



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

OCT 07 2024

Permit # 2024-294

Apache County Building Safety Department

RECEIVED

MANUFACTURED HOME PERMIT APPLICATION

PROPERTY OWNER INFORMATION

| | |
|-----------------------------|-----------------------------------|
| Owners Name: Cynthia Rattle | Phone: - |
| Mailing Address: | Parcel number: A.P.N. 107-37-029A |
| City: Surprise | Construction Address: |
| State: AZ | Valuation: \$ 154,795 |
| Zip: 85387 | |
| E-mail Address: | |

MANUFACTURE HOME INFORMATION

| | |
|---------------------------------------|---|
| Unit Manufacturer: Carco West | Date of Manufacture: Oct 2024 |
| Unit Serial Number A: LA130A24-26414A | HUD Number: |
| Unit Serial Number B: LA130A24-26414B | Septic Permit Number: Submittal |
| # of Bedrooms: 3 | Snow Roof Load: 40 |
| # of Bathrooms: 2 | Areas within Apache County have specific Roof Snow load requirements. Homes which do not meet the standard will require an accessory "snow roof" construction over the home. Additional permitting will be required in these instances. |
| Length: 56' | Width: 28' |

INSTALLER INFORMATION

| | |
|--|--|
| Installer Name: AZ MH Express Services LLC | Installer Address: 1901 W. Deer of Clubs # 730 |
| Installer License Number: 9116 | Installer Phone Number: 928-200-1412 |
| City: Showlow | Email: AZexpressservices@gmail.com |
| State: AZ | Zip Code: 85901 |

DEALER INFORMATION

| | |
|--|---|
| Dealers Name: The Home Source | Dealers License Number: 7845 |
| Dealers Mailing Address: 2250 E. Deer of Clubs | Dealers E-mail Address: conrad@thehomesource2.com |
| Dealers Phone Number: 928-532-5117 | Dealers City: Showlow |
| | State: AZ |
| | Zip Code: 85901 |

Dealer Signature: *[Signature]*

Date: 10/2/24

Building Official: *[Signature]*

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

Date: 10/2/24

\$107.00

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

PERMIT NO.
2024-293

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 Farouk
MAILING ADDRESS:
CITY: Phoenix STATE: AZ ZIP:
PHONE: EMAIL:
Parcel No. 106-22-028-R
JOB SITE ADDRESS:
CONTRACTOR NAME: Kay Electric
ADDRESS: PO Box 15710 PHONE: 92853102999
CITY: Taylor STATE: AZ ZIP: 85939
ARIZONA LICENSE NO. 1581088 CLASS: R-11
WORK TO BE DONE: Add Pedestal
UTILITY INFO. WATER: SEWER:
ELECT: X GAS:

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 106-22-028 R
FR. YD: RR. YD: R-S YD: L-S YD:
ADD'L PERMIT (VARIANCE, FLOOD USE):
APPROVED BY PRZ DATE: APPROVED F.P DATE:
DWIG. AREA GARAGE AREA ACC. AREA NO. BDRMS
OCC: LENGTH: WIDTH: HEIGHT:
APPROVED DATE: 10-7-2024
DWIG AREA S.F. @ \$
GARAGE S.F. @ \$
ACCESSORY S.F. @ \$
TOTAL VALUATION \$
BUILDING FEE \$
PLAN REVIEW \$
INVESTIGATION FEE \$
ELECTRICAL PERMIT FEE \$ 22.00
RURAL ADDRESSING FEE \$
FLOOD PLAIN FEE \$
INSPECTION FEE X \$
OTHER \$
TOTAL \$ 62.00

FOR OFFICE USE ONLY

RECEIVED

SEP 30 2024

BY: SP

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.

Apache County Building Department
 75 W. Cleveland • PO Box 238
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 (928) 337-7527

PERMIT NO.
 2024-292

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: Tim Foss / Armando Quinoz
MAILING ADDRESS: _____
CITY: Val **STATE:** AZ **ZIP:** 85641
PHONE NUMBER: _____ **EM:** _____
 Parcel No. 101-47-020C

CONTRACTOR NAME: U
ADDRESS: _____ **PHONE:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____
ARIZONA LICENSE NO. _____ **CLASS:** _____

WORK TO BE DONE: Shop/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: 9-23-24 **SIGNATURE:** Tim Foss

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.** 101-47-020C
FR. YD: 50T **RR. YD:** 50T **R-S YD:** 50T **L-S YD:** 50T
ADD'L PERMIT (VARIANCE, FLOOD USE): _____

APPROVED BY P&Z: _____ **DATE:** 10/17/24 **APPROVED F.P:** _____ **DATE:** 9/23/24
DWLG. AREA: _____ **GARAGE AREA:** _____ **ACC. AREA:** _____ **NO. BDRMS:** _____
OCC: _____ **LENGTH:** 39 **WIDTH:** 30 **HEIGHT:** 12

APPROVED BLDG: _____ **DATE:** _____

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

TOTAL VALUATION \$ 52,217
BUILDING FEE \$ 428.00
PLAN REVIEW \$ 50.00
INVESTIGATION FEE \$ _____
ELECTRICAL PERMIT FEE \$ _____
RURAL ADDRESSING FEE \$ _____
FLOOD PLAIN FEE \$ _____
INSPECTION FEE X \$ _____
OTHER \$ _____
TOTAL \$ 478.00

Pd. 1836
10-7-24
df

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RECEIVED

SEP 23 2024

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.
 2024-291

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 *Relocate panel*

OWNERS NAME: *George Rollins*
MAILING ADDRESS:

CITY: *Eagar* **STATE:** *Az* **ZIP:** *85925*
PHONE NUMBER: **EMAIL:**

Parcel No. *102-35-031*
JOB SITE ADDRESS:

CONTRACTOR NAME: *Bruce Drenler*
ADDRESS:

CITY: *McTigue* **STATE:** *Az* **ZIP:** *85932*
ARIZONA LICENSE NO. **CLASS:**

WORK TO BE DONE: *Relocate & upgrade electric panel pole to wellhouse*
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: *10/3/24* **SIGNATURE:** *Bruce Drenler*

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:**

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

APPROVED BLDG: **DATE:**

DWL'G 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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 OCT 03 2024
 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.
 2024-296

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: CHRISTOPHER C. PEREZ
MAILING ADDRESS: _____
CITY: Varman **STATE:** AZ **ZIP:** 85940
PHONE: _____
Parcel No.: 106-37-004
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: _____

APPROVED BY P&Z DATE: _____ **APPROVED F.P.** DATE: _____
DWIG. AREA GARAGE AREA ACC. AREA NO. BDRMS
OCC: LENGTH: WIDTH: HEIGHT:
APPROVED BLDG: DATE: 10-2-24
DW'LG 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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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. | |

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 BY: AP

Apache County Building Department
 75 W. Cleveland · PO Box 238
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PERMIT NO.
 2024-289

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: I. Duncan & Lorna J Fletcher
MAILING ADDRESS:
CITY: Vernon **STATE:** AZ **ZIP:** 85940
PHONE NUMBER: **EMAIL:**

Parcel No. 106-61-010
JOB SITE ADDRESS:

CONTRACTOR NAME: Owner
ADDRESS: **PHONE:**
CITY: **STATE:** **ZIP:**
ARIZONA LICENSE NO. **CLASS:**

WORK TO BE DONE: Metal shop/garage on concrete slab.
No utilities
UTILITY INFO: WATER: NA SEWER: NA
 ELECT: NA GAS: NA

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: 09/11/2024
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.** 166-61-010
FR. YD: 100' **RR. YD:** 55' **R-S YD:** 100' **L-S YD:** 100'
ADD'L PERMIT (VARIANCE, FLOOD USE):

APPROVED BY PR&Z:
DATE: 10-2-24
APPROVED F.P. DATE: 8-13-24
DWLG. AREA: 720 **GARAGE AREA:** **ACC. AREA:** **NO. BDRMS:**
OCC. LENGTH: 30 **WIDTH:** 24 **HEIGHT:** 11

APPROVED BLDG. DATE: 10/2/24
DWLG. AREA: **S.F.:** 720 **@ \$:** 44.63
GARAGE: **S.F.:** **@ \$:**
ACCESSORY: **S.F.:** **@ \$:**

TOTAL VALUATION: \$ 32,133
BUILDING FEE: \$ 304.00
PLAN REVIEW: \$ 50.00
INVESTIGATION FEE: \$
ELECTRICAL PERMIT FEE: \$
RURAL ADDRESSING FEE: \$
FLOOD PLAIN FEE: \$
INSPECTION FEE X: \$

OTHER: \$
TOTAL: \$ 354.00

DATE: 09/11/2024
SIGNATURE:

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| | |
|---------------|--|
| 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.
 2024-288

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.

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SEP 25 2024

BY: [Signature]

OWNERS NAME: Brent Phillip
MAILING ADDRESS:
CITY: Glendale **STATE:** AZ **ZIP:** 85306
PHONE NUMBER: **EMAIL:**
Parcel No. # 101-69-007
JOB SITE ADDRESS:
CONTRACTOR NAME: Bryce Slade
ADDRESS: 6305 River Road **PHONE:** 428-245-1754
CITY: Eagar **STATE:** AZ **ZIP:** 85925
ARIZONA LICENSE NO. 319483 **CLASS:** B
WORK TO BE DONE: House
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: 9-25-24 **SIGNATURE:** [Signature]

ZONE: AG **A.P.N.** 101-69-007
FR. YD: 100' **RR. YD:** 100' **R-S YD:** 100' **L-S YD:** 100'
ADD'L PERMIT (VARIANCE, FLOOD USE):
APPROVED BY P&Z: [Signature] **DATE:** 9/30/24
DWIG. AREA: 1703 **GARAGE AREA:** 576 **ACC. AREA:** 1260 **NO. BDRMS:** 2
OCC: **LENGTH:** **WIDTH:** **HEIGHT:** 25.6
APPROVED BLDG: **DATE:**
DWLG AREA: S.F. 1703 @ \$ 112.65
GARAGE: S.F. 576 @ \$ 44.63
ACCESSORY: S.F. 1260 @ \$ 44.63
TOTAL VALUATION: \$ 273,781
BUILDING FEE: \$ 1248.50
PLAN REVIEW: \$ 50.00
INVESTIGATION FEE: \$ _____
ELECTRICAL PERMIT FEE: \$ _____
RURAL ADDRESSING FEE: \$ 5.00
FLOOD PLAIN FEE: \$ 25.00
INSPECTION FEE X: \$ _____
OTHER: \$ _____
TOTAL: \$ 1,328.50

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.
 2024-287

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: Soffrey Guiso

MAILING ADDRESS: _____

CITY: Cornuda **STATE:** AZ **ZIP:** 85921

PHONE NUMBER: _____ **EMAIL:** _____

Parcel No.: 201-55-043

JOB SITE ADDRESS: _____

CONTRACTOR NAME: Soffrey Guiso

ADDRESS: _____ **PHONE:** _____

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

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

WORK TO BE DONE: Shed **UTILITY INFO:**
20 STALL @ Graceland **WATER:** _____ **SEWER:** _____
Building on property
Building 12x24 **ELECT:** **GAS:** _____
ADD ELECT TO Building

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: 9/19/24 **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.** 201-55-043

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: N **LENGTH:** 24 **WIDTH:** 12 **HEIGHT:** 12

APPROVED BLDG. DATE: 10-1-24

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

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

ACCESSORY: _____ **S.F. @ \$:** 44.63

TOTAL VALUATION: \$12,853

BUILDING FEE: \$144.00

PLAN REVIEW: \$50.00

INVESTIGATION FEE: _____
ELECTRICAL PERMIT FEE: _____
RURAL ADDRESSING FEE: _____
FLOOD PLAIN FEE: _____
INSPECTION FEE X: _____
OTHER: _____
TOTAL: \$194.05

FOR OFFICE USE ONLY

RECEIVED

SEP 09 2024

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.
 2024-286

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 & Allison Bryce
MAILING ADDRESS:
CITY: Thatcher **STATE:** AZ **ZIP:** 85552
PHONE NUMBER: **F.MAIL:**
 Parcel No. 101-35-002
JOB SITE ADDRESS:
CONTRACTOR NAME: Diamond 5 Construction
ADDRESS: P.O. Box 1532 **PHONE:** 928-432-2874
CITY: Thatcher **STATE:** AZ **ZIP:** 85552
ARIZONA LICENSE NO.: 330090 **CLASS:** KB-2
WORK TO BE DONE: Addition of living room and bedrooms & 2 bathrooms
UTILITY INFO: WATER: _____ SEWER: septic
ELECT: Electric 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: 8/27/24 **SIGNATURE:** Ryan Pomeroy

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ZONE: AG **A.P.N.** 101-35-002
FR. YD.: **RR. YD.:** **R-S YD.:** **L-S YD.:**
ADD'L PERMIT (VARIANCE, FLOOD USE):
APPROVED BY PERM.: **DATE:** 10-1-24 **APPROVED F.P. DATE:** 9/10/24
DW.G. AREA: **GARAGE AREA:** **ACC. AREA:** **NO. BDRMS:**
OCC.: **LENGTH:** 45 **WIDTH:** 20 **HEIGHT:** 17
APPROVED BUDG.: **DATE:** 10-1-24
DWLG AREA: S.F. 908 @ \$ 112.65
GARAGE: S.F. @ \$
ACCESSORY: S.F. @ \$
TOTAL VALUATION: \$ 101,385
BUILDING FEE: \$ 646.50
PLAN REVIEW: \$ 50.00
INVESTIGATION FEE: \$
ELECTRICAL PERMIT FEE: \$
RURAL ADDRESSING FEE: \$
FLOOD PLAIN FEE: \$
INSPECTION FEE X: \$
OTHER: \$
TOTAL: \$ 696.50

FOR OFFICE USE ONLY

RECEIVED

SEP 10 2024

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.
 2024-285

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.

OWNERS NAME: Sharon Rogers
MAIL INCL ADDRESS: _____
CITY: Concho **STATE:** TX **ZIP:** 85924
PHONE NUMBER: _____ **EMAIL:** _____

ZONE: AG **A.P.N:** 212-66-141
FR. YD: 100T **RR. YD:** 100T **R-S YD:** 100T **L-S YD:** 100T
ADD'L PERMIT (VARIANCE, FLOOD USE): _____

Parcel No. 212-66-141
FOR SITE ADDRESS: _____
CONTRACTOR NAME: Shirley Boulder
ADDRESS: _____ **PHONE:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____

DWLG. AREA _____ **GARAGE AREA** _____ **ACC. AREA** _____ **NO. BDRMS** _____
OCC: 12 **LENGTH:** 40 **WIDTH:** 40 **HEIGHT:** 28
APPROVED BLDG: _____ **DATE:** _____

ARIZONA LICENSE NO. _____ **CLASS:** _____
WORK TO BE DONE: Shop
UTILITY INFO: **WATER:** _____ **SEWER:** _____
ELECT: _____ **GAS:** _____

DWLG AREA _____ **S.F.** _____ **@ \$** _____
GARAGE _____ **S.F.** _____ **@ \$** _____
ACCESSORY _____ **S.F.** 1600 **@ \$** 44.63
TOTAL VALUATION \$ 71,408
BUILDING FEE \$ 513.50
PLAN REVIEW \$ 50.00
INVESTIGATION FEE \$ _____
ELECTRICAL PERMIT FEE \$ _____
RURAL ADDRESSING FEE \$ _____
FLOOD PLAIN FEE \$ _____
INSPECTION FEE X \$ _____
OTHER \$ _____
TOTAL \$ 563.50

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: 9/11/24 **SIGNATURE:** Sharon Rogers

APPROVED BY PERM: _____ **DATE:** 9/24/24
APPROVED F.P: _____ **DATE:** 9/17/24

| | |
|---------------|--|
| 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 _____

RECEIVED
 SEP 11 2024
 BY: _____

FOR OFFICE USE ONLY

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

PERMIT NO.
 2024-284

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.

OWNERS NAME: **EMINES LLC**
 MAILING ADDRESS: _____
 CITY: **SAFFORD** STATE: **AZ** ZIP: **85548**
 PHONE NUMBER: _____ EMAIL: _____
 Parcel No. **101-13-020E**
 JOB SITE ADDRESS: _____
 CONTRACTOR NAME: _____
 ADDRESS: _____ PHONE: _____
 CITY: _____ STATE: _____ ZIP: _____
 ARIZONA LICENSE NO. _____ CLASS: _____

ZONE: **AG** A.P.N **101-13-020E**
 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: **10-1-24**

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**

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

WORK TO BE DONE: **ELECTRIC PANEL**
 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: **9/24/2024** SIGNATURE: *M. M. S. B. B. B.*

FOR OFFICE USE ONLY

RECEIVED

OCT 01 2024

BY: *RP*

COMPLETED

10-15-24

| | |
|---------------|--|
| 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: **10-15-24**
 BUILDING OFFICIAL: *R. J. H. H.*

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

PERMIT NO.
 2024-283

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

OCT 01 2024

BY: AP

OWNERS NAME: Terpine Wilcox

MAILING ADDRESS:

CITY: St Johns **STATE:** AZ **ZIP:** 85936

PHONE NUMBER: **EMAIL:**

Parcel No.: 203 M9352

JOB SITE ADDRESS:

CONTRACTOR NAME: Sunsecure Electric LLC

ADDRESS: PO Box 1459 **PHONE:** 6026945608

CITY: St Johns **STATE:** AZ **ZIP:** 85936

ARIZONA LICENSE NO.: 3333301 **CLASS:**

WORK TO BE DONE: Meter 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: 10/1/24 **SIGNATURE:** Terpine Wilcox

ZONE: AG **A.P.N.** 203-49-352

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:**

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.
 2024-282

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: Brady Peters
MAILING ADDRESS:
CITY: Lakeside **STATE:** AZ **ZIP:** 85929
PHONE NUMBER: **EMAIL:** p
Parcel No.: 107-44-004G
JOB SITE ADDRESS:
CONTRACTOR NAME: Peters Custom Homes
ADDRESS: 1849 Homestead Rd **PHONE:** 9285217323
CITY: Lakeside **STATE:** AZ **ZIP:** 85929
ARIZONA LICENSE NO.: 294776 **CLASS:** KB02
WORK TO BE DONE: Meter loop
UTILITY INFO.
 WATER: _____ SEWER: _____
 ELECT: GAS: _____
For Well Only

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.** 107-44-004G
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 BDDG **DATE:**
DWLG AREA **S.F.** **@ \$**
GARAGE **S.F.** **@ \$**
ACCESSORY **S.F.** **@ \$**
TOTAL VALUATION \$ _____
BUILDING FEE \$ _____
PLAN REVIEW \$ _____
INVESTIGATION FEE \$ _____
ELECTRICAL PERMIT FEE \$ 6200
RURAL ADDRESSING FEE \$ _____
FLOOD PLAIN FEE \$ _____
INSPECTION FEE X \$ _____
OTHER \$ _____
TOTAL \$ 6200

FOR OFFICE USE ONLY

RECEIVED
 SEP 30 2024
 BY: [Signature]

For Well 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 _____

DATE: 9/20/24
 SIGNATURE: [Signature]



Apache County Building Safety Department
 P.O. Box 238
 St. Johns, AZ 85936
 (928) 337-7527
 BY: *[Signature]*
 SEP 30 2024
 Permit # 2024-281

MANUFACTURED HOME PERMIT APPLICATION

| PROPERTY OWNER INFORMATION | |
|---|---|
| Owners Name: Patrick & Gloria Mitchell | Phone: _____ |
| Mailing Address: _____ | Parcel number: A.P.N. 106-84-042 |
| City: Clifton | Construction Address: _____ |
| State: AZ | Valuation: \$ 368,000 |
| Zip: 85533 | E-mail Address: _____ |
| MANUFACTURE HOME INFORMATION | |
| Unit Manufacturer: CMH Manufacturing West | Date of Manufacture: 24 |
| Unit Serial Number A: CW2024226TXARC | HUD Number: _____ |
| Unit Serial Number B: CW2024226TXBAC | Septic Permit Number: _____ |
| # of Bedrooms: 4 | Snow Roof Load: 40 |
| # of Bathrooms: 3 | Areas within Apache County have specific Roof Snow load requirements. Homes which do not meet the standard will require an accessory "snow roof" construction over the home. Additional permitting will be required in these instances. |
| Length: 72 | Width: 30 |
| INSTALLER INFORMATION | |
| Installer Name: Jeff Baldwin | Installer Address: P.O. Box 2905 |
| Installer License Number: 6940 | Installer Phone Number: 928-243-3907 |
| City: Snowflake | Email: Baldwin mrs@gmail.com |
| State: AZ | Zip Code: 85937 |
| DEALER INFORMATION | |
| Dealers Name: CMH Homes Inc. | Dealers License Number: 6849 |
| Dealers Mailing Address: 474 S. Main St. | Dealers E-mail Address: HC1045@gmail.com |
| Dealers Phone Number: 928-536-2336 | Dealers City: Snowflake |
| | State: AZ |
| | Zip Code: 85937 |

Dealer Signature: _____ Date: _____
 Building Official: *[Signature]*
 Building Official: _____
 I hereby certify I have read and examined this application and the pertaining documents, and know same to be true and correct.
 Date: 9/30/24

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

PERMIT NO.
 2024-280

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

OWNERS NAME: MARIA E COREZ

MAILING ADDRESS:

CITY: CONCHO **STATE:** AZ **ZIP:** 85976

PHONE NUMBER: _____ **EMAIL:** _____

Parcel No. 201-42-165C

JOB SITE ADDRESS: _____

CONTRACTOR NAME: _____

ADDRESS: _____ **PHONE:** _____

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

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

WORK TO BE DONE: Out Bv. 1 dnigs
UTILITY INFO.
WATER: **SEWER:**
ELECTR: **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: 09/30/24 **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.** 201-42-165C

FR. YD: 60 **RR. YD:** 35 **R-S YD:** 60 **L-S YD:** 60

ADD'L PERMIT (VARIANCE, FLOOD USE): 9/30/24

APPROVED BY P&Z: _____ **DATE:** 9/30/24

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

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

APPROVED BLDG. OFFICIAL: _____ **DATE:** 9-30-2024

| | | | |
|-----------------|------|------|------------|
| DWLG AREA | S.F. | @ \$ | |
| GARAGE | S.F. | @ \$ | 44.63 |
| ACCESSORY | S.F. | @ \$ | |
| TOTAL VALUATION | | | \$ 7,140.8 |

| | | |
|-----------------------|----|--------|
| BUILDING FEE | \$ | 513.50 |
| PLAN REVIEW | \$ | 56.00 |
| INVESTIGATION FEE | \$ | 28.00 |
| ELECTRICAL PERMIT FEE | \$ | 51.00 |
| RURAL ADDRESSING FEE | \$ | 10.00 |
| FLOOD PLAIN FEE | \$ | |
| INSPECTION FEE X | \$ | |
| OTHER | \$ | |
| TOTAL | \$ | 563.50 |

FOR OFFICE USE ONLY

RECEIVED

SEP 10 2024

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.
 2024-139

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
 MAY 15 2021

BY: 

OWNERS NAME: Jason & Autumn Bucher
MAILING ADDRESS: _____
CITY: Bullhead City **STATE:** AZ **ZIP:** 86044
PHONE NUMBER: _____
Parcel No.: 201-27-211
JOB SITE ADDRESS: _____
CONTRACTOR NAME: Owner
ADDRESS: _____ **PHONE:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____
ARIZONA LICENSE NO.: _____ **CLASS:** _____
WORK TO BE DONE: ELECTRICAL
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: 5/13/24 **SIGNATURE:** 

ZONE: A6 **APN:** 201-27-211
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 | 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 | \$62.00 | |

*1069
 5-13-24
 pd*

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

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

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

PERMIT NO.
 2024-240

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: Crossing Point LLC
MAILING ADDRESS: _____
CITY: Snowflake **STATE:** AZ **ZIP:** 85936
PHONE NUMBER: _____ **EMAIL:** _____
Parcel No.: 201-47-008
JOB SITE ADDRESS: _____
CONTRACTOR NAME: Mountain Construction Management
ADDRESS: S40 **PHONE:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____
ARIZONA LICENSE NO.: 333835 **CLASS:** K.B-2
WORK TO BE DONE: New Construction
UTILITY INFO: WATER: A SEWER: X
 ELECT: X GAS: _____
DATE: 7/25/24 **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.:** 201-47-008
FR. YD.: 28 **RR. YD.:** 30 **R-S YD.:** 12 **L-S YD.:** 15
ADD'L PERMIT (VARIANCE, FLOOD USE): _____
APPROVED BY: [Signature] **DATE:** 10/21/24 **APPROVED F.P.:** [Signature] **DATE:** 10/21/24
DWLG. AREA: 1037 **GARAGE AREA:** 515 **ACC. AREA:** 63 **NO. BDRMS:** 3
OCC.: 23 **LENGTH:** _____ **WIDTH:** _____ **HEIGHT:** _____
APPROVED BLDG.: [Signature] **DATE:** 10/21/24
DWLG. AREA: 1037 **S.F.:** 1037 **@ \$:** 112.65
GARAGE: 515 **S.F.:** 515 **@ \$:** 44.63
ACCESSORY: 63 **S.F.:** 63 **@ \$:** 44.63
TOTAL VALUATION: \$ 112,613
BUILDING FEE: \$ 790
PLAN REVIEW: \$ 50
INVESTIGATION FEE: \$ _____
ELECTRICAL PERMIT FEE: \$ _____
RURAL ADDRESSING FEE: \$ 5.00
FLOOD PLAN FEE: \$ 25.00
INSPECTION FEE X: \$ _____
OTHER: \$ 870.00
TOTAL: \$ 933.00

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: _____

*New Value + Fee
 Make smaller*

paid 63.00

Apache County Building Department
 75 W. Cleveland · PO Box 238
 St. Johns, AZ 85536-0238
 (928) 337-7527

PERMIT NO.
 2024-240

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

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: Crossing Point LLC
 MAILING ADDRESS: 970 S Main St
 CITY: Snowflake STATE: AZ ZIP: 85937
 PHONE NUMBER: 480 534 0000 EMAIL: Trish@crossingpointaz.com
 Parcel No. 201-47-008
 JOB SITE ADDRESS: 16 Mellon Ln Lot 8

CONTRACTOR NAME: Mountain Construction Management
 ADDRESS: SAO PHONE: _____
 CITY: _____ STATE: _____ ZIP: _____
 ARIZONA LICENSE NO. 333835 CLASS: KB-2

WORK TO BE DONE: New Construction
 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: 7/23/24 SIGNATURE: [Signature]

ZONE: A6 A.P.N. 201-47-008
 FR.YD: 28 RR.YD: 30 R-S.YD: 12 L-S.YD: 15
 ADD'L PERMIT (VARIANCE, FLOOD USE): _____

| | | | |
|---------------------------------|-------------------------|----------------------------------|---------------------|
| APPROVED BY: <u>[Signature]</u> | DATE: <u>8/27/24</u> | APPROVED F.P. <u>[Signature]</u> | DATE: <u>7/2</u> |
| DWLG. AREA: <u>1036</u> | GARAGE AREA: <u>420</u> | ACC. AREA: <u>567</u> | NO. BDRMS: <u>3</u> |
| OCC: <u>R3</u> | LENGTH: <u>418</u> | WIDTH: <u>33</u> | HEIGHT: <u>16</u> |

| | | | |
|-----------------------|------|------|----------------|
| DWLG AREA | S.F. | @ \$ | |
| GARAGE | S.F. | @ \$ | |
| ACCESSORY | S.F. | @ \$ | |
| TOTAL VALUE | | | <u>160,754</u> |
| BUILDING FEE | | | <u>853.00</u> |
| PLAN REVIEW | | | <u>50.00</u> |
| INVESTIGATION FEE | | | |
| ELECTRICAL PERMIT FEE | | | |
| RURAL ADDRESSING FEE | | | <u>5.00</u> |
| FLOOD PLAIN FEE | | | <u>25.00</u> |
| INSPECTION FEE X | | | |
| OTHER | | | |
| TOTAL | | | <u>933.00</u> |

FOR OFFICE USE ONLY

RECEIVED
 JUL 24 2024
 BY: [Signature]

VOID

| | |
|---------------|--|
| 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: _____