____ **PHONE:** AZ 85924
ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP:** _____
ARIZONA LICENSE NO.: _____ **CLASS:** _____

ZONE: A6 **A.P.N:** 107-38-003D
FR. YD.: _____ **RR. YD.:** _____ **R-S YD.:** _____ **L-S YD.:** _____
ADD'L PERMIT (VARIANCE, FLOOD USE): _____
APPROVED BY P&Z **DATE:** _____ **APPROVED F.P.** **DATE:** _____
DWLG. AREA **GARAGE AREA** **ACC. AREA** **NO. BDRMS**
OCC.: _____ **LENGTH:** _____ **WIDTH:** _____ **HEIGHT:** _____
APPROVED BY: *Patricia Nellman* **DATE:** 8/28/23

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A
CERTIFICATE OF OCCUPANCY/ COMPLETION
DATE: _____
BUILDING OFFICIAL: _____

WORK TO BE DONE: Greenfas for Utility post
UTILITY INFO: WATER: _____ SEWER: _____
 ELECT: _____ GAS: _____
 I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.
DATE: 8/28/23 **SIGNATURE:** *A. B. Bell*

DWLG. AREA	S.F.	@ \$
GARAGE	S.F.	@ \$
ACCESSORY	S.F.	@ \$
TOTAL VALUATION	\$	
BUILDING FEE	\$	
PLAN REVIEW	\$	
INVESTIGATION FEE	\$	
ELECTRICAL PERMIT FEE	\$ 62.00	
RURAL ADDRESSING FEE	\$	
FLOOD PLAIN FEE	\$	
INSPECTION FEE X	\$	
OTHER	\$	
TOTAL	\$ 62.00	

pd cash 52.00

no Builders → just an RV

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 23-262

Please fill in the information within the black line. Please print.
 PERMIT NEW CONST. REMODEL SOLAR
 APPROVAL ADDITION MANU./HM GAS
 FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: Alan & Judy Neal
 MAILING ADDRESS: _____
 CITY: Elgin STATE: AZ ZIP: 85611
 PHONE NUMBER: _____ EMAIL: _____
 Parcel No. 101-57-030
 JOB SITE ADDRESS: _____
 CONTRACTOR NAME: Noble Mountain Builders
 ADDRESS: 140 N. D'Not Dr PHONE: 481-216-7586
 CITY: Elgin STATE: AZ ZIP: 85925
 ARIZONA LICENSE: 299100 CLASS: _____
 WORK TO BE DONE: New Owner Garage
 UTILITY INFO. WATER: _____ SEWER: _____
 ELECT: _____ GAS: _____
 I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.
 DATE: 8-28-23 SIGNATURE: Judy Neal

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ZONE: AG A.P.N. 101-57-030
 FR. YD: _____ RR. YD: _____ R-S YD: _____ L-S YD: _____
 ADD'L PERMIT (VARIANCE, FLOOD USE): _____
 APPROVED BY P&Z DATE: _____ APPROVED F.P DATE: _____
 DWLG. AREA GARAGE AREA ACC. AREA NO. BDRMS
 OCC: _____ LENGTH: _____ WIDTH: _____ HEIGHT: _____
 APPROVED BLDG: Foster Wallace DATE: 8-28-23
 DWLG AREA S.F. @ \$ _____
 GARAGE S.F. @ \$ _____
 ACCESSORY S.F. @ \$ _____
 TOTAL VALUATION \$ _____
 BUILDING FEE \$ _____
 PLAN REVIEW \$ _____
 INVESTIGATION FEE \$ _____
 ELECTRICAL PERMIT FEE \$ _____
 RURAL ADDRESSING FEE \$ _____
 FLOOD PLAIN FEE \$ _____
 INSPECTION FEE X \$ _____
 OTHER New Owner \$ 30.00
 TOTAL \$ 30.00

FOR OFFICE USE ONLY

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A
CERTIFICATE OF OCCUPANCY/ COMPLETION
 DATE _____
 BUILDING OFFICIAL _____

75 W. Cleveland • PO Box 238
St. Johns, AZ 85936-0238

2023-261

(928) 337-7527

Please fill in the information within the black line. Please print.

- PERMIT APPROVAL FOR
- NEW CONST.
 - REMODEL
 - SOLAR
 - ADDITION
 - MANU/HM
 - GAS
 - ELECTRICAL
 - PLUMBING
 - DEMO.
 - OTHER

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

FOR OFFICE USE ONLY

RECEIVED

AUG 23 2023

BY: *[Signature]*

OWNERS NAME: STAHES BURTON

MAILING ADDRESS: _____

CITY: SHOW LOW STATE: AZ ZIP: 85901

PHONE NUMBER: _____ EMAIL: _____

ZONE: AG A.P.N. 106-54-016F

FR.YD: 50+ RR.YD: 30+ R-S YD: 30+ L-S YD: 75+

ADD'L PERMIT (VARIANCE, FLOOD USE): _____

APPROVED BY P&Z: [Signature] DATE: 08/23/23 APPROVED F.P. DATE: 8/23/23

Parcel No. 106-54-016F

JOB SITE ADDRESS: SAHE

CONTRACTOR NAME: SELF

DWLG. AREA 1600 GARAGE AREA 1600 ACC. AREA _____ NO. BDRMS _____

OCC: U LENGTH: 25 WIDTH: 24 HEIGHT: 11

APPROVED BLDG. DATE: 08/28/23

ADDRESS: SAHE PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

ARIZONA LICENSE NO. _____ CLASS: _____

DWLG AREA S.F. @ \$ _____

GARAGE S.F. 1600 @ \$ 44.63

ACCESSORY S.F. @ \$ _____

TOTAL VALUATION \$ 26778

BUILDING FEE \$ 265.00

PLAN REVIEW \$ 50

INVESTIGATION FEE \$ _____

ELECTRICAL PERMIT FEE \$ _____

RURAL ADDRESSING FEE \$ _____

FLOOD PLAIN FEE \$ _____

INSPECTION FEE X \$ _____

OTHER \$ _____

TOTAL \$ 315.00

WORK TO BE DONE: GARAGE

UTILITY INFO. WATER: _____ SEWER: _____

ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8-23-23 SIGNATURE: [Signature]

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____ BUILDING OFFICIAL _____



Apache County Building Safety Department

P.O. Box 238
St. Johns, AZ 85936
(928) 337-7527

RECEIVED

Permit # 2023-260

AUG 23 2023

MANUFACTURED HOME PERMIT APPLICATION

Owners Name: <u>Robert Edward Bennett</u>	Phone: _____
City: <u>Show Low</u> State: <u>AZ</u> Zip: <u>85901</u>	Zoning: _____
Assessor's Parcel Number (A.P.N.): <u>106-50-004N</u>	Construction Address: _____
E-mail Address: <u>OHC@AZOHC.com</u>	Valuation: \$ <u>136,000.00</u>
List ANY Existing Buildings on the Property at Present: <u>none</u>	

MANUFACTURE HOME INFORMATION

Unit Manufacturer: <u>Clayton</u>	Date of Manufacture: <u>6/2023</u>
Unit Serial Number A: _____	HUD Number: <u>AR2392686 d 2687</u>
Serial Number B: <u>BUC014847 AZ A/B</u>	Number of Bedrooms: <u>3</u> Number of Bathrooms: <u>2</u>
** Snow Roof Load: _____	Number of Bathrooms: <u>2</u>
Snow Waiver: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Septic Permit Number: <u>Sep 2020-146</u>
Septic System Insatllted? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Meter Loop: _____
Gas Line: <u>Propane</u>	

INSTALLER INFORMATION

Installer Name: <u>Williams Mobile Home Setup</u>	Installer Address: <u>PO Box 686</u>
Installer License Number: <u>7936</u>	Installer Phone Number: <u>520 701-1451</u>
City: <u>Keams</u> State: <u>AZ</u> Zip Code: <u>86034</u>	Email: <u>delwilliams454@yahoo.com</u>

DEALER INFORMATION

Dealers Name: <u>Quality Home Center</u>	Dealers License Number: <u>7753</u>
Dealers Mailing Address: <u>2150 E Adams St</u>	Dealers E-mail Address: <u>OHC@AZOHC.com</u>
Dealers Phone Number: <u>(928) 537-2615</u>	Dealers City: <u>Show Low</u> State: <u>AZ</u> Zip Code: <u>85901</u>

** Areas within Apache County have specific Roof Snow load requirements. Permitting requires the manufactures Roof Snow load information to insure the proper placement of homes and accessories base on the snow load studies to the area of placement. Homes which do not meet the standared will require a signed waiver or an accessory "snow roof" construction over the home. Additional permitting will be required in these instances.

Dealer Signature: [Signature] Date: 8/22/23

OR) Owners Certification: I hereby certify I have read and examined this application and the pertaining documents, and know same to be true and correct.

[Signature] Date: 082423

NO OCCUPANCY WITHOUT FINAL INSPECTION

011 Address MUST be Post at road entrance to proper

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-259

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

FOR OFFICE USE ONLY

RECEIVED

AUG 16 2023

Please fill in the information within the black line. Please print.
PERMIT APPROVAL FOR
 NEW CONST. REMODEL SOLAR
 ADDITION MANU./HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: David & Kelly Willett
MAILING ADDRESS:
CITY: Marana **STATE:** AZ **ZIP:** 85653

ZONE: AC **A.P.N:** 201-46-249
FR. YD.: 45+ **RR. YD.:** 70+ **R-S YD.:** ? **L-S YD.:** 65+
ADD'L PERMIT (VARIANCE, FLOOD USE):

Parcel No.: 201-46-249
JOB SITE ADDRESS:

APPROVED BY: [Signature] **DATE:** 08/24/23 **APPROVED F.P. DATE:** 8/24/23
DWLG. AREA: 864 **GARAGE AREA:** ✓ **ACC. AREA:** ✓ **NO. BDRMS:** 1
OCC.: R-3 **LENGTH:** 36 **WIDTH:** 24 **HEIGHT:** 15 +/-

CONTRACTOR NAME: Owner Builder
ADDRESS: Same as above **PHONE:**
CITY: **STATE:** **ZIP:**
ARIZONA LICENSE NO.: **CLASS:**

APPROVED BLDG. DATE: 08/24/23
DWLG AREA: S.F. 864 @ \$ 112.65
GARAGE: S.F. ✓ @ \$
ACCESSORY: S.F. 1 @ \$
TOTAL VALUATION: \$ 97,329

WORK TO BE DONE:
UTILITY INFO:
WATER: X **SEWER:** X
ELECT.: X **GAS:** _____

BUILDING FEE: \$ 630.50
PLAN REVIEW: \$ 50
INVESTIGATION FEE: \$
ELECTRICAL PERMIT FEE: \$
RURAL ADDRESSING FEE: \$ 5
FLOOD PLAIN FEE: \$ 25
INSPECTION FEE X: \$
OTHER: \$
TOTAL: \$ 710.50

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8/14/23 **SIGNATURE:** [Signature]

FOOTING:
PRE-SLAB:
STEM WALL:
FLOOR/FRAMING:
SHEER NAIL:
ELEC. METER:
ROUGH COMBO:
DRY WALL:
BLDG. FINAL:
MISC.:

WHEN VALIDATED BELOW THIS BECOMES A
CERTIFICATE OF OCCUPANCY/ COMPLETION
DATE:
BUILDING OFFICIAL:

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-258

Please fill in the information within the black line. Please print.
PERMIT
 NEW CONST. REMODEL SOLAR
 ADDITION MANU/HM GAS
APPROVAL FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: Ricky and Teresa Williams

MAILING ADDRESS:

CITY: Springerville **STATE:** AZ **ZIP:** 85938

PHONE NUMBER: **EMAIL:**

Parcel No.: 103-20-077

JOB SITE ADDRESS:

CONTRACTOR NAME:
 Owner Build

ADDRESS: **PHONE:**

CITY: **STATE:** **ZIP:**

ARIZONA LICENSE NO.: **CLASS:**

WORK TO BE DONE:
 New Off Grid Cabin

UTILITY INFO.
 WATER: _____ SEWER: _____
 ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.


DATE: 7-31-23 **SIGNATURE:** 

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: AG **A.P.N:** 103-20-677

FR. YD: 30 + **RR. YD:** 100 + **R-S YD:** 37 + **L-S YD:** 180 +

ADD'L PERMIT (VARIANCE, FLOOD USE):

APPROVED BY:  **DATE:** 08/24/23 **APPROVED F.P. DATE:** 8/23/23

DWLG. AREA: 1350 **GARAGE AREA:** ✓ **ACC. AREA:** ✓ **NO. BDRMS:** 1

OCC: P-3 **LENGTH:** 30 **WIDTH:** 30 **HEIGHT:** 22 +/-

APPROVED BLDG:  **DATE:** 08/24/23

DWLG AREA: S.F. 1350 @ \$ 112.65

GARAGE: S.F. ✓ @ \$ _____

ACCESSORY: S.F. ✓ @ \$ _____

TOTAL VALUATION: \$ 152077

BUILDING FEE: \$ 825.00

PLAN REVIEW: \$ 50.00

INVESTIGATION FEE: \$ _____

ELECTRICAL PERMIT FEE: \$ _____
RURAL ADDRESSING FEE: \$ 5.00
FLOOD PLAIN FEE: \$ 25.00
INSPECTION FEE X: \$ _____
OTHER: \$ _____
TOTAL: \$ 905.00

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AUG 16 2023

BY: 

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	
WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION	
DATE	
BUILDING OFFICIAL	

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-257

APPROVAL FOR
 NEW CONST. REMODEL SOLAR
 ADDITION MANU.HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

OWNERS NAME: Tracy Alired
 Maurice Alired

CITY: Thatcher STATE: AZ ZIP: 85552

PHONE NUMBER: EMAIL: PARCEL NO. 101-33-031-A

CONTRACTOR NAME: Ethan Eggar ADDRESS: PHONE: 928-551-2521

APPROVED BY P&Z DATE: 08/15/23 APPROVED F.P. DATE: 8/15/23

ARIZONA LICENSE NO. RD037168 CLASS: CITY: Eggar STATE: AZ ZIP: 85552

APPROVED BLDG. DATE: 08/15/23

WORK TO BE DONE: COVER AZ ROOM add DECK UTILITY INFO. WATER: SEWER: ELECT: X GAS:

APPROVED F.P. DATE: 8/15/23

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8/14/2023 SIGNATURE: Maurice Alired

FR. YD: 100 + RR. YD: 100 + R-SKD: 50 + L-SKD: 50 +
 ADD'L PERMIT (VARIANCE, FLOOD USE):
 DWLG. AREA GARAGE AREA ACC. AREA NO. BDRMS
 OCC: R.O.S LENGTH: 22'4" WIDTH: 9.8' HEIGHT: 11'4"
 DWLG. AREA @ \$ GARAGE AREA @ \$ ACC. AREA @ \$ NO. BDRMS @ \$

TOTAL VALUATION \$ 9997
 BUILDING FEE \$ 117
 PLAN REVIEW \$ 50
 INVESTIGATION FEE \$
 ELECTRICAL PERMIT FEE \$
 RURAL ADDRESSING FEE \$
 FLOOD PLAIN FEE \$
 INSPECTION FEE X \$
 OTHER \$
 TOTAL \$ 16700

FOR OFFICE USE ONLY

RECEIVED

AUG 16 2023

BY: M. FISH

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____ BUILDING OFFICIAL _____

2023-256

75 W. Cleveland · PO Box 238
St. Johns, AZ 85936-0238
(928) 337-7527

Please fill in the information within the black line. Please print.
 PERMIT NEW CONST. REMODEL SOLAR
 APPROVAL ADDITION MANU./HM GAS
 FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: Tesse Burge

MAILING ADDRESS:

CITY: Tucson STATE: AZ ZIP: 85755

PHONE NUMBER: _____ EMAIL _____

Parcel No. 106-41-024

JOB SITE ADDRESS:

CONTRACTOR NAME: OWNER/BUILDER

ADDRESS: 911 Address applied for PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

ARIZONA LICENSE NO. _____ CLASS: _____

WORK TO BE DONE: Power Pole Permit
N.E.C./200AMP
meter

UTILITY INFO. WATER: _____ SEWER: _____
ELECT: X GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8/2/23 SIGNATURE: [Signature]

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: AG A.P.N. 106-41-024H

FR.YD: _____ RR.YD: _____ R-S.YD: _____ L-S.YD: _____

ADD'L PERMIT (VARIANCE, FLOOD USE):

APPROVED BY P&Z DATE: _____ APPROVED F.P. DATE: _____

DWIG. AREA _____ GARAGE AREA _____ ACC. AREA _____ NO. BDRMS _____

OCC: _____ LENGTH: _____ WIDTH: _____ HEIGHT: _____

APPROVED BLDG: Power Pole Permit DATE: 8-22-23

DWLG AREA S.F. @ \$ _____
GARAGE S.F. @ \$ _____
ACCESSORY S.F. @ \$ _____

TOTAL VALUATION \$ _____

BUILDING FEE \$ _____

PLAN REVIEW \$ _____

INVESTIGATION FEE \$ _____

ELECTRICAL PERMIT FEE \$ 62.00

RURAL ADDRESSING FEE \$ _____

FLOOD PLAIN FEE \$ _____

INSPECTION FEE X \$ _____

OTHER \$ _____

TOTAL \$ 62.00

FOR OFFICE USE ONLY

RECEIVED

AUG 2 2 2023

BY: [Signature]

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____ BUILDING OFFICIAL _____

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-255

Please fill in the information within the black line. Please print.
PERMIT APPROVAL FOR
 NEW CONST. REMODEL SOLAR
 ADDITION MANU.HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: DARRELL AND SUSAN BROWN

MAILING ADDRESS

CITY: SNOWFLAKE **STATE:** AZ **ZIP:** 85937

PHONE NUMBER: **EMAIL:**

Parcel No. 212-32-168

JOB SITE ADDRESS:

CONTRACTOR NAME: none

ADDRESS: **PHONE:**

CITY: **STATE:** **ZIP:**

ARIZONA LICENSE NO. **CLASS:**

WORK TO BE DONE: to remove what was left of a old trailer that had been stripped by looters over the yrs when we bought the property a few yr ago. there is only 20% of the trailer left.
UTILITY INFO.
WATER: _____ **SEWER:** _____
ELECT: _____ **GAS:** _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: June 6 2023 **SIGNATURE:** Darrell Brown

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: AC **A.P.N** 212-32-168

FR. YD: **RR. YD:** **R-S YD:** **L-S YD:**

ADD'L PERMIT (VARIANCE, FLOOD USE):

APPROVED BY PR&Z **DATE:** **APPROVED F.P** **DATE:**

DWLG. AREA **GARAGE AREA** **ACC. AREA** **NO. BDRMS**

OCC: **LENGTH:** **WIDTH:** **HEIGHT:**

APPROVED BLDG: *[Signature]* **DATE:** 080923

DWLG AREA S.F. @ \$ _____
GARAGE S.F. @ \$ _____
ACCESSORY S.F. @ \$ _____

TOTAL VALUATION \$ _____
BUILDING FEE \$ _____
PLAN REVIEW \$ _____
INVESTIGATION FEE \$ _____
ELECTRICAL PERMIT FEE \$ _____
RURAL ADDRESSING FEE \$ _____
FLOOD PLAIN FEE \$ _____
INSPECTION FEE X \$ _____
OTHER *D oms* \$ _____
TOTAL \$ _____

FOR OFFICE USE ONLY



FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/ FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____
BUILDING OFFICIAL _____

Apache County Building Department

75 W. Cleveland • PO Box 238
St. Johns, AZ 85936-0238

(928) 337-7527

PERMIT NO.
2023-254

Please fill in the information within the black line. Please print.
PERMIT APPROVAL FOR
 NEW CONST. REMODEL SOLAR
 ADDITION MANU.HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER _____

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

FOR OFFICE USE ONLY

OWNERS NAME: Brandon Ayers

ZONE: AG A.P.N. 106-68-014V

MAILING ADDRESS:

FR. YD: _____ RR. YD: _____ R-S YD: _____ L-S YD: _____

CITY: Showlow STATE: AZ ZIP: 85901

ADD'L PERMIT ATTACHANCE, FLOOD USE:

PHONE NUMBER: _____ EMAIL: _____

APPROVED BY P&Z DATE: _____ APPROVED F.P. DATE: _____

Parcel No. 106-68-014V

DWLG. AREA	GARAGE AREA	ACC. AREA	NO. BDRMS

CONTRACTOR NAME: _____

OCC.	LENGTH:	WIDTH:	HEIGHT:

ADDRESS: _____ PHONE: _____

APPROVED BLDG: Front Well DATE: 082223

CITY: _____ STATE: _____ ZIP: _____

DWLG AREA S.F. @ \$ _____
 GARAGE S.F. @ \$ _____
 ACCESSORY S.F. @ \$ _____

ARIZONA LICENSE NO. _____ CLASS: _____

WORK TO BE DONE: _____

TOTAL VALUATION \$ _____
 BUILDING FEE \$ _____
 PLAN REVIEW \$ _____
 INVESTIGATION FEE \$ _____
 ELECTRICAL PERMIT FEE \$ 62.00
 RURAL ADDRESSING FEE \$ _____
 FLOOD PLAIN FEE \$ _____
 INSPECTION FEE X \$ _____
 OTHER \$ _____
 TOTAL \$ 62.00

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

FOOTING	PRE-SLAB	STEM WALL	FLOOR/FRAMING	SHEER NAIL	ELEC. METER	ROUGH COMBO	DRY WALL	BLDG. FINAL	MISC.

DATE: 8-22-2023 SIGNATURE: Brandon P. Ayers

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION
 DATE _____
 BUILDING OFFICIAL _____



Apache County Building Safety Department

P.O. Box 238
St. Johns, AZ 85936
(928) 337-7527

Permit # 2023-253

JUL 03 2023

MANUFACTURED HOME PERMIT APPLICATION

Owners Name: <u>CMH Homes Inc</u>		Phone: _____	
Mailing address: _____		Parcel number:A.P.N: <u>106-84-046</u>	
City: <u>snowflake</u>	State: <u>AZ</u>	Zip: <u>85937</u>	Construction Address: _____
E-mail Address: _____		Valuation: \$ <u>180,000.00/yr</u>	Zoning: <u>RES A</u>
List ANY Existing Buildings on the Property at Present: <u>N/A</u>			

MANUFACTURE HOME INFORMATION

Unit Manufacturer: <u>CMH Manufacturing West</u>		Date of Manufacture: <u>July 2023</u>	
Unit Serial Number A: <u>BVC014845A2A</u>	Unit	HUD Number: _____	
Serial Number B: <u>BVC014845AZB</u>		Number of Bedrooms: <u>3</u> Number of Bathrooms: <u>2</u>	
** Snow Roof Load: <u>40</u>	Snow Waiver: <input type="checkbox"/> YES <input type="checkbox"/> NO		
Septic System Insatllted? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Septic Permit Number: _____		
Gas Line: _____	Meter Loop: _____		

INSTALLER INFORMATION

Installer Name: <u>Baldwin Enterprises</u>		Installer Address: <u>P.O. Box 2440</u>	
Installer License Number: <u>6940</u>		Installer Phone Number: <u>928-853-8481</u>	
City: <u>snowflake</u>	State: <u>AZ</u>	Zip Code: <u>85937</u>	

DEALER INFORMATION

Dealers Name: <u>CMH Homes Inc.</u>		Dealers License Number: <u>6849</u>	
Dealers Mailing Address: <u>474 S. Main St.</u>		Dealers E-mail Address: <u>Blw. Koontz @ clayton homes. com</u>	
Dealers Phone Number: <u>928-536-2336</u>		Dealers City: <u>snowflake</u>	State: <u>AZ</u> Zip Code: <u>85937</u>

** Areas within Apache County have specific Roof Snow load requirements. Permitting requires the manufactures Roof Snow load information to insure the proper placement of homes and accessories base on the snow load studies to the area of placement. Homes which do not meet the standared will require a signed waiver or an accessory "snow roof" construction over the home. Additional permitting will be required in these instances.

Dealer Signature: [Signature]

Date: 6-27-23

(OR) Owners Certification:

I hereby certify I have read and examined this application and the pertaining documents, and know same to be true and correct.

Building Official: [Signature]

Date: 070523



Apache County Building Safety Department

P.O. Box 238
St. Johns, AZ 85936
(928) 337-7527

Permit # 2023-252

JUL 03 2023

MANUFACTURED HOME PERMIT APPLICATION

Owners Name: <u>CMH Homes Inc.</u>		Phone: _____	
Mailing address: _____		Parcel number:A.P.N: <u>106-84-045</u>	
City: <u>snowflake</u>	State: <u>AZ</u>	Zip: <u>85937</u>	Construction Address: _____
E-mail Address: _____		Valuation: \$ <u>180,000.00</u>	Zoning: <u>RES A</u>
List ANY Existing Buildings on the Property at Present: <u>N/A</u>			

MANUFACTURE HOME INFORMATION

Unit Manufacturer: <u>CMH Manufacturing</u>	Date of Manufacture: <u>2022</u>
Unit Serial Number A: <u>BUC013985AZA</u>	Unit Serial Number B: <u>BUC013985AZB</u>
** Snow Roof Load: <u>40</u>	Number of Bedrooms: <u>3</u>
Snow Waiver: <input type="checkbox"/> YES <input type="checkbox"/> NO	Number of Bathrooms: <u>2</u>
Septic System Insatlld? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Septic Permit Number: _____
Gas Line: _____	Meter Loop: _____

INSTALLER INFORMATION

Installer Name: <u>Baldwin Enterprises</u>	Installer Address: <u>P.O. Box 2440</u>
Installer License Number: <u>6940</u>	Installer Phone Number: <u>928-853-8481</u>
City: <u>snowflake</u>	State: <u>AZ</u>
	Zip Code: <u>85937</u>

DEALER INFORMATION

Dealers Name: <u>CMH Homes Inc.</u>	Dealers License Number: <u>6849</u>
Dealers Mailing Address: <u>474 S. Main St</u>	Dealers E-mail Address: <u>Blo.koontz@claytonhomes.com</u>
Dealers Phone Number: <u>928-536-2336</u>	Dealers City: <u>snowflake</u>
	State: <u>AZ</u>
	Zip Code: <u>85937</u>

**Areas within Apache County have specific Roof Snow load requirements. Permitting requires the manufactures Roof Snow load information to insure the proper placement of homes and accessories base on the snow load studies to the area of placement. Homes which do not meet the standared will require a signed waiver or an accessory "snow roof" construction over the home. Additional permitting will be required in these instances.

Dealer Signature: [Signature]

Date: 6-27-23

(OR) Owners Certification:

I hereby certify I have read and examined this application and the pertaining documents, and know same to be true and correct.

Building Official: [Signature]

Date: 070523



Apache County Building Safety Department

P.O. Box 238
St. Johns, AZ 85936
(928) 337-7527

Permit # 2023-251

MANUFACTURED HOME PERMIT APPLICATION

Owners Name: <u>Dean + Kathleen Merrill</u>		Phone: _____	
Mailing address: _____		Parcel number:A.P.N: <u>201-45-101</u>	
City: <u>Vancouver</u>	State: <u>WA</u>	Zip: <u>98665</u>	Construction Address: _____
E-mail Address: _____		Valuation: \$ <u>120,000.00</u>	Zoning: <u>AG</u>
List ANY Existing Buildings on the Property at Present: <u>none</u>			

MANUFACTURE HOME INFORMATION

Unit Manufacturer: <u>Champion SR1660</u>		Date of Manufacture: <u>2024</u>	
Unit Serial Number A: <u>TBD</u>	Unit	HUD Number: _____	
Serial Number B: _____			
** Snow Roof Load: <u>40#</u>	Number of Bedrooms: <u>2</u>	Number of Bathrooms: <u>2</u>	
Snow Waiver: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Septic Permit Number: <u>Concho Sewer</u>		
Septic System Insatlld? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Meter Loop: _____		
Gas Line: <u>propane</u>			

INSTALLER INFORMATION

Installer Name: <u>Delbert Williams</u>		Installer Address: <u>PO Box 686</u>	
Installer License Number: <u>1-1067936</u>		Installer Phone Number: <u>505 701-1451</u>	
City: <u>Keams Canyon</u>	State: <u>AZ</u>	Zip Code: <u>86034</u>	

DEALER INFORMATION

Dealers Name: <u>Quality Home Center</u>		Dealers License Number: <u>7753</u>	
Dealers Mailing Address: <u>2150 E Adams St.</u>		Dealers E-mail Address: <u>QHC@AZQHC.com</u>	
Dealers Phone Number: <u>(928) 537-2615</u>		Dealers City: <u>Show Low</u>	State: <u>AZ</u> Zip Code: <u>8590</u>

**Areas within Apache County have specific Roof Snow load requirements. Permitting requires the manufactures Roof Snow load information to insure the proper placement of homes and accessories base on the snow load studies to the area of placement. Homes which do not meet the standard will require a signed waiver or an accessory "snow roof" construction over the home. Additional permitting will be required in these instances.

Dealer Signature: [Signature]

Date: 7/13/23

(OR) Owners Certification:

I hereby certify I have read and examined this application and the pertaining documents, and know same to be true and correct.

Building Official: [Signature]

Date: 8-22-2023

Apache County Building Department
 75 W. Cleveland • PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-250

Please fill in the information within the black line. Please print.
PERMIT NEW CONST. REMODEL SOLAR
APPROVAL ADDITION MANU./HM GAS
FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: ANTONIETTE CHAVEZ

MAILING ADDRESS:

CITY: Springerville **STATE:** **ZIP:** 85938

PHONE NUMBER: **EMAIL:**

Parcel No.: 108-39-006

JOB SITE ADDRESS:

CONTRACTOR NAME: JDS ELECTRICAL

ADDRESS: P.O. BOX 257 **PHONE:** 928-701-2550

CITY: **STATE:** **ZIP:**

ARIZONA LICENSE NO.: **CLASS:**

WORK TO BE DONE: **UTILITY INFO.**
 WATER: _____ SEWER: _____
 M etc ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8-22-23 **SIGNATURE:** [Signature]

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: AG **A.P.N.** 108-39-006
RR. YD: **RR. YD:** **R-S YD:** **L-S YD:**

ADP'L PERMIT (VARIANCE, FLOOD USE):

APPROVED BY P&Z **DATE:** **APPROVED F.P.** **DATE:**

DWLG. AREA **GARAGE AREA** **ACC. AREA** **NO. BDRMS**

OCC: **LENGTH:** **WIDTH:** **HEIGHT:**

APPROVED BLDG: [Signature] **DATE:** 8-22-23

DWLG AREA S.F. @ \$ _____
GARAGE S.F. @ \$ _____
ACCESSORY S.F. @ \$ _____

TOTAL VALUATION \$ _____
BUILDING FEE \$ _____
PLAN REVIEW \$ _____
INVESTIGATION FEE \$ _____
ELECTRICAL PERMIT FEE \$ 62.00
RURAL ADDRESSING FEE \$ _____
FLOOD PLAIN FEE \$ _____
INSPECTION FEE X \$ _____
OTHER \$ _____
TOTAL \$ 62.00

FOR OFFICE USE ONLY

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A
CERTIFICATE OF OCCUPANCY/ COMPLETION
DATE _____
BUILDING OFFICIAL _____

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 9083-210

Please fill in the information within the black line. Please print.
PERMIT NEW CONST. REMODEL SOLAR
APPROVAL ADDITION MANU/HM GAS
FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNER'S NAME: ANMARIE STRICKLAUD
MAILING ADDRESS: _____

CITY: Shoolow **STATE:** AZ. **ZIP:** 85902
PHONE NUMBER: _____ **EMAIL:** _____

JOB SITE ADDRESS: 10715464

CONTRACTOR NAME: _____

ADDRESS: _____ **PHONE:** _____

CITY: _____ **STATE:** _____ **ZIP:** _____
ARIZONA LICENSE NO. _____ **CLASS:** _____

WORK TO BE DONE: _____
UTILITY INFO: WATER: _____ SEWER: _____
 ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined herein.

DATE: 08/21/2023 **SIGNATURE:** Anmarie Stricklaud

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: AG **A.P.N.** 107-15464
FR. YD: _____ **RR. YD:** _____ **R-S YD:** _____ **L-S YD:** _____

APPROVED BY P&Z _____ **DATE:** _____ **APPROVED F.P.** _____ **DATE:** _____

DWLG. AREA _____ **GARAGE AREA** _____ **ACC. AREA** _____ **NO. BDRMS** _____
OCC: _____ **LENGTH:** _____ **WIDTH:** _____ **HEIGHT:** _____

APPROVED BLDG. OFFICIAL: Patricia Bell **DATE:** 8-21-23

DWLG AREA S.F. _____ @ \$ _____
GARAGE S.F. _____ @ \$ _____
ACCESSORY S.F. _____ @ \$ _____
TOTAL VALUATION \$ _____
BUILDING FEE \$ _____
PLAN REVIEW \$ _____
INVESTIGATION FEE \$ _____
ELECTRICAL PERMIT FEE \$ _____
RURAL ADDRESSING FEE \$ _____
FLOOD PLAIN FEE \$ _____
INSPECTION FEE X \$ _____
OTHER \$ _____
TOTAL \$ _____

FOR OFFICE USE ONLY

COMPLETED
8-24-23

FOOTING _____
PRE-SLAB _____
STEM WALL _____
FLOOR/FRAMING _____
SHEER WALL _____
ELEC. METER _____
ROUGH COMBO _____
DRY WALL _____
BLDG. FINAL _____
MISC. _____

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/COMPLETION
DATE: 8-24-23
BUILDING OFFICIAL: Patricia Bell

Apache County Building Department
 75 W. Cleveland • PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-248

Please fill in the information within the black line. Please print.
PERMIT NEW CONST. REMODEL SOLAR
APPROVAL ADDITION MANU./HM GAS
FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: Jason Lopez

MAILING ADDRESS:

CITY: Concho **STATE:** AZ **ZIP:** 85924

PHONE NUM:

Parcel No. 107-52-036B

JOB SITE ADDRESS:

CONTRACTOR NAME: owner

ADDRESS:

CITY: STATE: ZIP:

ARIZONA LICENSE NO. CLASS:

WORK TO BE DONE: UTILITY INFO. WATER: SEWER: ELECT: GAS:

Home

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8-3-23 **SIGNATURE:** [Signature]

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: AC **A.P.N.** 107-52-036B

FR. YD: 100+ **RR. YD:** 100+ **R-S. YD:** 100+ **L-S. YD:** 62'

ADD'L PERMIT (VARIANCE, FLOOD USE):

APPROVED BY P&Z DATE: 8/3/23 **APPROVED F.P.** DATE: 8/5/23

DWLG. AREA 1320 **GARAGE AREA** ✓ **ACC. AREA** 7'4" **NO. BDRMS** 3

OCC: R-3 **LENGTH:** 40' **WIDTH:** 38' **HEIGHT:** 12'4"

APPROVED BLDG: [Signature] **DATE:** 050823

DWLG AREA S.F. 1320 @ \$ 119.63
GARAGE S.F. @ \$
ACCESSORY S.F. @ \$

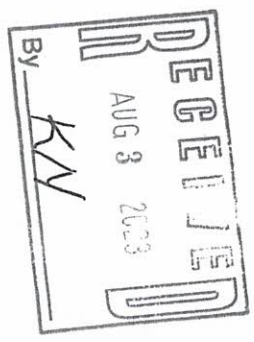
TOTAL VALUATION \$ 148,698

BUILDING FEE \$ 871.00
PLAN REVIEW \$ 50.00
INVESTIGATION FEE \$

ELECTRICAL PERMIT FEE \$ 5
RURAL ADDRESSING FEE \$ 25
FLOOD PLAIN FEE \$

INSPECTION FEE X \$
OTHER \$
TOTAL \$ 891.00

FOR OFFICE USE ONLY



Paid 8/15 check # 8257

M. FISH

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____
BUILDING OFFICIAL _____

Apache County Building Department
 75 W. Cleveland - PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-247

Please fill in the information within the black line. Please print.
PERMIT NEW CONST. REMODEL SOLAR
APPROVAL ADDITION MANU./HM GAS
FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: Dennis Skeiton

MAILING ADDRESS: _____

CITY: Prescott Valley **STATE:** AZ **ZIP:** 86315

PHONE NUMBER: _____ **EMAIL:** _____

Parcel No. 102-39-003M
JOB SITE ADDRESS: _____

CONTRACTOR NAME: Glenbar Construction LLC

ADDRESS: 1680 W 26th RD **PHONE:** 928 245 3023

CITY: Eagar **STATE:** AZ **ZIP:** 85525

ARIZONA LICENSE NO. 309963 **CLASS:** R.B-2

WORK TO BE DONE: 2x12 garage
UTILITY INFO. WATER: _____ SEWER: M^T
 ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8/12/23 **SIGNATURE:**

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: A.P.N

FR. YD: 100 T **RR. YD:** 100 T **R-S YD:** 100 T **L-S YD:** 100 T

ADD'L PERMIT (VARIANCE, FLOOD USE): _____

APPROVED P&Z DATE: 8/16/23 **APPROVED F.P. DATE:** 8/16/23

DWLG. AREA: _____ **GARAGE AREA:** 576 **ACC. AREA:** ✓ **NO. BDRMS:** 1

OCC: U **LENGTH:** 34 **WIDTH:** 24 **HEIGHT:** 15'4"

APPROVED BLDG. DATE: 8/16/23

DWLG AREA: _____ **S.F. @ \$:** _____
GARAGE: _____ **S.F. @ \$:** 576 @ \$ _____
ACCESSORY: _____ **S.F. @ \$:** ✓ @ \$ _____

TOTAL VALUATION: \$ 25706

BUILDING FEE: \$ 1258.50

PLAN REVIEW: \$ 50

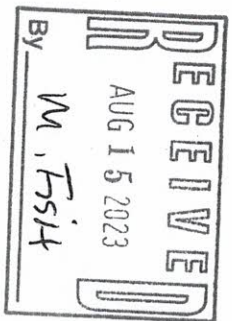
INVESTIGATION FEE: \$ _____

ELECTRICAL PERMIT FEE: \$ _____

RURAL ADDRESSING FEE: \$ _____

FLOOD PLAIN FEE: \$ _____
INSPECTION FEE X: \$ _____
OTHER: \$ _____
TOTAL: \$ 308.50

FOR OFFICE USE ONLY



FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION
DATE: _____
BUILDING OFFICIAL: _____

Apache County Building Department
 75 W. Cleveland • PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2019-246

Please fill in the information within the black line. Please print.
 PERMIT NEW CONST. REMODEL SOLAR
 APPROVAL ADDITION MANU./HM GAS
 FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: Janita Temper
 MAILING ADDRESS: _____
 CITY: Vernon STATE: AZ ZIP: 85940
 PHONE: _____ EMAIL: _____
 Parcel No: 106-61-014
 JOB SITE ADDRESS: 10 County Rd 3153
 CONTRACTOR NAME: David Stoltz
 ADDRESS: 10 CR 3153 PHONE: 928-532-8116
 CITY: Vernon STATE: AZ ZIP: 85940
 ARIZONA LICENSE NO. unlicensed CLASS: _____
 WORK TO BE DONE: a single story addition
 UTILITY INFO. WATER: _____ SEWER: _____
 ELECT: GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8/8/2023 SIGNATURE: Janita Temper

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: AG A.P.N. 106-61-014
 FR. YD: _____ RR. YD: _____ R-S YD: _____ L-S YD: _____
 ADD'L PERMIT (VARIANCE, FLOOD USE): _____
 APPROVED BY P&Z DATE: _____ APPROVED F.P DATE: _____
 DWLG. AREA 868 GARAGE AREA ACC. AREA NO. BDRMS UNK
 OCC: R-3 LENGTH: 28 WIDTH: 31 HEIGHT: _____
 APPROVED BY: Jan Bullen DATE: 08/10/23
 DWLG AREA S.F. 868 @\$ 112.65
 GARAGE S.F. _____ @\$ _____
 ACCESSORY S.F. _____ @\$ _____
 TOTAL VALUATION \$ 97980
 BUILDING FEE \$ 630 50
 PLAN REVIEW \$ 50 00
 INVESTIGATION FEE \$ _____
 ELECTRICAL PERMIT FEE \$ _____
 RURAL ADDRESSING FEE \$ _____
 FLOOD PLAIN FEE \$ _____
 INSPECTION FEE X \$ _____
 OTHER \$ _____
 TOTAL \$ 680 50

FOR OFFICE USE ONLY

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/ FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	
WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION	
DATE	
BUILDING OFFICIAL	

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-244

Please fill in the information within the black line. Please print.
PERMIT APPROVAL FOR
 NEW CONST. REMODEL SOLAR
 ADDITION MANU./HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: **Marcus Pharrams**

MAILING ADDRESS: _____

CITY: **san tan valley** STATE: **AZ** ZIP: **85140**

PHONE NUMBER: _____ EMAIL: _____

Parcel No. **107-55-014F**

JOB SITE ADDRESS: _____

CONTRACTOR NAME: **Marcus Pharrams**

ADDRESS: _____ PHONE: _____


CITY: _____ STATE: _____ ZIP: _____

ARIZONA LICENSE NO. _____ CLASS: _____

WORK TO BE DONE: **25 ft Utility Pole**

UTILITY INFO:
 WATER: _____ SEWER: _____
 ELECT: GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: **01/16/23** SIGNATURE: 

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: _____ A.P.N. **107-55-014F**


FR. YD: _____ RR. YD: _____ R-S YD: _____ L-S YD: _____

ADD'L PERMIT (VARIANCE, FLOOD USE): _____

APPROVED BY P&Z DATE: _____ APPROVED F.P. DATE: **2/21/23**

DWLG. AREA GARAGE AREA ACC. AREA NO. BDRMS

OCC: _____ LENGTH: _____ WIDTH: _____ HEIGHT: _____

APPROVED BLDG:  DATE: **08/16/23**

DWLG. AREA S.F. @ \$ _____
 GARAGE S.F. @ \$ _____
 ACCESSORY S.F. @ \$ _____

TOTAL VALUATION \$ _____

BUILDING FEE \$ _____

PLAN REVIEW \$ _____

INVESTIGATION FEE \$ _____

ELECTRICAL PERMIT FEE \$ **62.00**

RURAL ADDRESSING FEE \$ _____
 FLOOD PLAIN FEE \$ _____
 INSPECTION FEE X \$ _____
 OTHER \$ _____
 TOTAL \$ **62.00**

FOR OFFICE USE ONLY

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____
 BUILDING OFFICIAL _____

Apache County Building Department
75 W. Cleveland - PO Box 238
St. Johns, AZ 85936-0238
(928) 337-7527

PERMIT NO.
2023-247

Please fill in the information within the black line. Please print.
PERMIT NEW CONST. REMODEL SOLAR
APPROVAL ADDITION MANU/HM GAS
FOR ELECTRICAL PLUMBING DEMO.
 OTHER

OWNER'S NAME: Marc Beedeker
Mailing Address:

City: Showlow **State:** AZ **Zip:** 85901
PHONE NUMBER: **EMAIL:**

LOT: 05-205A
IND. CRT. ANNOTC.

CONTRACTOR NAME: CYLEN HERPERS
ADDRESS: PO Box 310 **PHONE:** 703-3132

CITY: TAYLOR **STATE:** AZ **ZIP:** 85939
ARIZONA LICENSE NO.: 333732 **CLASS:**

WORK TO BE DONE: set meter pole
UTILITY INFO: M.F. WATER: SEWER: X
ELECT: X **GAS:**

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8/11/23 **SIGNATURE:** Marc Beedeker

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: 107 **A.P.N:** 107-05-205A
FR. YD.: **RR. YD.:** **R-S YD.:** **L-S YD.:**

ADD'L PERMIT (VARIANCE, FLOOD USE):
APPROVED BY PRZ DATE: **APPROVED F.P DATE:**

DWLG. AREA: **GARAGE AREA:** **ACC. AREA:** **NO. BDRMS:**
OCC. LENGTH: **WIDTH:** **HEIGHT:**

APPROVED BY: Marc Beedeker **DATE:** 8/21/23

DWLG. AREA: S.F. @ \$
GARAGE: S.F. @ \$
ACCESSORY: S.F. @ \$

TOTAL VALUATION: \$ 62.00
BUILDING FEE: \$
PLAN REVIEW: \$
INVESTIGATION FEE: \$

ELECTRICAL PERMIT FEE: \$ 62.00
RURAL ADDRESSING FEE: \$
FLOOD PLAIN FEE: \$

INSPECTION FEE X: \$
OTHER: \$
TOTAL: \$ 62.00

PAID: 8/17/23

FOR OFFICE USE ONLY

RECEIVED

AUG 17 2023

BY: M. Fisir

PAID
 Check # 461

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____ BUILDING OFFICIAL _____



Apache County Building Safety Department

P.O. Box 238
St. Johns, AZ 85936
(928) 337-7527



Permit # 2023-242

MANUFACTURED HOME PERMIT APPLICATION

Owners Name: <u>Kyle Figurovski</u>	Phone: _____
City: _____ State: _____ Zip: _____	Zoning: _____
Assessor's Parcel Number (A.P.N.): <u>106-37-152</u>	Construction Address: <u>71 ACR 3131 Vernon</u>
E-mail Address: _____	Valuation: \$ _____
List ANY Existing Buildings on the Property at Present: NO OCCUPANCY WITHOUT FINAL INSPECTION	

MANUFACTURE HOME INFORMATION

Unit Manufacturer: <u>Carlo Durango</u>	Date of Manufacture: <u>Sept 2023</u>
Unit Serial Number A: <u>TBD</u>	Unit HUD Number: _____
Serial Number B: _____	Number of Bedrooms: <u>2</u>
** Snow Roof Load: <u>40</u>	Number of Bathrooms: <u>1</u>
Snow Waiver: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Septic Permit Number: _____
Septic System Insatlld? <input type="checkbox"/> YES <input type="checkbox"/> NO	Meter Loop: <input checked="" type="checkbox"/>
Gas Line: <input checked="" type="checkbox"/>	

INSTALLER INFORMATION

Installer Name: <u>Arizona Express Services LLC</u>	Installer Address: <u>1050 S. 11th St</u>
Installer License Number: <u>8598</u>	Installer Phone Number: <u>928-521-8468</u>
City: <u>Showlow</u> State: <u>AZ</u> Zip Code: <u>85901</u>	Email: <u>jackbush@frontier.com</u>

DEALER INFORMATION

Dealers Name: <u>The Home Source</u>	Dealers License Number: <u>7845</u>
Dealers Mailing Address: <u>2250 E. Dence of Clubs</u>	Dealers E-mail Address: <u>ronnie@thehome-source-az.com</u>
Dealers Phone Number: <u>928-532-5117</u>	Dealers City: <u>Showlow</u> State: <u>AZ</u> Zip Code: <u>85901</u>

** Areas within Apache County have specific roof snow load requirements. Permitting requires the manufacturer's Roof Snow load information to insure the proper placement of homes and accessories base on the snow load studies to the area of placement. Homes which do not meet the standard will require a signed waiver or an accessory "snow roof" construction over the home. Additional permitting will be required in these instances.

Dealer Signature: _____

Date: _____

(OR) Owners Certification:

I hereby certify I have read and examined this application and the pertaining documents, and know same to be true and correct.

Owner / Agent Signature: _____

Date: 080823

Apache County Building Department
 75 W. Cleveland • PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 1088-240

Please fill in the information within the black line. Please print.
 PERMIT NEW CONST. REMODEL SOLAR
 APPROVAL ADDITION MANU.HM GAS
 FOR ELECTRICAL PLUMBING DEMO.
 OTHER Metal Building

OWNERS NAME: LORENZO PEZAGARRA

MAILING ADDRESS: _____

CITY: CONCHO STATE: AZ ZIP: 85924

PHONE NUMBER: _____ EMAIL: _____

Parcel No. 106-7¹/₂-055

JOB SITE ADDRESS: _____

CONTRACTOR NAME: OWNER

ADDRESS: SAME PHONE: 5111

CITY: SAWEE STATE: AZ ZIP: 85924

ARIZONA LICENSE NO. _____ CLASS: _____

WORK TO BE DONE: Footings UTILITY INFO. WATER: _____ SEWER: _____
metal Prefab Building ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 8-9-23 SIGNATURE: [Signature]

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: A.P.N

FR.YD: 100+ RR.YD: 100+ R-S.YD: 100+ L-S.YD: 10-4-

APPROVED FOR P&Z DATE: 081023 APPROVED F.P. DATE: _____

DWLG. AREA 1200 GARAGE AREA ✓ ACC. AREA ✓ NO. BDRMS _____

OCC: AL LENGTH: 40 WIDTH: 30 HEIGHT: 12'4"

APPROVED BLDG. DATE: 081023

DWLG AREA S.F. @ \$ _____
 GARAGE S.F. 1200 @ \$ 44.63
 ACCESSORY S.F. @ \$ _____

TOTAL VALUATION \$ 53556

BUILDING FEE \$ 432

PLAN REVIEW \$ 50

INVESTIGATION FEE \$ _____

ELECTRICAL PERMIT FEE \$ _____

RURAL ADDRESSING FEE \$ _____

FLOOD PLAIN FEE \$ _____
 INSPECTION FEE X \$ _____
 OTHER \$ _____
 TOTAL \$ 482.50

FOR OFFICE USE ONLY

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	
WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION	
DATE	
BUILDING OFFICIAL	

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 1693-399

Please fill in the information within the black line. Please print.
PERMIT APPROVAL FOR
 NEW CONST. REMODEL SOLAR
 ADDITION MANU/HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER Meter Loop

OWNERS NAME: Ellen Farbo

MAILING ADDRESS:

CITY: Showlow **STATE:** AZ **ZIP:** 85901

PHONE NUMBER: **EMAIL:**

Parcel No.: 106-52-015 M

JOB SITE ADDRESS:

CONTRACTOR NAME: Home owner

ADDRESS: **PHONE:**

CITY: Show Low **STATE:** AZ **ZIP:** 85901

ARIZONA LICENSE NO.: N/A **CLASS:**

WORK TO BE DONE:
 Power Pole
 Meter Loop

UTILITY INFO.
 WATER: _____ SEWER: _____
 ELECT: GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.
DATE: 8/15/23 **SIGNATURE:** Ellen Farbo

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: 1B6 A,P,N **166-52-015 M**

FR. YD.: **RR. YD.:** **R-S YD.:** **L-S YD.:**

ADD'L PERMIT (VARIANCE, FLOOD USE):

APPROVED BY PR&Z: M. Farbo **DATE:** 8/15

APPROVED F.P. DATE:

DWLG. AREA: **GARAGE AREA:** **ACC. AREA:** **NO. BDRMS:**

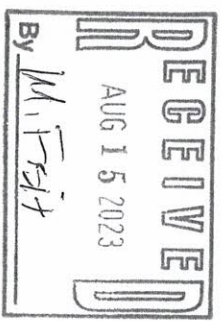
OCC.: **LENGTH:** **WIDTH:** **HEIGHT:**

APPROVED BLDG. DATE: M. Farbo 8/15/23

DWLG. AREA: S.F. @ \$ _____
GARAGE: S.F. @ \$ _____
ACCESSORY: S.F. @ \$ _____

TOTAL VALUATION \$ _____
BUILDING FEE \$ _____
PLAN REVIEW \$ _____
INVESTIGATION FEE \$ _____
ELECTRICAL PERMIT FEE \$ _____
RURAL ADDRESSING FEE \$ _____
FLOOD PLAIN FEE \$ _____
INSPECTION FEE X \$ _____
OTHER \$ _____
TOTAL \$ _____

FOR OFFICE USE ONLY



Paid in Full
 w/ check
 \$6200
 Receipt 169397

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A
CERTIFICATE OF OCCUPANCY/ COMPLETION
DATE _____
BUILDING OFFICIAL _____



Apache County Building Safety Department

P.O. Box 238
St. Johns, AZ 85936
(928) 337-7527

Permit # 2023-238

NO OCCUPANCY
WITHOUT FINAL INSPECTION Paid

MANUFACTURED HOME PERMIT APPLICATION

Owners Name: <u>Timothy + Leslie Disney</u>	Phone: _____
Mailing address: _____	Parcel number:A.P.N <u>106-54-010</u>
City: <u>Apple Valley</u> State: <u>CA</u> Zip: <u>92304</u>	Construction Address: _____
E-mail Address: _____	Valuation: \$ <u>195,000</u> Zoning: <u>A-G</u>
List ANY Existing Buildings on the Property at Present: <u>None</u>	

MANUFACTURE HOME INFORMATION

Unit Manufacturer: <u>Champion SR2856</u>	Date of Manufacture: <u>AUG 2023</u>
Unit Serial Number A: <u>10D</u> Unit	HUD Number: <u>10D</u>
Serial Number B: <u>10D</u>	** Snow Roof Load: <u>40#</u>
Snow Waiver: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Number of Bedrooms: <u>3</u> Number of Bathrooms: <u>2</u>
Septic System Insatllted? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Septic Permit Number: <u>SEP 2023-117</u>
Gas Line: _____	Meter Loop: _____

INSTALLER INFORMATION

Installer Name: <u>Delbert Williams</u>	Installer Address: <u>PO Box 686</u>
Installer License Number: <u>I-10G-7936</u>	Installer Phone Number: <u>505 701-1451</u>
City: <u>Keams Canyon</u>	State: <u>AZ</u> Zip Code: <u>86034</u>

DEALER INFORMATION

Dealers Name: <u>Quality Home Center</u>	Dealers License Number: <u>7753 D-8</u>
Dealers Mailing Address: <u>12150 E Adams St.</u>	Dealers E-mail Address: <u>QHC@AZQHC.com</u>
Dealers Phone Number: <u>(928) 537-2615</u>	Dealers City: <u>Show Low</u> State: <u>AZ</u> Zip Code: <u>85920</u>

**Areas within Apache County have specific Roof Snow load requirements. Permitting requires the manufactures Roof Snow load information to insure the proper placement of homes and accessories base on the snow load studies to the area of placement. Homes which do not meet the standard will require a signed waiver or an accessory "snow roof" construction over the home. Additional permitting will be required in these instances.

Dealer Signature: [Signature]

Date: 7/15/23

(OR) Owners Certification:

I hereby certify I have read and examined this application and the pertaining documents, and know same to be true and correct.

Building Official: [Signature]

Date: 080823

Apache County Building Department
75 W. Cleveland - PO Box 238
St. Johns, AZ 85936-0238

PERMIT NO.
9223-237

(928) 337-7527

Please fill in the information within the black line. Please print.

PERMIT NEW CONST. REMODEL SOLAR
 APPROVAL ADDITION MANU.HM GAS
 FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: Thomas & Kelly Wolfe

MAILING ADDRESS

CITY: Santan Valley STATE: AZ ZIP: 85143

PHONE NUMBER: _____ EMAIL: _____

Parcel No. 106-140410

JOB SITE ADDRESS: _____

CONTRACTOR NAME: John Hoodwood Sumer Builder

ADDRESS: _____ PHONE: _____

CITY: Santan Valley STATE: AZ ZIP: 85143

ARIZONA LICENSE NO. _____ CLASS: _____

WORK TO BE DONE: garage put up building + concrete pad

UTILITY INFO. WATER: SEWER: _____
 ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: Aug 7 2023 SIGNATURE: Kelly Wolfe

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: _____ A.P.N. _____

FR. YD: 100+ RR. YD: 280+ R-S. YD: 22+/- L-S. YD: 50+

ADD'L PERMIT (VARIANCE, FLOOD USE): _____

APPROVED BY P&Z Frank Bullen DATE: 080823 APPROVED F.P. DATE: _____

DWLG. AREA ✓ GARAGE AREA 785 ACC. AREA ✓ NO. BDRMS ✓

OCC: 11 LENGTH: 29 WIDTH: 25 HEIGHT: 15'+/-

APPROVED BLDG. Frank Bullen DATE: 080823

DWLG. AREA S.F. ✓ @ \$ _____
 GARAGE S.F. 735 @ \$ 44.63
 ACCESSORY S.F. ✓ @ \$ _____

TOTAL VALUATION \$ 32,356
 BUILDING FEE \$ 304
 PLAN REVIEW \$ 50
 INVESTIGATION FEE \$ _____

ELECTRICAL PERMIT FEE \$ _____
 RURAL ADDRESSING FEE \$ _____
 FLOOD PLAIN FEE \$ _____
 INSPECTION FEE X \$ _____

OTHER \$ _____
 TOTAL \$ 354.00

FOR OFFICE USE ONLY

RECEIVED

BY: [Signature] AUG 08 2023

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____ BUILDING OFFICIAL _____

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-236

Please fill in the information within the black line. Please print.
 PERMIT NEW CONST. REMODEL SOLAR
 APPROVAL ADDITION MANU.HM GAS
 FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: Michael Buckles

MAILING ADDRESS: _____

CITY: Shoulen STATE: AZ ZIP: 85902

PHONE NUMBER: _____ F.M.A.I.L: _____

Parcel No. 107-34-267

CONTRACTOR NAME: Owen Mike Buckles

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

ARIZONA LICENSE NO. _____ CLASS: _____

WORK TO BE DONE: home

UTILITY INFO. WATER: _____ SEWER: +
 ELECT: + GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 07/26/23 SIGNATURE: [Signature]

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: _____ A.P.N _____

FR.YD: 100+ RR.YD: 100+ R-S.YD: 100ST L-S.YD: 100+

ADD'L PERMIT (VARIANCE, FLOOD USE): _____

APPROVED BY P&T [Signature] DATE: 07/31/23 APPROVED F.P. 154 DATE: 7/27/23

DWLG. AREA 720 GARAGE AREA 2 ACC. AREA 2 NO. BDRMS 1

OCC: R-3 LENGTH: 36 WIDTH: 20 HEIGHT: 12'4"

APPROVED BLDG: [Signature] DATE: 07/31/23

DWLG AREA S.F. 720 @ \$ 112.63

GARAGE S.F. @ \$ _____

ACCESSORY S.F. @ \$ _____

TOTAL VALUATION \$ 58397

BUILDING FEE \$ 455.00

PLAN REVIEW \$ 50.00

INVESTIGATION FEE \$ _____

ELECTRICAL PERMIT FEE \$ _____

RURAL ADDRESSING FEE \$ 5.00

FLOOD PLAIN FEE \$ 25.00

INSPECTION FEE X \$ _____

OTHER \$ _____

TOTAL \$ 535

FOR OFFICE USE ONLY

RECEIVED
 AUG 08 2023
 BY: [Signature]

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR / FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY / COMPLETION

DATE _____ BUILDING OFFICIAL _____

Apache County Building Department
 75 W. Cleveland • PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-235

Please fill in the information within the black line. Please print.
PERMIT NEW CONST. REMODEL SOLAR
APPROVAL ADDITION MANU.HM GAS
FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

FOR OFFICE USE ONLY

RECEIVED

AUG 08 2023

BY: KYN

OWNERS NAME: ED BROCKMAN
MAILING ADDRESS:

ZONE: _____ **A.P.N.** _____

CITY: ST. JOHNS **STATE:** AZ **ZIP:** 85936

FR. YD: 100+ **RR. YD:** 100+ **R-S YD:** 100+ **L-S YD:** 100+

PHONE NUMBER: / / - **EMAIL:**

APPROVED BY P&Z: Franklin **DATE:** 080823 **APPROVED F.P.** _____ **DATE:** _____

Parcel No.: 204 73 022

DWLG. AREA: 576 **GARAGE AREA:** _____ **ACC. AREA:** _____ **NO. BDRMS:** _____

JOB SITE ADDRESS:

OCC: H **LENGTH:** 24 **WIDTH:** 24 **HEIGHT:** 12+/-

CONTRACTOR NAME: SELF

APPROVED BLDG.: Franklin **DATE:** 080823

ADDRESS: _____ **PHONE:** _____

CITY: _____ **STATE:** _____ **ZIP:** _____

DWLG. AREA: _____ **S.F.:** ✓ **@ \$:** 44.03

ARIZONA LICENSE NO.: _____ **CLASS:** _____

GARAGE: _____ **S.F.:** ✓ **@ \$:** _____

WORK TO BE DONE: _____

ACCESSORY: _____ **S.F.:** ✓ **@ \$:** _____

UTILITY INFO: _____

TOTAL VALUATION: \$ 25704

WATER: _____ **SEWER:** _____

BUILDING FEE: \$ 258.50

ELECT: _____ **GAS:** _____

PLAN REVIEW: \$ 50.00

INVESTIGATION FEE: \$ _____

ELECTRICAL PERMIT FEE: \$ _____

RURAL ADDRESSING FEE: \$ _____

FLOOD PLAIN FEE: \$ _____

INSPECTION FEE X: \$ _____

OTHER: \$ _____

DATE: 080823 **SIGNATURE:** [Signature]

TOTAL: \$ 308.58

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A
CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE: _____
BUILDING OFFICIAL: _____

Apache County Building Department
75 W. Cleveland · PO Box 238
St. Johns, AZ 85936-0238
(928) 337-7527

PERMIT NO.
2023-234

Please fill in the information within the black line. Please print.
PERMIT NEW CONST. REMODEL SOLAR
APPROVAL ADDITION MANU./HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: STEVE STRAWN

MAILING ADDRESS: _____

CITY: Queen Creek **STATE:** AZ **ZIP:** 85142

PHONE NUMBER: _____ **F.MAIL:** _____

Parcel No.: 102-39-003K

JOB SITE ADDRESS: _____

CONTRACTOR NAME: Greenberg Construction LLC


ADDRESS: 1680 2nd St NW **PHONE:** 480 245 7023

CITY: Payson **STATE:** AZ **ZIP:** 85425

ARIZONA LICENSE NO.: 309463 **CLASS:** KB-2

WORK TO BE DONE: Green Tag for Pedestal
UTILITY INFO: WATER: _____ SEWER: _____
 ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 5/4/23 **SIGNATURE:** 

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: AG **A.P.N.** 102-39-003K

FR. YD: _____ **RR. YD:** _____ **R-S YD:** _____ **L-S YD:** _____

ADD'L PERMIT (VARIANCE, FLOOD USE): _____

APPROVED BY PR&Z _____ **DATE:** _____ **APPROVED F.P.** _____ **DATE:** _____

DWLG. AREA _____ **GARAGE AREA** _____ **ACC. AREA** _____ **NO. BDRMS** _____

OCC: _____ **LENGTH:** _____ **WIDTH:** _____ **HEIGHT:** _____

APPROVED BLDG: _____ **DATE:** _____

DWLG AREA S.F. _____ @ \$ _____
GARAGE S.F. _____ @ \$ _____
ACCESSORY S.F. _____ @ \$ _____

TOTAL VALUATION \$ _____
BUILDING FEE \$ _____
PLAN REVIEW \$ _____
INVESTIGATION FEE \$ _____

ELECTRICAL PERMIT FEE \$ _____
RURAL ADDRESSING FEE \$ _____
FLOOD PLAIN FEE \$ _____
INSPECTION FEE X \$ _____

OTHER \$ _____
TOTAL \$ _____

Paid 11152 Kn

FOR OFFICE USE ONLY

MAY 10 2023


FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A
CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____
BUILDING OFFICIAL _____

Apache County Building Department
 75 W. Cleveland • PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
2023-233

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

FOR OFFICE USE ONLY

RECEIVED
 JUL 31 2023
 By _____

Please Fill in the information within the black line. Please print.

PERMIT NEW CONST. REMODEL SOLAR
 APPROVAL ADDITION MANU.HM GAS
 FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNER'S NAME: <i>Patrick & Carol Sumner</i>		ZONE: A.P.N	
MAILING ADDRESS:		FR. YD: <i>184 34</i>	RR. AC: <i>100 +/-</i>
CITY: <i>SIERRA MADRE CA</i> STATE: <i>CA</i> ZIP: <i>91024</i>		R-S: <i>90 +/-</i>	L-SYD: <i>100 +/-</i>
PARCEL NO: <i>204-46-012</i>		ADD'L PERMIT (VARIANCE, FLOOD USE):	
CONTRACTOR NAME: <i>SAME</i>		APPROVED BY PRZ: <i>[Signature]</i> DATE: <i>080323</i>	APPROVED F.P DATE: <i>[Signature]</i> <i>7/13/23</i>
ADDRESS:	PHONE:	DWLG. AREA: <input checked="" type="checkbox"/>	GARAGE AREA: <i>2800</i>
CITY:	STATE:	ACC. AREA: <input checked="" type="checkbox"/>	NO. BDRMS: <input checked="" type="checkbox"/>
ARIZONA LICENSE NO.	CLASS:	OCC: <i>U</i>	LENGTH: <i>70</i>
WORK TO BE DONE: <i>Shop shed</i>	UTILITY INFO. WATER: _____ SEWER: _____	WIDTH: <i>40</i>	HEIGHT: <i>20 +/-</i>
<i>No. Elect.</i>	ELECT: _____ GAS: _____	APPROVED BLDG: <i>[Signature]</i> DATE: <i>080323</i>	
I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.		DWLG AREA S.F. <input checked="" type="checkbox"/>	@ \$ _____
DATE: <i>7/31/2023</i>	SIGNATURE: <i>Carol Sumner</i>	GARAGE S.F. <i>2800</i>	@ \$ <i>44.63</i>
		ACCESSORY S.F. <input checked="" type="checkbox"/>	@ \$ _____
		TOTAL VALUATION	\$ <i>124,964</i>
		BUILDING FEE	\$ <i>727</i>
		PLAN REVIEW	\$ <i>50</i>
		INVESTIGATION FEE	\$ _____
		ELECTRICAL PERMIT FEE	\$ _____
		RURAL ADDRESSING FEE	\$ _____
		FLOOD PLAIN FEE	\$ _____
		INSPECTION FEE x _____	\$ _____
		OTHER	\$ _____
		TOTAL	\$ <i>777.00</i>

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/ FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	
WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION	
DATE	_____
BUILDING OFFICIAL	_____

911: 88 ACR N 5429

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-232

Please fill in the information within the black line. Please print.
PERMIT NEW CONST. REMODEL SOLAR
APPROVAL ADDITION MANU/HM GAS
FOR ELECTRICAL PLUMBING DEMO.
 OTHER _____

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

FOR OFFICE USE ONLY

RECEIVED

JUL 31 2023

BY: FRYNTICE

OWNERS NAME: Brandon & Katherine Merritt
 MAILING ADDRESS: _____

ZONE: A.P.N _____
 FR. YD: _____ RR. YD: _____ R-S YD: _____ L-S YD: _____
 ADD'L PERMIT (VARIANCE, FLOOD USE): _____

CITY: Verdon STATE: AZ ZIP: 85940

APPROVED BY P&Z DATE: _____ APPROVED T.P. DATE: _____

PHONE NUMBER: _____ EMAIL: _____

Parcel No. 106-42-011

JOB SITE ADDRESS: _____

DWIG. AREA _____ GARAGE AREA _____ ACC. AREA _____ NO. BDRMS _____
 OCC: _____ LENGTH: _____ WIDTH: _____ HEIGHT: _____

CONTRACTOR NAME: _____ ADDRESS: _____ PHONE: _____

APPROVED BLDG. DATE: 080223
Frank Dellen

CITY: _____ STATE: _____ ZIP: _____

DWIG AREA S.F. @ \$ _____
 GARAGE S.F. @ \$ _____
 ACCESSORY S.F. @ \$ _____

ARIZONA LICENSE NO. _____ CLASS: _____

WORK TO BE DONE: Water pull SWITCH OVER
 UTILITY INFO. WATER: _____ SEWER: _____
 ELECT: X GAS: _____

TOTAL VALUATION \$ _____
 BUILDING FEE \$ _____
 PLAN REVIEW \$ _____
 INVESTIGATION FEE \$ _____
 ELECTRICAL PERMIT FEE \$ 62.00
 RURAL ADDRESSING FEE \$ _____
 FLOOD PLAIN FEE \$ _____
 INSPECTION FEE X \$ _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

DATE: 7/31/23 SIGNATURE: [Signature]

OTHER \$ _____
 TOTAL \$ 62.00

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION

DATE _____
 BUILDING OFFICIAL _____

Apache County Building Department
75 W. Cleveland · PO Box 238
St. Johns, AZ 85936-0238
(928) 337-7527

PERMIT NO.
2023-231

Please fill in the information within the black line. Please print.
PERMIT APPROVAL FOR
 NEW CONST. REMODEL SOLAR
 ADDITION MANU.HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER _____

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

FOR OFFICE USE ONLY

OWNERS NAME: **John Rippy**
 MAILING ADDRESS: _____
 CITY: **Show Low** STATE: **AZ** ZIP: **85901**

PHONE NUMBER: _____ EMAIL: _____
 Parcel No. **106-22-027V**
 JOB SITE ADDRESS: _____

CONTRACTOR NAME: _____
 ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____
 ARIZONA LICENSE NO. _____ CLASS: _____

WORK TO BE DONE: **Gre Tag**
 UTILITY INFO. WATER: _____ SEWER: _____
 ELECT: _____ GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.
 DATE: **8-7-23** SIGNATURE: **John Rippy**

ZONE: **AC** A.P.N. **106-22-027V**
 FR. YD: _____ RR. YD: _____ R-S YD: _____ L-S YD: _____

ADD'L PERMIT (VARIANCE, FLOOD USE): _____
 APPROVED BY P&Z DATE: _____ APPROVED F.P DATE: _____

DWLG. AREA _____ GARAGE AREA _____ ACC. AREA _____ NO. BDRMS _____
 OCC: _____ LENGTH: _____ WIDTH: _____ HEIGHT: _____

APPROVED BLDG DATE: **8-7-23**
Francis Bell

DWLG AREA S.F. @ \$ _____
 GARAGE S.F. @ \$ _____
 ACCESSORY S.F. @ \$ _____

TOTAL VALUATION \$ _____
 BUILDING FEE \$ _____
 PLAN REVIEW \$ _____
 INVESTIGATION FEE \$ _____
 ELECTRICAL PERMIT FEE \$ **62.00**
 RURAL ADDRESSING FEE \$ _____
 FLOOD PLAIN FEE \$ _____
 INSPECTION FEE X \$ _____
 OTHER \$ _____
 TOTAL \$ **62.00**

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR/FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

WHEN VALIDATED BELOW THIS BECOMES A
CERTIFICATE OF OCCUPANCY/ COMPLETION
 DATE _____
 BUILDING OFFICIAL _____

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-230

Please fill in the information within the black line. Please print.
PERMIT APPROVAL FOR
 NEW CONST. REMODEL SOLAR
 ADDITION MANU.HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER _____

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

FOR OFFICE USE ONLY

RECEIVED

AUG 07 2023

BY: *RJN*

OWNERS NAME: Raymond Meyer
 MAILING ADDRESS: _____
 CITY: DY STATE: AZ ZIP: 855041
 PHONE NUMBER: _____ FMAIL: _____
 Parcel No. 106-37-234
 JOB SITE ADDRESS: _____
 CONTRACTOR NAME: John Williams
 ADDRESS: 237 RR 3130 PHONE: 928-532-5342
 CITY: Verdon STATE: AZ ZIP: 85940
 ARIZONA LICENSE NO. _____ CLASS: _____
 WORK TO BE DONE: In Steel Reinforce
 UTILITY INFO. WATER: _____ SEWER: _____
 ELECT: _____ GAS: _____

ZONE: _____ A.P.N. _____
 RR.YD: _____ RR.YD: _____ R-S YD: _____ L-S YD: _____
 ADD'L PERMIT (VARIANCE, FLOOD USE): _____
 APPROVED BY P&Z DATE: _____ APPROVED F.P DATE: _____
 DWLG. AREA GARAGE AREA ACC. AREA NO. BDRMS
 OCC. LENGTH: _____ WIDTH: _____ HEIGHT: _____
 APPROVED BY: *John Williams* DATE: 8-7-23
 DWLG AREA S.F. @ \$ _____
 GARAGE S.F. @ \$ _____
 ACCESSORY S.F. @ \$ _____
 TOTAL VALUATION \$ _____
 BUILDING FEE \$ _____
 PLAN REVIEW \$ _____
 INVESTIGATION FEE \$ _____
 ELECTRICAL PERMIT FEE \$ 102.00
 RURAL ADDRESSING FEE \$ _____
 FLOOD PLAIN FEE \$ _____
 INSPECTION FEE X \$ _____
 OTHER \$ _____
 TOTAL \$ 102.00

WHEN VALIDATED BELOW THIS BECOMES A
CERTIFICATE OF OCCUPANCY/ COMPLETION
 DATE _____
 BUILDING OFFICIAL _____

FOOTING	
PRE-SLAB	
STEM WALL	
FLOOR / FRAMING	
SHEER NAIL	
ELEC. METER	
ROUGH COMBO	
DRY WALL	
BLDG. FINAL	
MISC.	

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.
 DATE: 8-7-23 SIGNATURE: *John Williams*

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85936-0238
 (928) 337-7527

PERMIT NO.
 2023-229

Please fill in the information within the black line. Please print.
PERMIT APPROVAL FOR
 NEW CONST. REMODEL SOLAR
 ADDITION MANU/HM GAS
 ELECTRICAL PLUMBING DEMO.
 OTHER _____

OWNERS NAME: Jeff Jennings
MAILING ADDRESS: _____
CITY: Show Low **STATE:** AZ **ZIP:** 85902
PHONE NUMBER: _____ **EMAIL:** _____
Parcel No.: 212-18-013C
JOB SITE ADDRESS: _____
CONTRACTOR NAME: OWNER BUILDER & NAVOPACHE ELECT COOP
ADDRESS: _____ **PHONE:** _____
 PO BOX 3353, SHOW LOW AZ 85902 480-290-1649
CITY: SHOW LOW **STATE:** AZ **ZIP:** 85902
ARIZONA LICENSE NO.: _____ **CLASS:** _____
WORK TO BE DONE: INSTALL PERMANENT FREE STANDING METER / SES
UTILITY INFO: WATER: _____ SEWER: _____
 ELECT: GAS: _____

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all the information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.
 DATE: 8/2/2023
 SIGNATURE: 

PROVISIONS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. The Building Official is authorized to grant, in writing, one (1) or more extensions of time, for periods not more than 180 days each. The extension shall be done in writing and justifiable cause demonstrated. (IRC R105.5) Work is considered to be abandoned if it has not had a "passed" inspection in the past 180 days.

ZONE: A.P.N _____
FR. YD: _____ **RR. YD:** _____ **R-S YD:** _____ **L-S YD:** _____
ADD'L PERMIT (VARIANCE, FLOOD USE): _____
APPROVED BY P&Z: _____ **DATE:** _____ **APPROVED F.P. DATE:** _____
DWLG. AREA: _____ **GARAGE AREA:** _____ **ACC. AREA:** _____ **NO. BDRMS:** _____
OCC: _____ **LENGTH:** _____ **WIDTH:** _____ **HEIGHT:** _____
APPROVED BLDG. DATE: 8-2-2023
DWLG AREA: S.F. _____ @ \$ _____
GARAGE: S.F. _____ @ \$ _____
ACCESSORY: S.F. _____ @ \$ _____
TOTAL VALUATION: \$ _____
BUILDING FEE: \$ _____
PLAN REVIEW: \$ _____
INVESTIGATION FEE: \$ _____
ELECTRICAL PERMIT FEE: \$ _____
RURAL ADDRESSING FEE: \$ _____
FLOOD PLAIN FEE: \$ _____
INSPECTION FEE x _____: \$ _____
OTHER: \$ _____
TOTAL: \$ _____

FOR OFFICE USE ONLY

WHEN VALIDATED BELOW THIS BECOMES A CERTIFICATE OF OCCUPANCY/ COMPLETION
 DATE: _____
 BUILDING OFFICIAL: _____
 FOOTING _____
 PRE-SLAB _____
 STEM WALL _____
 FLOOR/ FRAMING _____
 SHEER NAIL _____
 ELEC. METER _____
 ROUGH COMBO _____
 DRY WALL _____
 BLDG. FINAL _____
 MISC. _____